



2018 BENEFITS GUIDE



AP-R & STAFF: CALIFORNIA

Legal Statement

This guide provides highlights of Chipotle's employee benefit plans and programs. Coverage under any Chipotle employee benefit plan or program is subject to the rules, conditions, and restrictions that apply pursuant to the governing plan documents, including the summary plan descriptions (SPDs) and any applicable insurance policy or certificate. Chipotle reserves the right to interpret the plans' eligibility provisions. For complete details, you must review the governing plan documents. This guide provides new information about Chipotle's employee benefit plans and programs for 2018. Specifically, it provides changes to the following plans effective as of January 1, 2018:

- Chipotle Mexican Grill, Inc. 401(k) Plan — Plan Number 002
- Chipotle Health and Welfare Plan for Apprentice, General Manager, Restaurateur and Staff – Plan Number 510

Please keep this guide with your summary plan descriptions for the plans, as applicable to you, as it updates those documents. If any information in this guide or the SPD conflicts with the detailed plan documents, including insurance policies, such plan documents and insurance policies will govern. Chipotle reserves the right to amend, suspend, or terminate these plans at any time.

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Red is for action!
To receive this benefit, you must enroll for coverage during your first 30 days of employment.

Para un Glosario de los Términos de Beneficios en español vea la página 29. Si tiene preguntas adicionales en relación a los beneficios, por favor comuníquese con el Centro de Servicio de los Empleados al (877) 625-1919.

Get the Benefits You Want

Getting the benefits you want is easy when you follow these steps.

Eligibility

Benefits are available to all AP-R & Staff employees and their:

- **Legal or common law spouse** – For a common law spouse, you need to file a notarized Common Law Form* with the Benefits Team. For a legal spouse, marriage certificates will need to be filed with the Benefits Team.
- **Same-sex domestic partner** – You first need to file a notarized Domestic Partner Agreement* with the Benefits Team.
- **Children** – Dependent children will be eligible for coverage until the end of the month in which they reach age 26, regardless of access to other coverage. This applies even if your child is married, attends school full-time or lives with you, or is not your tax dependent.

*Proof of eligibility may be required at any time during the year. Find the necessary forms on the Benefits Hub at <https://benefits.unburritable.net>. Chipotle is required by law to collect the Social Security Number of each person enrolled in our Medical plan – including your covered dependents. Please Make sure you include the SSN (National ID) and Date of Birth for all of your covered dependents when you complete your benefits enrollment.

Enrolling for the First Time?

If you're new to Chipotle or have been promoted to an AP-R & Staff position, you must enroll within 30 days of your hire date or promotion.

Your next opportunity to enroll will be the next open enrollment or within 30 days of a qualified life event. See 'Making Changes During the Year' on page 5.

Steps to Enroll

Go to Workday at wd5.myworkday.com/chipotle to enroll in or make changes to your health coverage and reimbursement accounts. Log in with your:

User ID — EEID including leading zeros

Password — Existing Workday password

To reset your password, use the Forgot Password from the Workday login screen. If you still need assistance contact the Employee Service Center via email to WorkdayESC@chipotle.com or call (877) 625-1919.

Step 1: Enter your dependent information

Step 2: Choose your benefits, making sure to check the boxes next to each dependent's name you wish to enroll

Step 3: Click "Finish" to enroll

After You Enroll

If you enroll in a medical plan, Anthem or Kaiser will send one ID card for each person enrolled to your home. Contact Anthem or Kaiser if you need additional cards. If you need an ID card before yours arrives, register on the Anthem website at www.anthem.com or the Kaiser website at my.kp.org/chipotle to print a temporary one.

Reduce your medical premium and improve your health by participating in Wellness. (See page 8 for more details).

If you enroll in the dental and vision plans, an ID card and coverage information will be mailed to you shortly after your coverage begins. If you enroll in an Anthem medical plan, you will receive a separate prescription drug card from CVS Caremark. Prescription information will also be included on the back of your Anthem card.

When Coverage Begins

For new hires, most benefits begin the first of the month after 30 days of salaried employment. (Example: Hired/promoted March 15, benefits effective May 1.) The exceptions are:

- Your basic life, accidental death and dismemberment (AD&D), and Business Traveler's Accident coverage starts on your first day.
- Coverage under the voluntary plans (optional life/AD&D, 401(k), pet insurance, etc.) starts once the vendor accepts and approves your application.

Making Changes During the Year

If you have a qualified life event (you have or adopt a child, get married, or get divorced, for example), you can make related benefit changes within 30 days of the event.

For a complete list of qualified life events, see your Summary Plan Description (available on <https://benefits.unburritable.net>).

1

Go to Workday at wd5.myworkday.com/chipotle, then click "Change My Current Benefits" from the All About Me section where you will be prompted to enter dependent information and make coverage elections from the Benefits Worklet.

2

Proof of eligibility or event will be uploaded into Workday. Proof of event and dependent eligibility documents may include: birth certificate, final adoption paperwork, marriage certificate, notarized Certification of Common Law Spouse, notarized Domestic Partner Agreement, or final divorce decree.

For birth or adoption, your change will take effect on the date of the birth or adoption. All other changes take effect on the first of the month following the date of the event.

Keep in mind that you can make changes to most voluntary plans at any time during the year, with or without a qualified life event.

When Coverage Ends

- Medical, Rx, dental, and vision coverage ends for you and your dependents at the end of the month in your employment terminates, or the first of the month following 30 days from a change to a Crew, KM or SM position.
- Coverage for you and your eligible dependent(s) under the GuidanceResources® Employee Assistance Plan (EAP) continues for 18 months at no charge to you.
- Coverage for your other benefits ends on your date of termination or change to a Crew, KM or SM position. This includes your ability to incur additional expenses for or use of a flexible spending account debit card.
- You will have the opportunity to continue some benefits — medical, pharmacy, dental, vision, and flexible spending accounts — through COBRA for up to 18 months in most cases. Our COBRA administrator will send a notice to your home soon after your coverage ends. You'll have 60 days to enroll and send in your payment. Keep in mind that under COBRA, you pay the full cost of coverage on a monthly basis. If you miss a payment, your coverage will end.

Review your 2018 Costs

For most benefits, you and Chipotle share the cost, with Chipotle paying the majority. The amounts you pay per pay period are shown here.

Medical

	Employee Only	Employee + Spouse/Partner	Employee + Child(ren)	Employee + Family
Plan 1: Kaiser HMO Plan				
Biweekly	\$53.94	\$155.85	\$120.03	\$216.28
Plan 2: Low Deductible PPO² Plan				
Biweekly	\$67.78	\$159.17	\$141.12	\$225.96
Plan 3: Consumer Directed Health Plan (CDHP)²				
Biweekly	\$42.64	\$107.64	\$93.36	\$150.55

Reduce Your Premiums

Chipotle wants to help you optimize your health and wealth by participating in the Chipotle Wellness Plan (see page 8 for additional details). If you participate, you can receive up to \$700 or \$1,400 in combined premium reductions and wellness rewards annually and improve your health at the same time.

Take Action

Premium Reductions* and Wellness Rewards	Employee Only Or Employee Plus Children	Employee Plus Spouse Or Employee Plus Family
1.) Register on www.ChipotleWellness.com	\$400	\$800
2.) Get a biometric screening	(\$20 reduction per bi-weekly pay period)	(\$40 reduction per bi-weekly pay period)
3.) Meet the 2018 Healthy Criteria (or participate in a reasonable alternative)		
Participate in wellness programs and challenges throughout the year	\$300	\$600

* Per pay period reduction will begin the first paycheck in April or the first paycheck of the month following validation of completion.³ The sooner you obtain your biometric measures, the sooner your reduced premium will begin.

¹Health Maintenance Organization — In-network benefits only.

²Preferred Provider Organization — In-network and out-of-network services available.

³If you terminate employment, change to an hourly position or drop your salaried medical coverage during the year, the wellness credit may decrease or end with the last salaried medical plan deduction.

Dental

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Base Plan				
Biweekly	\$5.92	\$12.27	\$13.08	\$20.36
Buy-Up Plan				
Biweekly	\$9.74	\$24.48	\$25.64	\$38.88

Vision

Chipotle pays the full cost of vision coverage for you in the Base Plan.

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Base Plan				
Biweekly	\$0.00	\$2.44	\$1.93	\$4.33
Buy-Up Plan				
Biweekly	\$4.28	\$11.00	\$9.63	\$16.10

Life, Accident and Disability Insurance

Chipotle pays the full cost of your basic life and AD&D insurance and dependent life insurance, as well as your Short-Term and Long-Term Disability. Your cost for optional life insurance depends on the amount of coverage you choose and the age of the person to be covered.

Age	Per Pay Period	Age	Per Pay Period
	Rate per \$10,000*		Rate per \$10,000*
<30	\$.30	50-54	\$1.22
30-34	\$.41	55-59	\$2.28
35-39	\$.47	60-64	\$3.44
40-44	\$.66	65-69	\$6.33
45-49	\$.79	70+	\$10.03

*All amounts are subject to medical underwriting.

Example: If you are age 36 and buy \$50,000 of optional insurance, you would pay \$.47 x 5 (\$50,000 ÷ \$10,000) for a total of \$2.35 per paycheck.

Optional Accidental Death and Dismemberment

The cost for coverage is \$0.18 per pay period for every \$10,000 in coverage. For example, if you or your spouse wants to buy \$30,000 in coverage, you will pay \$0.54 per pay period [$\$0.18 \times 3 (\$30,000 \div \$10,000)$].

Take Action

Wellness

Chipotle Wellness aims to create an innovative culture of wellbeing by providing you physical, financial, emotional and community resources to inspire each individual employee to live their best life.

Preventing and/or managing issues like high cholesterol, excess weight, high stress levels, high blood pressure and depression will result in a longer, healthier, happier life. And, you will be rewarded with health care premium reductions and wellness rewards as well.

Chipotle has partnered with our wellness provider to keep your activity and your results completely confidential.

Start By Knowing Your Health Measurements and Earn \$400 in Premium Reductions

Program	Participation
Know Your Numbers THEN....	Obtain biometric measures at a preventive care visit or Chipotle sponsored biometric screening event: Cholesterol, Blood Pressure, Blood Glucose and BMI. You can receive a screening at your doctor's office, LabCorp or by attending a Chipotle sponsored screening event. Visit www.chipotlewellness.com to register for a screening and download the necessary results form.
Know Your Risk	Compare your screening results to the 2018 wellness criteria below. If 3 out of 4 of your numbers meet the criteria or you participate in a reasonable alternative, you will be eligible for the premium reduction.

Upon receipt of this validation, your insurance deductions will be reduced depending on your coverage level and spouse/domestic partner participation. (See page 6 for details.)

2018 Wellness Criteria

Wellness Screening	2018 Criteria (Meet 3 out of 4)
Body Mass Index (kg/m ²)	≤ 24.9
Blood Pressure (mm/Hg)	≤ 120/80
Total Cholesterol (mg/dL)	≤ 200
Blood Glucose (mg/dL)	≤ 100

Our wellness provider only provides Chipotle with the name, date of completion, and confirmation of meeting criteria in order to administer the premium reductions.

Stay Engaged Throughout The Year And Earn \$300 In Wellness Rewards

Wellness is a lifestyle, not just a program or quick way to reduce your premiums. Participate in online programs at www.chipotlewellness.com, set and track personal goals, get involved in challenges that promote physical or nutritional activity and improve your health.

If you continue to participate in wellness programs and challenges during the year and you'll be rewarded for each activity you complete. Redeem your rewards for gift cards at your favorite retailers and brands or choose to donate your rewards to a charitable organization.

Details

Read complete program details posted in the Wellness Plan document on <https://benefits.unburritable.net>.

Medical

Chipotle offers three medical plans. Each provides benefits for preventive care, office visits, hospitalization, and surgery. They differ in which providers you can use and how much you pay for services. Prescription drug coverage for Anthem plans is administered by CVS Caremark³.

	Plan 1 Kaiser ¹ Plan	Plan 2 Low Deductible PPO ² Plan	Plan 3 CDHP ²
Physician Choice	You must use physicians, hospitals, and pharmacies in a designated Kaiser facility.	You can use any physician, hospital, or pharmacy, but the plan pays higher benefits — and you pay less — when you use in-network providers.	
Plan Network	Kaiser facilities available on www.kp.org	Anthem BlueCard PPO	
Blue Distinction Centers	Not applicable	Blue Distinction Centers have a proven track-record for delivering better results — including fewer complications and readmissions — than hospitals without these recognitions.	
Out-of-Network Benefits	None, except in certain emergencies. Your care will not be covered if you use an out-of-network provider.	With out-of-network providers, the plan reimburses expenses up to 125% of Medicare-allowed charges. As a result, you are responsible for any amounts above this limit, in addition to your deductible and coinsurance. Deductibles and out-of-pocket maximums are higher and plan coverage is lower for out-of-network services.	
Out-of-Pocket Costs	You pay a copay for some services (office visits, prescription drugs, etc.).	Compared to the CDHP, this plan has a lower deductible and out-of-pocket maximum, but your per pay period premium is higher.	This plan has a higher deductible and out-of-pocket maximum but also has the lowest premium per pay period.
	Once you have satisfied the out-of-pocket maximum, the insurance pays 100% of costs for the remainder of the calendar year.		

¹Health Maintenance Organization (i.e. In-network benefits only).

²Preferred Provider Organization

³See cost-share information on pages 10-11 and additional details on page 12.

*If Anthem network coverage is not available where you live, contact the Employee Service Center at 877.625.1919 for details on a possible out-of-area plan.

Don't Forget to Use Preventive Care!

Preventive care helps identify potential health risks early when they are easier and less costly to treat.

1. Use a network doctor. Find one using the Find a Doctor tool on www.anthem.com or my.kp.org/chipotle.
2. Know what's covered. Network preventive care services, such as physical examinations, related laboratory and X-rays, Pap tests, mammograms, prostate and colorectal screenings including colonoscopy, and immunizations excluding travel vaccines, are fully covered, with no cost to you (subject to certain age-appropriate and frequency guidelines). To see what else is covered, visit www.Anthem.com or, if you're in the HMO, my.kp.org/chipotle.

Details

- **Finding network providers saves you money — and it's easy to do.** To find network physicians and hospitals near you, visit www.Anthem.com and click "Find a Doctor." Enter your ZIP code and answer a few questions about the type of provider you're looking for. When asked to choose your plan network, select the Blue Card PPO network.

Medical Plan Comparison

FIRST →

you may pay a deductible

Calendar Year Deductible (Individual/Family)

**Plan 1
Kaiser¹ Plan**

In-Network Only

None

THEN →

you and the plan share costs

(You either pay a co-pay for service or coinsurance⁴)

Office Visit (Routine/Specialist)

\$25 co-pay/\$35 co-pay

Preventive Care
Adult-Once every 12 months
Child-Per age schedule

100%

Maternity Care
Prenatal
Hospitalization

100% (scheduled prenatal care)
\$250 co-pay per admission

Urgent Care

\$25 per visit

Emergency Room
(Waived if admitted directly to hospital)

\$125 per visit

Labs and X-Rays

100%

High-tech Imaging (MRI, CT Scan)

100%

Inpatient Hospital

\$250 co-pay per admission

Outpatient Surgery

\$100 co-pay per procedure

Mental Health
Inpatient
Outpatient

\$250 co-pay per admission
\$25 co-pay per indiv. therapy visit/
\$12 per group therapy visit

Substance Abuse
Inpatient
Outpatient

\$250 co-pay per admission
\$25 co-pay per indiv. therapy visit/
\$5 per group therapy visit

Prescriptions

Retail (Up to 30-day supply)

Generic: \$10 co-pay
Brand Name: \$25 co-pay

Mail-Order (Up to 90-day supply)

Generic: \$20 co-pay
Brand Name: \$50 co-pay

NEXT →

you meet your out-of-pocket maximum

(And the plan starts to pay 100% of remaining eligible expenses for the year)

Medical Out-of-Pocket Maximum⁵ (Person/Family)

\$2,000/\$4,000

Prescription Drug Out-of-Pocket Maximum (Person/Family)

Combined with medical

¹ Health Maintenance Organization

² Preferred Provider Organization

³ Out-of-network expenses are subject to limits at 125% of Medicare allowed charges. You pay coinsurance and any amount above this limit.

⁴ The coinsurance rate shown is the amount the plan pays.

Medical Plan Resources

Anthem offers several resources to help you manage your health care and stay healthy. These programs are free and available to you and your covered dependents when you enroll in a Chipotle medical plan.

Log on to www.Anthem.com to set up a personalized profile for you and your covered dependents. Then, take advantage of the online tools and resources to help you:

Manage Your Health Care	Access your medical coverage and review your claims. See the actual cost of services.
24-Hour Nurse Line	Call (800) 700-9184 any time when you have health questions or concerns.
Find Alternative Health Care Discounts	Find reduced rate programs for Alternative Health Care (these benefits may not be covered by your medical plan) and programs like Jenny Craig® and Weight Watchers®.
Workplace Transitions for People Touched by Cancer	Find resources to support employees touched by cancer by providing practical guidance to enhance quality of life for survivors.

Pharmacy Benefits

If you are in the Low Deductible PPO Plan or the Consumer Directed Health Plan and you take maintenance medications – medications you take on an ongoing basis, such as birth control or to control conditions such as high cholesterol or hypertension – you must purchase a 90-day supply either through the mail order program or at a CVS/Caremark pharmacy. If you want to continue purchasing 30-day supplies of maintenance medications at a retail pharmacy, you must call the CVS Customer Care number on your ID card to arrange it. If you don't call CVS Customer Care and continue to purchase 30-day supplies of maintenance medications, the plan will not pay any benefits; you will be responsible for the full cost of your medications.

For more information on how to take advantage of savings through mail order drugs, the use of generic vs. brand or to price your specific prescription drugs, visit <https://benefits.unburrritable.net>. Also, visit www.caremark.com to get more information as a plan member.

LiveHealth Online

Your visits to the doctor can be easier than ever. With LiveHealth Online, you'll be able to talk to a doctor or psychologist right away, any time of the day or night. See a doctor with a smartphone or tablet using the free LiveHealth Online app, or a computer with a webcam. Go to www.livehealthonline.com or call (855) 603-7985.

Set up an account	Fill out a confidential health summary that the doctor can review each time you request a visit. Talk to a doctor and pay just \$35 if you are enrolled in a Chipotle medical plan.
Talk with a doctor¹	Use the code CHIPOTLESALARY or your ID card when you register your account and speak with a doctor confidentially.
Save your visits	During your appointment, you can see the notes your doctor is making, and get a summary of your visit at the end of the call.

¹ Certain states have limitations on available services

Dental

Take Action

Chipotle offers dental through Delta Dental in two levels: a Base Plan or a Buy-Up Plan for additional coverage options and higher calendar year maximums.

BASE DENTAL PLAN	In-Network		Out-of-Network
	PPO Dentist	Premier Dentist	
Calendar Year Deductible Individual Family	\$50 \$150	\$50 \$150	\$50 \$150
	Plan Pays:	Plan Pays:	Plan Pays:
Preventive Services	100% with no deductible	100% with no deductible	100% of R&C charges, with no deductible
Basic Services	80%	80%	80% of R&C charges
Major Services	50%	50%	50% of R&C charges
Orthodontia Services Children up to age 19	100%, up to a \$1,500 lifetime maximum per child	100%, up to a \$1,000 lifetime maximum per child	100% of R&C charges, up to a \$1,000 lifetime maximum per child
Calendar Year Maximum	\$1,500 per person		

BUY-UP DENTAL PLAN	In-Network		Out-of-Network
	PPO Dentist	Premier Dentist	
Calendar Year Deductible Individual Family	\$50 \$150	\$50 \$150	\$50 \$150
	Plan Pays:	Plan Pays:	Plan Pays:
Preventive Services	100% with no deductible	100% with no deductible	100% of R&C charges, with no deductible
Basic Services	80%	80%	80% of R&C charges
Major Services Including implants	50%	50%	50% of R&C charges
Orthodontia Services Children & Adults	100%, up to a \$5,000 lifetime maximum per individual	100%, up to a \$5,000 lifetime maximum per individual	100% of R&C charges, up to a \$5,000 lifetime maximum per individual
Calendar Year Maximum	\$5,000 per person		

Details

- **Delta Dental Networks.** You can get care from any dentist you choose in the network, but you save more when you use dentists in the PPO network. To find a network dentist near you, visit www.deltadentalco.com.

Take Action

Vision

EyeMed provides eye exams with a flat dollar copay and coverage for glasses and contacts at two levels of coverage: a Base plan or a Buy-Up plan for lower exam copay and higher allowances.

BASE VISION PLAN	In-Network	Out-of-Network
	You Pay:	Plan Reimburses:
Exam (Once every 12 months) (Includes retinal imaging, up to provider limits)	\$10 Copay	\$30
Frames (Once every 12 months)	\$0 Copay; \$130 Allowance, 20% off balance over \$130	\$50
Standard Plastic Lenses (Once every 12 months) Single/Bifocal/Trifocal	Covered at 100%	\$35 - \$75
Contact Lenses (Once every 12 months) (Contact lens allowance includes materials only)		
Conventional	\$130 allowance, 15% off balance over \$130	\$115
Disposable	\$130 allowance, plus balance over \$130	\$115
Medically Necessary	Covered at 100%	\$115

BUY-UP VISION PLAN	In-Network	Out-of-Network
	You Pay:	Plan Reimburses
Exam (Once every 12 months) (Includes retinal imaging, up to provider limits)	\$5 Copay	\$30
Exam Options Standard Contact Lens Fit & Follow-Up	Up to \$40	Not Covered
Frames (Once every 12 months)	\$0 Copay; \$300 Allowance, 20% off balance over \$300	\$50
Standard Plastic Lenses (Once every 12 months) Single/Bifocal/Trifocal	Covered at 100%	\$35 - \$75
Contact Lenses (Once every 12 months) (Contact lens allowance includes materials only)		
Conventional	\$300 allowance, 15% off balance over \$300	\$120
Disposable	\$300 allowance, plus balance over \$300	\$120
Medically Necessary	Covered at 100%	\$120

Details

- Find network providers for hardware at www.eyemedvisioncare.com. You can use any provider, but the plan pays higher benefits when you stay in-network. EyeMed's network includes more than 17,000 providers, including LensCrafters, Pearle Vision, Sears Optical, and Target Optical.
- Save on products not covered by the plan. Network providers offer a 20% discount on hardware items not covered by the plan.
- Save on your second pair. The plan provides benefits for your first pair of glasses in a 12-month period. If the plan provided benefits for your first pair of glasses, you can buy additional pairs at a 40% discount when you use network providers.

401(k)

The Chipotle Mexican Grill, Inc. 401(k) plan is a great way to save for the future. It offers tax-savings, the ease of payroll deductions, a variety of investment options, and additional savings through a company match.

Here's how to make the most of your 401(k)

1

Enroll early

You can enroll as soon as you receive your enrollment materials from Transamerica Retirement Solutions. These materials — including information about your investment options — will arrive at your home about 30 days after you become an AP-R or Staff employee. When you enroll, you'll need to:

2

Decide how much to save. You can save 1% to 50% of your eligible pay, up to the IRS limits (\$18,500 in 2018) in the plan. If you're age 50 or older, you can contribute an additional (\$6,500 in 2018) each year. Your contributions are made through convenient payroll deductions.

3

Tax Savings. If you enroll in the Traditional 401(k) plan, your contributions are taken pre-tax, so you pay less in taxes today while saving for the future. If you enroll in the Roth plan, contributions are made post-tax meaning your dollars grow tax deferred, and if you hold the account for at least five years and don't withdraw the money until at least age 59 1/2 you won't owe any taxes on your earnings. You may also defer your investments by enrolling in both plans.

4

Choose your investments. The 401(k) plan offers a wide range of investment fund choices so you can choose a mix that's right for you. Online tools are available at [trsrretire.com](https://www.trsrretire.com) to show you a sample portfolio that matches your profile.

5

Get the match

Chipotle helps your savings grow by providing a matching contribution on the first 5% of compensation you contribute to the plan. As long as you are contributing to the 401(k) and after you have completed one year of uninterrupted employment, worked at least 1,000 hours during that year, and reached age 18, you get:

- A dollar-for-dollar match on the first 3% of compensation you contribute and
- 50 cents on the dollar for the next 2% of compensation you contribute.

The Chipotle matching contribution will begin on the first paycheck of the month following your one-year anniversary and can be seen on [trsrretire.com](https://www.trsrretire.com). If you enroll in both the Traditional and Roth plans – Chipotle will match your Traditional contributions first and then the Roth plan, up to a total of 5% between both plans.

Here's how it works: Let's say you earn \$30,000 and contribute at least 5% of your compensation to the plan. Chipotle will match 100% of the first 3% you contribute — \$900 (3% x \$30,000)— and half of the next 2% you contribute — half of \$600 (2% x \$30,000).

That's \$1,200 in additional savings (\$900 + \$300) from Chipotle!

Don't wait for the match to enroll. Get in the habit early—and boost your savings potential—by enrolling in the plan as soon as you can.

Details

- **You can make changes anytime.¹** You can change how much you save, how your funds are invested, or who your beneficiary is by visiting [trsrretire.com](https://www.trsrretire.com) or calling (800) 755-5801 between 8 a.m. and 9 p.m. ET.
- **You can take it with you.** You are 100% vested in (or own) all the contributions you and Chipotle make to your account.
- **You can roll it over.** You may also be able to roll over the balance from a previous employer's plan. Call (800) 755-5801 for information.
- **You name your beneficiary.** You must designate your beneficiary with Transamerica, you can do so online at www.trsrretire.com. If you are married, your spouse is automatically your primary beneficiary unless you get your spouse's notarized consent to name someone else.

¹ Employees at a level of Director or above may be eligible for the Supplemental Deferred Investment Plan, a non-qualified and unfunded plan. Changes to 401(k) elections are restricted if enrolled in this plan. Additional information will be sent to eligible employees directly from Chipotle Benefits in June of each year.

Take Action

Reimbursement Accounts

Chipotle offers a health care flexible spending account (FSA), or if you're in the CDHP, a health saving account (HSA), a dependent care flexible spending account and commuter transit and parking programs that help you save money by putting dollars aside on a pre-tax basis to pay for reimbursable expenses during the year.¹ Simply estimate the total amount of expenses you could incur in a calendar year, make an annual election at enrollment and a deduction will be taken on a pre-tax basis on each paycheck for the remainder of that year.

There are some important things to remember about each type of account and how they work, but the savings could be quite rewarding.

	You can contribute	Using your contributions	Under these guidelines
Health Care Flexible Spending Account (FSA)	<p>\$240 - \$2,650 for the year for reimbursement of health-related expenses² you may need to pay for out of pocket:</p> <ul style="list-style-type: none"> • Copays, coinsurance and deductibles • Dental and orthodontia expenses • Contact lenses, eyeglasses, vision surgery • Hearing aids • Chiropractic care 	<p>Use an account issued debit card for payment when an expense is incurred or submit a claim form and receipt for reimbursement.</p> <p>Any funds not used by the end of the year are subject to forfeiture under the rules of the plan.</p> <p>Changes to your elections can only be made at initial enrollment, open enrollment or within 30 days of a qualified life event (birth/adoption of a child, marriage/divorce, or loss of coverage under another plan).</p>	<p>Qualified health-related expenses must be:</p> <ul style="list-style-type: none"> • Incurred by you or someone you claim as a dependent on your tax return (even if they are not covered by a Chipotle medical, dental or vision plan) between January 1, 2018 and February 28, 2019 • Medically necessary • Not reimbursable under any other plan (including spouse's plan or federal tax credit) • Tax deductible under IRS rules • Submitted by March 15, 2019
Health Savings Account (HSA) for participants in the CDHP	<p>You may contribute up to \$3,450 for the year if you cover only yourself or up to \$6,900 for the year if you cover dependents. You can use your HSA to pay for IRS-approved out-of-pocket expenses such as:</p> <ul style="list-style-type: none"> • Medical plan deductible and coinsurance • Medical care not covered by your plan, such as acupuncture • Dental expenses • Vision expenses • Hearing aids • Or, you can use your HSA to build up funds to use for future out-of-pocket expenses 	<p>Upon selection of the HSA plan you will be enrolled in Anthem Act Wise and receive a debit card as well as account information.</p> <p>Once your HSA has been opened you can use your HSA debit card or HSA checkbook to pay for eligible expenses. Keep in mind, unlike a Health Care FSA, you will only have access to the funds that have been deposited into the account at that time.</p> <p>Any funds remaining at the end of the year will be automatically rolled over to the following year.</p> <p>Changes to your pre-tax payroll deductions can be made at any time.</p>	<p>You may only have one health care reimbursement account, either a Health Care FSA or an HSA.</p> <p>You must be in the CDHP Plan (or another Consumer Directed Health Plan) to have an HSA. Other coverage like Medicaid, Medicare, Tricare, or coverage through a spouse's employer, could disqualify you from an HSA</p> <p>Qualified health-related expenses must be:</p> <ul style="list-style-type: none"> • Incurred by you or someone you claim as a dependent on your tax return (even if they are not covered by a Chipotle medical, dental or vision plan) • Medically necessary • Not reimbursable under any other plan (including spouse's plan or federal tax credit) <p>You own your HSA balance. If you leave Chipotle, you still own it and can still use it for qualified medical expenses.</p>

¹ HSA contributions for employees in certain states may be taken post-tax. For additional information contact the Employee Service Center.

² For a complete list of eligible expenses, visit <https://benefits.unburritable.net> and click on the Flexible Spending Accounts section under Health & Wellness menu.

	You can contribute	Using your contributions	Under these guidelines
Dependent Care Flexible Spending Account (FSA) Chipotle matching contribution of 10% up to a maximum of \$450 (Example: you contribute \$2,000, Chipotle will contribute \$200)	\$240 - \$4,545 for the year for reimbursement of day care expenses* for children under age 13 and disabled dependents of any age for: <ul style="list-style-type: none"> • Licensed day care centers for children and disabled dependents • Costs for family or adult day care facilities • Babysitters outside or inside your home while you are working (excluding your tax dependents and your children) • Day camp expenses (but not overnight camp) NOTE: If your total prior year gross compensation exceeded \$120,000 or more, your max contribution limit for the Dependent Care FSA plan is \$1,398; any elections over this amount will be treated as taxable income.	Use an account issued debit card for payment when an expense is incurred or submit a claim form and receipt for reimbursement. Any funds not used by the end of the year are subject to forfeiture under the rules of the plan. Changes to your elections can only be made at initial enrollment, open enrollment or within 30 days of a qualified life event (birth/adoption of a child, marriage/divorce, or loss of coverage under another plan).	Qualified dependent care expenses must be: <ul style="list-style-type: none"> • Incurred by you between January 1, 2018 and February 28, 2019 • Necessary so you can work • If you are married: necessary so your spouse can work or attend school full-time or necessary to care for your disabled spouse
Adoption Assistance Flexible Spending Account	\$240 - \$13,570 for the year for reimbursement of reasonable adoption expenses for: <ul style="list-style-type: none"> • Adoption agency fees for foreign or domestic adoptions for: <ul style="list-style-type: none"> • Individuals under age 18; physically or mentally incapable of self-care; or with special needs • Court costs and attorneys' fees • Transportation expenses while away from home associated with the adoption (includes meals and lodging) 	Submit a claim form and receipt for reimbursement.	
Commuter Transit (Transit passes or van pooling)	Up to \$260/month for 2018	Use an account issued debit card for payment when an expense is incurred.	
Commuter Parking Reimbursement (While at work)	Up to \$260/month for 2018	Use an account issued debit card for payment when an expense is incurred or submit a claim form and receipt for reimbursement.	

- Take note if you have a domestic partner. IRS rules do not recognize expenses for domestic partners or their children as reimbursable under these accounts unless the domestic partner and/or children are your tax dependents.
- Consider your options. For some people, the federal income tax credit will offer better tax savings than the Dependent Care FSA. Consult your tax advisor for help determining which option is better for you.
- You can pay many expenses with a debit card; you MUST use your debit card to pay all expenses under the Commuter Transit account. After you enroll, you'll receive a debit card to pay for covered expenses. You still need to keep your receipts in case your card is charged incorrectly. Destroy the card if you don't want to use it. Otherwise, hang on to it. You will use the same card each year that you participate in a reimbursement account.
- Claims (other than for the HSA) may be submitted online at www.payflex.com or by fax to (855) 703-5305. Receive alerts by text or email and check your account balance(s) online or via the PayFlex smart app.
- For all accounts EXCEPT the Health Savings Account (HSA), you must "use it or lose it". Incur eligible health care expenses before February 28, 2019 and submit your expenses by March 15, 2019 or any money left in your account will be forfeited, per IRS rules. So estimate your expenses carefully. If you have an HSA, any remaining balance will be automatically rolled over into the next year. Funds will accumulate year over year until you reach the maximum balance allowed by the IRS.

Health Care Flexible Savings Account (FSA) and Health Savings Account (HSA): What is Right for You?

If you participate in the Consumer Directed Health Plan (CDHP), you can contribute to a Health Savings Account (HSA) to help you save money on eligible out-of-pocket health care expenses. You can enroll in the FSA regardless of which medical plan you are enrolled in. The chart below highlights the differences between an HSA and a traditional Health Care Flexible Spending Account (FSA). According to IRS regulations, you cannot contribute to both an HSA and an FSA in the same calendar year. You will have to exhaust your FSA balance before you can begin contributing to an HSA. You may want to consult with your tax advisor before you decide which account is right for you.

Feature	Health Care Flexible Spending Account (FSA)	Health Savings Account (HSA)
2018 contribution maximums	\$240 - \$2,650	Up to \$3,450 if you cover only yourself, or \$6,900 if you also cover dependents (+\$1,000 catch up for those age 55 and over)
How contributions are made	Pre-tax payroll deductions	Pre-tax payroll deductions or you can deposit directly into your account ¹
Eligible expenses	IRS-eligible out-of-pocket expenses such as: <ul style="list-style-type: none"> • Copays, coinsurance and deductibles • Dental and orthodontia expenses • Contact lenses, eyeglasses, vision surgery <ul style="list-style-type: none"> • Hearing aids • Chiropractic care 	
End of Year Balances	Forfeited	Automatically carry over into the following year
How to pay for expenses	Use your account issued debit card or submit a claim to Payflex	Use your account issued debit card. Note: You will receive an HSA debit card if you are enrolled in the Anthem CDHP, but no money will be available unless you contribute to your HSA.
If You Leave Chipotle	You may use your FSA balance to reimburse yourself for eligible expenses you had before the date your employment terminates. You must file any claims by March 15 of the plan year.	You own your HSA balance. After you leave Chipotle, you may use your HSA balance to pay for eligible expenses.

¹ HSA contributions for employees in certain states may be taken post-tax. For additional information contact the Employee Service Center.

Life Insurance

Chipotle offers basic coverage at no cost to you. Coverage automatically begins on your first day.

Basic Coverage

Plan	Purpose	Benefits*
Basic Life Insurance	Pays a benefit to your beneficiary upon your death	2 times your annual base salary up to \$1 million
Basic Accidental Death & Dismemberment (AD&D)	Pays a benefit to your beneficiary if you die in an accident or to you if you experience a covered loss in an accident	Accidental Death benefit is an additional 2 times your annual base salary up to \$1 million. Dismemberment benefit is based on a benefit schedule.
Dependent Life Insurance	Pays a benefit to you upon the death of your spouse/domestic partner or child — only if they are listed as dependents on the Benefits Enrollment Website	Spouse/Domestic partner: \$10,000 Children: \$5,000 each
Hartford Business Travel Accident	Pays a benefit to your beneficiary if you die while traveling on company business and provides travel assistance like lost baggage or passports, medical emergencies, emergency cash and more	\$150,000

***You will pay taxes on some coverage.** You pay income taxes on the value of your basic life insurance over \$50,000 and on the value of any dependent life insurance coverage. This coverage is considered imputed income and will show on your paycheck under "Other Benefits and Information."

Take Action

Optional Coverage

If you want additional coverage, you can buy optional life insurance and AD&D insurance for yourself and/or your spouse/domestic partner. You pay for this optional coverage with after-tax dollars at group rates.

- **Optional Life Insurance:** You can buy coverage up to 5 times your annual salary or \$500,000, whichever is less. (Details can be found in the Certificate of Coverage on <https://benefits.unburritable.net>). Your cost depends on the amount of coverage you choose and the age of the person to be covered. (See "Review Your 2018 Costs" on page 7.)
- **Optional AD&D:** You can buy coverage up to 5 times your annual salary or \$500,000, whichever is less. The cost for coverage is \$0.19 per pay period for every \$10,000 in coverage.

If you enroll in your first 30 days, coverage will be issued, guaranteed, in amounts up to \$100,000. For coverage above \$100,000, you need to submit a statement of health form to The Hartford, and coverage amounts will become effective only after The Hartford reviews and approves your coverage. Applications for coverage can be made after your initial 30 days of employment but guaranteed issue provisions will no longer apply. All amounts are subject to medical underwriting.

Disability

Chipotle offers disability benefits to help protect your income if you can't work because of an illness or injury unrelated to your work. Enrollment is automatic and Chipotle pays the full cost of this important benefit.

Plan	Purpose	Benefits
Short-Term Disability (STD)	Replaces part of your pay if you are unable to work for more than 7 consecutive days due to a pregnancy, illness or non-work-related injury. To file a claim, call The Hartford at (800) 898-2458 and reference policy number 677203.	Up to 60% of your weekly base salary (up to \$2,500 per week), for a maximum of 25 weeks as long as you remain disabled.
Long-Term Disability (LTD)	Replaces part of your pay if you are unable to work for more than 25 weeks due to a non-work-related injury or illness.	Up to 60% of your monthly base salary (up to \$15,000 per month), until age 65 as long as you remain disabled. Benefits will reduce after age 65.

Details

- To request a Leave of Absence, visit [Workday](#) or contact the Employee Service Center at (877) 625-1919 to learn more.
- Deductions for medical, dental, vision and flexible spending benefits will be deducted from the benefit check you receive from The Hartford unless you direct Chipotle not to by calling the Employee Service Center.
- **In California, employees are eligible for a State Disability Benefit.** Your state disability benefits are available in conjunction with the disability benefits offered through Chipotle.
- **Coverage generally begins the first of the month** after 30 days of active employment in an AP-R or Staff position.
- **There are limits.** The LTD plan does not cover a disability that is related to a pre-existing condition that begins within the first 12 months of the date your coverage takes effect.
- **Worker's Compensation covers you if your illness or injury is work-related.**

Paid Time Off

Chipotle offers paid holidays, vacation, sick time, and leave so you can relax, recover, and rejuvenate when you need to.

Vacation

As a full-time AP-R or Staff employee you are eligible to accrue paid vacation, on a calendar year basis (i.e., January 1st thru December 31st), beginning on your hire date, as further described in this Policy.

Requesting Vacation

You may view your available vacation balance in Workday from the Time Off worklet. To request time off, complete a Time Off Request in Workday. Please schedule your vacation as far in advance as possible.

- It is important that you enter any vacation time you take into Workday so that your vacation balance is accurately reflected and you may plan your time off to fit your schedule.
- Vacation is provided for the purpose of rest and relaxation, and you are encouraged to use accrued vacation before the start of the next calendar year.

Vacation Accrual Schedule

Vacation time is accrued pro rata, at the end of each two-week pay period, based on length of uninterrupted employment*, pursuant to the accrual schedule set forth below.

AP, GM, & R Vacation Accrual		
Years of Uninterrupted Employment	Hours of Vacation Accrued per Bi-Weekly Pay Period ("Accrual Rate")	Vacation Hours Accrued per Calendar Year**
Date of Hire - Year 3	3.08 hours	80 hours
Year 4 - Year 8	4.62 hours	120 hours
Year 9+	6.16 hours	160 hours

Staff Vacation Accrual		
Years of Uninterrupted Employment	Hours of Vacation Accrued per Bi-Weekly Pay Period ("Accrual Rate")	Vacation Hours Accrued per Calendar Year**
Date of Hire - Year 3	4.62 hours	120 hours
Year 4 - Year 8	6.16 hours	160 hours
Year 9+	7.7 hours	200 hours

* Directors and above may be eligible to accrue more vacation than set forth above. In such an event, vacation will be accrued and earned pro rata throughout the year. Please contact the Employee Service Center at 877-625-1919 for additional information.

**Vacation Hours Accrued per Calendar Year are subject to the Accrual Cap explained below.

Details

Vacation Accrual Cap

You should schedule sufficient time off each year to promote good physical and mental health. You are encouraged to use all of your accrued vacation during the calendar year in which it accrues, but you may carry unused vacation time from one calendar year into the next as required by law. The maximum amount of accrued but unused vacation that you may have at any one time is limited to your "Accrual Cap", defined as your Vacation Accrual per Calendar Year (as shown in the table above) multiplied by 1.5. For example, if your Vacation Accrual Per Calendar year is 80 hours, your Accrual Cap is 120 hours. Each time you reach your Accrual Cap, you will stop accruing vacation time. After you use enough vacation time to fall below the Accrual Cap, you will resume accruing vacation from that date forward, up to your Accrual Cap.

You are responsible for monitoring your vacation levels to ensure vacation is being used and entered into Workday and to avoid reaching the Accrual Cap.

Additional Details

- Vacation is not counted as hours worked when determining your right (if any) to overtime pay.
- Chipotle does not allow pay in lieu of vacation time under any circumstances, except upon termination of employment. If your employment is terminated, for any reason, you will be paid for any accrued, unused vacation.
- If your employment ends and you've used more vacation days than you've accrued, any vacation that has been advanced to you but not yet earned may be deducted from your final paycheck, to the extent permitted by applicable law.

Sick Time

In California, paid sick leave is available for employees to use to care for their own or their family members' existing health conditions, preventive care, and also for purposes related to their status as a victim of domestic violence, sexual assault or stalking.

You are eligible to accrue and may use sick time based on hours worked, as defined by the sick leave law applicable to you. For additional information on these laws please reference your restaurant's Labor Law Poster or contact the Employee Service Center at (877) 625-1919 x People Support. Most employees accrue one hour of paid sick leave for every thirty hours worked. Because sick time is designed to provide benefits only to existing employees who temporarily are required to miss work, unused sick time is not payable upon termination of employment for any reason. Chipotle will comply with the requirements of the paid sick leave law, or laws, which apply to you*

To use sick time, you must enter your sick time into Workday under Time Off and your sick time must be approved by your manager in advance if the need to use sick time is foreseeable. If the need is not foreseeable, you must notify your manager of your need to use sick time as soon as practical.

All employees who have experienced vomiting and/or uncontrollable diarrhea at home or at work must be immediately excluded from work and the Manager on Duty must immediately notify the SSR department at (303) 222-5968. You must also notify your field leader. Your field leader will provide you with additional information and support.

* Employees working in a jurisdiction with a paid sick leave law should contact the Employee Service Center for more detailed information regarding sick leave policies.

Holidays

AP-R			
• Thanksgiving	• Easter	• Christmas Day	
Staff (Non-Restaurant)			
• New Year's Day	• Thanksgiving and following day	• Memorial Day	• Fourth of July
• Labor Day	• Christmas Eve and Christmas Day		

Floating Holidays

During your first calendar year, you will be eligible to accrue floating holiday(s) prorated based on your month of hire and position, as shown below.

Beginning on January 1st following their date of hire and on January 1st of each calendar year thereafter, AP-R employees will be eligible to accrue six (6) floating holidays per calendar year and Staff employees will be eligible to accrue (1) floating holiday per calendar year.

	AP-R	Staff
Accrual	.5 days per month (4 hours)	1 day per year (granted on date of hire or Jan. 1 of each year)
Maximum Accrual	6 days per year (48 hours)	1 day per year (8 hours)

Unused floating holiday(s) can be carried over to the following year, subject to the following accrual caps:

- The number of accrued, unused floating holidays an AP-R employee may have is capped at nine (9).
- The number of accrued, unused floating holidays a Staff employee may have is capped at two (2).

Once you reach your floating holiday accrual cap, you will stop accruing floating holidays. After you use enough floating holidays to fall below the floating holiday accrual cap, you will resume accruing floating holidays from that date forward, up to your accrual cap. Chipotle does not allow pay in lieu of floating holidays under any circumstances, except upon termination of employment.

If your employment is terminated, floating holidays that you earned during the calendar year, but did not use, will be paid to you at your then-existing rate of pay (i.e. your pay excluding bonuses, overtime, etc.) at the time of termination. If your employment is terminated and you have taken more floating holiday time than you have earned, then, subject to any limitations and applicable laws, you may be required to repay at termination the portion of floating holiday time that was taken but not yet earned, which amount may be deducted from your final paycheck if and to the extent permitted by applicable law.

Baby Days

New moms and dads receive three days of paid leave to take within 30 days of the birth/adoption. New or expecting moms and dads should contact the Employee Service Center to arrange payment of their baby days, call (877) 625-1919.

Sabbatical Leave

You receive one eight-week sabbatical for every 10 years of uninterrupted employment. If you are promoted to an AP-R or Staff position, you must complete three years of uninterrupted employment as an AP-R or Staff employee before you're eligible.

- You are eligible to get your regular pay and benefits during your sabbatical.
- The full eight weeks must be taken at one time.
- Your sabbatical must be taken within 5 years of eligibility or it will be lost.
- If you leave Chipotle within six months following the sabbatical, you will have to pay back all eight weeks of the pay you received.
- An additional eight-week sabbatical can be requested after each additional 10 years and should be taken no more than five years after you become eligible.
- You must achieve a rating of 3 or higher on your most recent performance review before the sabbatical period.

Note: This eight-week sabbatical is not paid out at termination or change to a Crew, KM or SM position.

EAP - GuidanceResources®

GuidanceResources®, offered through ComPsych®, provides confidential, prepaid access to professional counseling for AP-R & Staff employees and their eligible dependents.

Call (888) 227-6558 or go to www.guidanceresources.com and use Chipotle ID# RM3322F.

GuidanceResources® offers you:

- **Confidential Counseling** You are provided with 8 free sessions per incident and your discussions with ComPsych® are completely confidential - they will not be shared with Chipotle in any way.

• *Someone to talk to*

It is staffed by Guidance Consultants — highly trained master's and doctoral level clinicians who will listen to your concerns and quickly refer you to in-person counseling and other resources for:

 - Stress, anxiety and depression
 - Problems with children
 - Grief and loss
 - Relationship/marital conflicts
 - Job pressures
 - Substance abuse

- **FinancialConnect® services** Unlimited access to certified public accountants, financial planners, and other professionals who can help with your financial situation.

• *Discover your best options*

 - Getting out of debt
 - Tax questions
 - Credit card or loan problems
 - Estate planning
 - Retirement planning
 - Saving for college

- **LegalConnect® legal services** • Talk to an attorney at any time. ComPsych® can then refer you to an attorney in your area who will provide you with a free, 30-minute consultation and a 25% reduction in customary legal fees if you need further assistance with issues like:

• *Expert info when you need it*

 - Landlord/tenant issues
 - Divorce and family law
 - Real estate transactions
 - Debt and bankruptcy
 - Civil and criminal actions
 - Contract reviews

- **FamilySource® programs** • ComPsych® can provide you with Work-Life specialists to do the research for you, providing qualified referrals and customized resources for:

• *Delegate your "to-do" list*

 - Child and elder care
 - Making major purchases
 - Pet care
 - Moving and relocation
 - College planning
 - Home repair

- **GuidanceResources® Online** • GuidanceResources Online is your one stop for expert information on the issues that matter most to you... relationships, work, school, children, wellness, legal, financial, free time and more.

• *Knowledge at your fingertips*

Extras

Chipotle offers a variety of services to make your life easier.

Adoption Assistance	<p>Chipotle reimburses 80% of eligible expenses related to the adoption of a child, up to \$7,500 per child.</p> <p>Referral resources concerning cost, financing, agency selection and the adoption process are available through Guidance Resources.</p> <p>Details and an application are available on https://benefits.unburritable.net.</p>	<p>Online: https://benefits.unburritable.net</p> <p>(877) 625-1919</p>
Auto & Home Insurance	<p>Get group rates and policy discounts from MetLife Auto and Home for:</p> <ul style="list-style-type: none">• Auto insurance• Motorcycle/boat/antique and classic car insurance• Home/condo/motor home insurance• Renters Insurance	<p>Online: www.metlife.com/mybenefits</p> <p>(800) Get-Met8</p>
Car Program	<p>Through the car program, eligible employees can use a company-provided vehicle if they share the cost through regular payroll deductions.</p> <p>Eligible employees include Restaurateurs, Area Managers/Team Leaders/Apprentice Team Leaders, Team and Staff Directors, Regional and Executive Directors and eligible field employees who drive more than 15,000 business miles annually.</p>	<p>Online: Chipotle Public Folders > Company Car Program</p>
Educational Assistance	<p>Attend any accredited university or college and you may be reimbursed up to \$5,250 per year from Chipotle.</p> <p>Access to financial aid advisors who may help you qualify for up to \$5,920 in federal financial aid.</p> <p>Employees interested in attending an online college through a Guild university partner will also receive tuition discounts, up to 44 college credits for your on-the-job training at Chipotle, a personal education coach and access to exclusive degrees in Business Management and Hospitality designed specifically around Chipotle employee's schedules.</p>	<p>Online: guildeducation.com/chipotle</p>
Health Club Membership Discounts	<p>Enjoy discounted memberships to one of 1,500 health clubs across the country, including 24 Hour Fitness, Bally's Total Fitness, Gold's Gym, and Ladies Workout Express. Save up to 60% on membership fees and get \$10 toward your monthly membership from Chipotle (a taxable benefit). Additional online programs may be available at a discounted cost.</p>	<p>Online: www.chipotle.perkspot.com OR www.globalfit.com/chipotle (800) 294-1500</p>

MetLaw Legal Services	<p>Receive unlimited legal services for an entire calendar year when you pay \$7.27 per paycheck.</p> <p>Services include:</p> <ul style="list-style-type: none"> • Will and estate planning • Legal document preparation and review • Family law • Juvenile matters • Debt matters • Identity theft defense <p>You need to re-enroll every year you want to participate. The plan is portable, so if you leave Chipotle while you are enrolled in the plan, you can keep the same rates and services.</p>	<p>Online: www.metlife.com/mybenefits for information OR https://benefits.unburritable.net to enroll</p> <p>(800) Get-Met8</p>
Motor Club Discount Plan	<p>Get discount pricing from the Pinnacle Motor Club to help with car problems. The discount price is \$3.69 per paycheck for an individual membership or \$7.68 for you and one other family member.</p> <p>Services include:</p> <ul style="list-style-type: none"> • \$100 roadside assistance for battery boost, locksmith service, tire change, or towing • Free custom trip routing, maps, and discounts for hotels, car or RV rentals and more • \$500 in emergency travel assistance 	<p>Online: www.nmc.com/basic</p> <p>(800) 523-4582</p>
Pet Insurance	<p>Veterinary Pet Insurance Company offers a 5% discount to Chipotle employees. Costs vary based on the plan you choose, where you live, what type of pet you have and your pet's age.</p> <p>Chipotle helps by contributing \$10 per month per pet (up to three pets) toward the premium after you enroll (the online quote does not show Chipotle's contribution).</p> <p>Watch for renewal information in the mail and call an agent to understand the plans with the best benefits for you. The contribution Chipotle makes is considered taxable income.</p>	<p>Online: http://www.petinsurance.com/afi/c/chipotle_pr.aspx?ec=707</p> <p>(888) 899-4VPI</p>

Discounts

Your One-Stop-Shop for Savings and Discounts - PerkSpot

As a valued member of our team here at Chipotle, we're happy to offer you our PerkSpot Employee Discount Program. You're just a point and click away from finding great savings from national and local merchants and service providers you're sure to recognize.

Looking for two tickets to tonight's game? Want to see if you can get a discount on cell service? Maybe you'd like to surprise someone you love with flowers or a special gift? PerkSpot is your spot to shop and to save on these items and so many more.

This service costs you nothing, and since offers are changing daily - it can save you a lot. Chipotle's PerkSpot site just requires a simple and safe signup. Go to www.Chipotle.PerkSpot.com and select "Create Account" to complete the easy registration process. Once you have logged into PerkSpot, you can browse brands, search for individual discounts, or select your savings from the available categories.

Here are some examples of the discounts you may find!

Banking Discounts

Cell Discounts

Discounts on personal cellphones with plans available through multiple providers.

Computer Discounts

Save money on computers and laptops from Dell, IBM, HP, Apple. Shop online for the best deals and always shop around.

Credit Union

Corporate America Family Credit Union offers a variety of services to meet your needs:

- High-yield savings accounts (regular share, money market, share certificates, and IRAs)
- Low-rate loan (new and used vehicles loans, mortgages, and home equity loans)
- Checking accounts
- Holiday savings with direct deposit

Entertainment Discounts

Enjoy discounts on theme park admissions, theater attractions, movie tickets, rental cars, and more, including:

- Passes to Disneyland, Walt Disney World, Sea World, Universal Studios, and more
- Theater attractions in New York, Southern Florida, and California
- Limited city productions of Cirque du Soleil

Floral Discount

Save 20% on all regularly priced floral and gift items with From You Flowers. Choose from over 2,000 exquisite items with hand delivered same-day service.

Ford Partner Recognition Program

Get discounts on Ford products, including Lincoln-Mercury.

Benefits Glossary

As you learn about and use your benefits, it helps to know the lingo.

Annual Deductible: The amount you pay each calendar year before the plan starts to share expenses. If you cover yourself and dependents under the CDHP, you must meet the entire family deductible before the plan will pay benefits for any individual.

Annual Out-of-Pocket Maximum/Payment Limit: The most you pay for covered expenses during each calendar year. Once you pay this amount, the plan pays 100% of covered expenses for the rest of that year. Under the Low Deductible PPO Plan and the EPO Plan, there are two out-of-pocket maximums: one for prescription drugs and the other for all other covered medical expenses. If you cover yourself and dependents under the CDHP, you must meet the full family out-of-pocket maximum before the plan will pay 100% of covered expenses for the rest of the year for any individual.

Beneficiary: The person you designate to receive benefits in the event of your death.

Coinsurance: The percentage you pay for covered expenses after you have met your deductible, if applicable.

Co-pay: The set dollar amount you pay at the time of care before the plan pays benefits.

EOB – Explanation of Benefits: A summary showing the charges for in-network and out-of-network care, as well as the portion of deductibles and out-of-pocket maximums paid for the calendar year. If you enroll in a PPO (Preferred Provider Organization) plan, Anthem will mail you an EOB after you receive care.

Employee Assistance Program (EAP): A confidential employee benefit program that helps employees with personal problems and/or work-related problems that may impact their job performance, health, and/or mental or emotional well-being.

FSA – Flexible Spending Account: This benefit allows you to put money aside on a pre-tax basis to be reimbursed later for health care or dependent care (day care) expenses. Any balance remaining in your FSA at the end of the year is forfeited.

Generic/Brand Formulary/Brand Non-Formulary: Under the Chipotle medical plans, your prescription can be filled with a generic drug, brand formulary drug, or a brand non-formulary drug. A generic drug is one that is no longer covered by a patent. It contains the same active ingredients as its brand-name counterpart, but is less expensive to make. Brand name drugs are still covered by a patent and tend to be much more expensive. Non-formulary drugs are typically new and very expensive drugs.

HSA – Health Savings Account: If you participate in the CDHP, you may put aside money on a pre-tax basis or an after-tax basis to be reimbursed for eligible health care expenses. Any balance remaining at the end of the year carries over into the following year.

Imputed Income: The IRS taxes the dollar value of certain benefits as additional income. This applies to the value of basic life insurance over \$50,000 and the value of any dependent life insurance.

In-Network/Out-of-Network: Most plans give you the choice to receive care in-network or out-of-network. A network is a group of providers and facilities that agree to charge negotiated rates. As a result, your plan pays higher benefits – and you pay less – when you use network providers. Visit www.Anthem.com to find providers in your area.

Long-term disability insurance (LTD): A type of insurance that protects an employee from loss of income in the event that he or she is unable to work due to illness, injury, or accident for a long period of time. Long-term disability coverage picks up where short-term disability insurance leaves off.

Premiums: The amount paid for health insurance every month. Chipotle pays the majority of the cost, and employees pay a portion through payroll deductions.

Qualifying Dependent: A person who meets IRS requirements to be your dependent for tax purposes. If someone is your qualifying dependent, then you can claim them as a dependent on your tax return.

Short term disability (STD): A type of insurance that pays a percentage of an employee's salary for a specified amount of time, if he or she is ill or injured, and cannot perform the duties of his or her job.

SPD – Summary Plan Description: Your SPD provides details about your plan coverage. Find SPDs for your plans posted on <https://benefits.unburritable.net>.

Glosario de Beneficios

Al aprender y usar sus beneficios, es útil conocer la terminología.

Deducible Anual: Cantidad que paga cada año antes de que el plan empiece a compartir los gastos. Si se cubre usted y los dependientes en el plan CDHP, debe cubrir todo el deducible familiar antes de que el plan empiece a pagar beneficios por cualquier persona.

Máximo Gasto Propio Anual/Límite de Pagos: Lo más que pagará por gastos cubiertos en cada año calendario. Una vez que pague esta cantidad, el plan pagará 100% de los gastos cubiertos por el resto de ese año. Con el Plan PPO con Deducible Bajo y con el Plan EPO, hay dos máximos de gastos propios: uno por recetas médicas y el otro por todos los demás gastos médicos cubiertos. Si se cubre usted y los dependientes en el plan CDHP, debe llegar al máximo gasto propio de toda la familia antes de que el plan pague 100% de los gastos cubiertos por el resto del año por cualquier persona.

Beneficiario: La persona que designe para recibir los beneficios en el caso que usted fallezca.

Coseguro: Porcentaje que paga por los gastos cubiertos después de que haya cubierto su deducible, de ser aplicable.

Copago: La cantidad fija de dinero que paga al recibir la atención médica antes de que el plan pague beneficios.

Programa de Asistencia para los Empleados (EAP): Un programa confidencial de beneficios para los empleados que les ayuda con problemas personales y/o problemas relacionados al trabajo que pudieran tener un impacto en el desempeño de su trabajo, en su salud, y/o en su bienestar mental o emocional.

EOB – Explicación de Beneficios: Un resumen que muestra los cargos por la atención en la red y fuera de la red, así como la porción del deducible y máximo gasto propio pagado por el año calendario. Si se inscribe en el Plan PPO (Organización de Proveedores Preferentes) Anthem le enviará por correo una Explicación de Beneficios, o EOB, después de que reciba la atención médica.

FSA – Cuenta de Gastos Flexibles: Este beneficio le permite apartar dinero antes de impuestos para reembolsarse luego los gastos de salud o por el cuidado de los dependientes (cuidado durante el día). Cualquier saldo que quede en su cuenta FSA al final del año se perderá.

Genéricas/De Marca Formularias/De Marca No Formularias: En los planes médicos de Chipotle, su receta puede surtirse con una medicina genérica, una medicina de marca formularia o una medicina de marca no formularia. Las medicinas genéricas son las que ya no están cubiertas por una patente. Contienen los mismos ingredientes que las de marca correspondiente, pero fabricarlas es menos costoso. Las medicinas de marca están todavía cubiertas por una patente y tienden a ser mucho más caras. Las medicinas no formularias típicamente son nuevas y muy costosas.

HSA – Cuenta de Ahorros de Salud: Si participa en el plan CDHP, puede apartar dinero antes de impuestos o después de impuestos para reembolsarse los gastos de salud elegibles. Cualquier saldo que quede al final de año se transfiere al año siguiente.

Ingreso Imputado: El IRS cobra impuestos sobre el valor en dinero de ciertos beneficios como ingreso adicional. Esto se aplica al valor del seguro básico de vida que pase de \$50,000 y al valor de cualquier seguro de vida de dependientes.

En la Red/ Fuera de la Red: La mayoría de los planes le dan la opción de recibir atención en la red o fuera de la red. Una red es un grupo de proveedores y centros que están de acuerdo en cobrar tarifas negociadas. Por ello, su plan paga beneficios mayores – y usted paga menos – al usar proveedores de la red. Visite www.Anthem.com para encontrar proveedores en su área.

Seguro de incapacidad a largo plazo (LTD): Un tipo de seguro que protege al empleado de la pérdida del ingreso en caso de que él o ella no pueda trabajar debido a una enfermedad, lesión o accidente por un tiempo prolongado. La cobertura de incapacidad a largo plazo se inicia al terminar el seguro de incapacidad a corto plazo.

Primas: La cantidad que se paga cada mes por el seguro de salud. Chipotle paga la mayoría del costo y los empleados pagan una parte con deducciones por nómina.

Dependiente Calificado: Una persona que cumple con los requisitos del IRS para ser su dependiente para los fines de impuestos. Si alguien es su dependiente calificado, entonces puede reclamarlos como dependientes en su declaración de impuestos.

Incapacidad a corto plazo (STD): Un tipo de seguro que paga un porcentaje del salario del empleado por un período de tiempo específico si él o ella se enferma o se lesiona y no puede desempeñar los deberes de su puesto.

SPD – Resumen Descriptivo del Plan: Su SPD le proporciona detalles sobre su cobertura del plan. Encuentre los SPD de sus planes publicados en <https://benefits.unburritable.net>.

Contacts

Benefits Hub

<https://benefits.unburritable.net>

Chipotle Employee Service Center

workdayesc@chipotle.com
(877) 625-1919, x Benefits

COBRA

(800) 359-3921

Commuter Expense Plan

<https://benefits.unburritable.net>

Dental (Delta Dental)

www.deltadentalco.com
(800) 610-0201

Disability

(Short-Term and Long-Term)

- To begin a claim, contact the Employee Service Center at (877) 625-1919.
- To inquire about a claim, contact The Hartford at (800) 898-2458.

Discounts

www.chipotle.perkspot.com

Educational Assistance

www.guildeducation.com/chipotle
(720) 709-2871

Tuition Reimbursement

<https://benefits.unburritable.net>
Contact the Employee Service Center
(877) 625-1919

Flexible Spending Accounts

www.payflex.com
(800) 284-4885

GuidanceResources® (EAP) Plan

www.guidanceresources.com
(888) 227-6558
ComPsych® (Chipotle ID: RM3322F)

Medical & HSA

Anthem

www.anthem.com
(855) 653-4066

24-Hour Nurse Line
(800) 700-9184

Medical

Kaiser

my.kp.org/chipotle
(800) 464-4000

MetLife Insurance Products

(Auto & Home and MetLaw)
www.metlife.com/mybenefits
(800) Get-Met8

Motor Club

www.nmc.com/basic
(800) 523-4582

Prescription Drugs (Anthem plans)

www.caremark.com
(855) 361-5693

Retirement Plan 401(k)

www.trsrretire.com
(800) 755-5801

The Hartford

(Basic, Optional and Dependent Life and AD&D)
www.thehartford.com

Vision Plan

www.eyemedvisioncare.com
(866) 723-0514

Veterinary Pet Insurance

http://www.petinsurance.com/afi/c/chipotle_pr.aspx?ec=707
(888) 899-4VPI

Chipotle Wellness

www.chipotlewellness.com
wellness@chipotle.com

Legal Notices

Medicare Creditable Coverage Notice

If you (and/or your dependent) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. See “Important Notice from Chipotle About Your Prescription Drug Coverage and Medicare” on page 36 for details.

Special Enrollment

Special enrollment events allow you and your eligible dependents to enroll for health coverage outside the Open Enrollment period under certain circumstances if you lose eligibility for other coverage, become eligible for state premium assistance under Medicaid or the Children’s Health Insurance Program (CHIP), or acquire newly eligible dependents. This is required under the Health Insurance Portability and Accountability Act (HIPAA).

If you decline enrollment in a Chipotle medical plan for you or your dependents (including your spouse/domestic partner) because of other health insurance coverage or group health plan coverage, you or your dependents may be able to enroll in a Chipotle medical plan without waiting for the next Open Enrollment period if you:

- Lose other health insurance or group health plan coverage. You must request enrollment within 30 days after the loss of other coverage.
- Gain a new dependent as a result of marriage, birth, adoption, or placement for adoption. You must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.
- Lose Medicaid or Children’s Health Insurance Program (CHIP) coverage because you are no longer eligible or become eligible for a state’s premium assistance program under Medicaid or CHIP. You must request enrollment within 60 days after the loss of such coverage or within 60 days of gaining eligibility for such coverage.

If you request a change due to a special enrollment event within the 30 day time frame, coverage will be effective the date of birth, adoption or placement for adoption. For all other events, coverage will be effective the first of the month following your request for enrollment. Specific restrictions may apply, depending on federal and state law. If you have questions, or to notify the plan, email benefits@chipotle.com.

Note: If your dependent becomes eligible for a special enrollment rights, you may add the dependent to your current coverage or change to another health plan. Any other currently covered dependents may also switch to the new plan in which you enroll.

Women’s Health and Cancer Rights Act

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women’s Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:(1) all stages of reconstruction of the breast on which the mastectomy was performed;(2) surgery and reconstruction of the other breast to produce a symmetrical appearance;(3) prostheses; and (4) treatment of physical complications of the mastectomy, including lymphedemas. These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this Plan. If you would like more information on WHCRA benefits, please contact the Benefits Team.

The Uniformed Services Employment and Reemployment Rights Act (USERRA)

If you leave your job to perform military service, you have the right to elect to continue your existing employer-based health plan coverage for you and your dependents (generally up to 24 months) while in the military. Even if you don’t elect to continue coverage during your military service, you have the right to be reinstated in your employer’s health plan when you are reemployed, generally without any waiting periods or exclusions (e.g., pre-existing condition exclusions) except for service-connected illnesses or injuries.

Notice of Special Enrollment for Dependents Up to Age 26

Individuals whose coverage ended, or who were denied coverage (or were not eligible for coverage), because the availability of dependent coverage of children ended before attainment of age 26 are eligible to enroll in a Chipotle health plan, unless they have other employer-provided coverage. Individuals may request enrollment for such children for 30 days from the beginning of the plan’s open enrollment period to request enrollment. Enrollment will be effective the first day of plan year.

The Newborns' And Mothers' Health Protection Act

Federal law protects the benefit rights of mothers and newborns related to any hospital stay in connection with childbirth. In general, group health plans and health insurance issuers may not:

1. Restrict benefits for the length of hospital stay for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable).
2. Require that a provider obtain authorization from the plan or the insurance issuer for prescribing a length of stay of up to 48 hours (or 96 hours).

For details on any state maternity laws that may apply to your medical plan, please refer to the benefits material for the medical plan in which you are enrolled.

Notice of Privacy Practices for Protected Health Information

This information describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

The Health Insurance Portability and Accountability Act's ("HIPAA's") privacy regulation ("Privacy Rule") regulates the use and disclosure of your protected health information ("PHI") by group health plans that are covered entities. Under the Privacy Rule, PHI generally means any oral, written, or electronic information that: (i) relates to your past, present or future physical or mental health condition or health plan coverage and (ii) may identify you. This Notice describes how Chipotle Mexican Grill, Inc.'s ("Chipotle's") group health plans ("Plans") that are HIPAA covered entities may use and disclose your PHI, as permitted by the Privacy Rule. This Notice also describes your individual rights concerning your PHI.

Chipotle sponsors the following group health plans that are HIPAA covered entities:

- Chipotle Health and Welfare Plan for Apprentice, General Manager, Restaurateur and Staff

Together, these plans form an "organized health care arrangement" within the meaning of HIPAA.

This means that these plans have coordinated their HIPAA privacy efforts, including this Notice.

When we say "we" or "our" in this Notice, we mean Chipotle's organized health care arrangement. When we say "you" or "your" in this Notice, we mean any person entitled to benefits under a Plan.

Section 1. Plan Duties - Federal law says that we must maintain the privacy of your PHI and give you notice of our legal duties and privacy practices concerning your PHI. We must follow the terms of this Notice, as currently in effect. However, we have the right to change the terms of this Notice at any time and to make the new Notice provisions effective for all PHI that we have then or will later have. We will provide you with a revised Notice at work or by mail if we make material changes to our privacy practices.

Section 2. How and When the Plan May Use or Disclose PHI - Sections A and B below describe the different ways in which we may use or disclose your PHI without your written authorization. We must have your written authorization for any other uses and disclosures. You may revoke your authorization at any time, but only if you make the request to revoke in writing and give or send it to our HIPAA Privacy Contact at the address below. Your revocation of an authorization will not apply to any action we have already taken in reliance on such authorization.

A. Primary Uses and Disclosures of PHI

Required Disclosures. We must disclose your PHI to you upon your request. We must also disclose your PHI to the Secretary of the Department of Health and Human Services without your authorization for an investigation of our compliance with the Privacy Rule.

Treatment. We may disclose your PHI for treatment activities, as permitted by the Privacy Rule. These activities include a health care provider's providing, coordinating or managing your health care and related services, health care providers' consulting with one another about you, and referrals by one provider to another. For example, we may disclose your Plan enrollment status to a hospital in connection with a planned admission without your authorization.

Payment. We may use or disclose your PHI for payment activities, as permitted by the Privacy Rule. For example, without your authorization, we may disclose your PHI in order to collect your premiums or reimbursement for providing health care to you. In the same way, we may also disclose your PHI to another covered entity or a health care provider for its own payment activities.

Health Care Operations. We may use or disclose your PHI for health care operations activities, as permitted by the Privacy Rule. Health care operations activities within our organized health care arrangement include:(i) quality assessment and improvement activities,(ii) population-based activities relating to reducing health care costs,(iii) case management and care coordination,(iv) evaluating health plan performance,(v) underwriting, premium rating and similar activities and (vi) the general business management and general administrative activities of the entity for whom the health care operations activities are performed. For example, without your authorization, we may use or disclose information about your claims to project future benefit costs or audit the claims processing functions. If the Plan uses or discloses PHI for underwriting purposes, the Plan will not use or disclose PHI that is your genetic information for such purposes.

To the Plan Sponsor. We, or a health insurance issuer or HMO with respect to a Plan, may disclose your PHI to Chipotle in its capacity as plan sponsor, as permitted by the Privacy Rule. For example, without your authorization, we may disclose your PHI to Chipotle so that it may evaluate plan design changes.

B. Other Uses and Disclosures of PHI

Disclosures Required By Law. We may use or disclose your PHI when required by law, as permitted by the Privacy Rule, without your authorization.

For Public Health Activities. We may disclose your PHI without your authorization for certain public health activities, as permitted by the Privacy Rule. Examples of public health activities include activities to prevent or control disease, injury or disability (including reporting a disease) and public health interventions.

About Victims of Abuse, Neglect or Domestic Violence. We may disclose your PHI if we reasonably believe that you are a victim of abuse, neglect, or domestic violence. We may only make this disclosure to a government authority (including a social service or protective services agency) authorized by law to receive reports of such abuse, neglect or domestic violence, as permitted by the Privacy Rule. We will make this type of disclosure only if you agree to the disclosure or if the disclosure is otherwise required or authorized by law.

For Health Oversight Activities. We may disclose your PHI without your authorization to a public health oversight agency for certain oversight activities authorized by law, as permitted by the Privacy Rule (for example, audits, investigations, or inspections).

For Judicial and Administrative Proceedings. We may disclose your PHI without your authorization in response to a court or administrative order issued in any judicial or administrative proceeding, as permitted by the Privacy Rule. We may also disclose your PHI in response to a subpoena, discovery request or other lawful purpose, without a court or administrative order, but only if:(i) we obtain an order protecting the information requested or (ii) efforts have been made to tell you about the request for your PHI.

For Law Enforcement Purposes. We may disclose your PHI without your authorization to a law enforcement official for certain law enforcement purposes, as permitted by the Privacy Rule (for example, disclosure in response to a court order, subpoena, summons or similar process).

To Coroners, Medical Examiners, and Funeral Directors. We may disclose your PHI without your authorization to a coroner or medical examiner for the purpose of:(i) identifying a deceased person,(ii) determining a cause of death or (iii) other duties as authorized by law, as permitted by the Privacy Rule. Also, we may disclose your PHI to funeral directors, consistent with applicable law, as necessary to carry out their duties regarding the decedent.

For Organ and Tissue Donation Purposes. We may use or disclose your PHI without your authorization to organ procurement organizations or other entities engaged in the procurement, banking, or transplantation of cadaveric organs, eyes or tissue for the purpose of facilitating organ, eye or tissue donation and transplantation, as permitted by the Privacy Rule.

For Research. We may use or disclose your PHI for research without your authorization, as permitted by the Privacy Rule. A number of conditions must be met before we use or disclose your PHI for research.

To Avert a Serious Threat to Health or Safety. We may use or disclose your PHI without your authorization when necessary to prevent a serious threat to someone's health and safety, as permitted by the Privacy Rule. We may only make that kind of disclosure, however, to someone able to lessen or prevent the threat.

For Specialized Governmental Functions. We may use or disclose your PHI without your authorization for specialized governmental functions, as permitted by the Privacy Rule (for example, disclosure to authorized federal officials for lawful national security activities).

For Workers' Compensation. We may use or disclose your PHI without your authorization when authorized by and to the extent necessary to comply with workers' compensation or other similar programs established by law that provide benefits for work-related injuries or illness without regard to fault, as permitted by the Privacy Rule.

For Care and Notification. We may use or disclose your PHI without your authorization to your family member, other relative or a close personal friend or other person you identify. Our disclosure will be limited to PHI that is directly relevant to your care or payment related to your care. This includes information about your location, general condition or death, as permitted by the Privacy Rule.

Incident to a Use or Disclose Permitted by the Privacy Rule. We may make a use or disclosure of your PHI without your authorization if the use or disclosure is incidental to a use or disclosure otherwise permitted by the Privacy Rule. We will make reasonable efforts to limit PHI used and/or disclosed to the minimum necessary to accomplish the intended purpose of the use and/or disclosure. We have in place appropriate administrative, technical and physical safeguards to protect the privacy of your PHI.

Section 3. Your Rights - Right to Request Restrictions on PHI Uses and Disclosures. You have the right to request that we restrict uses and disclosures of your PHI to carry out treatment, payment or health care operations, or to restrict uses and disclosures to family members, relatives, friends or other persons identified by you who are involved in your care or in payment for your care, as permitted by the Privacy Rule. However, we are not required to agree to your request. Your request for restrictions must be in writing to our HIPAA Privacy Contact at the address below. Effective February 17, 2010, an entity covered by these HIPAA rules (such as your health care provider) or its business associate must comply with your request that health information regarding a specific health care item or service not be disclosed to the Plan for purposes of payment or health care operations if you have paid for the item or service, in full out of pocket.

Right to Receive Confidential Communications. You have the right to request that we make certain communications of your PHI to you by alternative means or to alternative locations, if our traditional means of communication could endanger you. Your request for confidential communications of PHI must be in writing to our HIPAA Privacy Contact at the address below. Your request must include a statement that the disclosure of all or part of the information could endanger you.

Right to Inspect and Copy PHI. You have the right to request access to inspect or obtain a copy of certain types of PHI that we have about you. Your request for access must be in writing to our HIPAA Privacy Contact at the address below. If you ask for a copy of the information, we may charge a fee for the costs of copying, mailing or other charges related to fulfilling your request. We may deny your request for access to inspect or obtain a copy of your PHI in certain circumstances, as permitted by the Privacy Rule. Effective February 17, 2010, you may request an electronic copy of your health information if it is maintained in an electronic health record. You may also request that such electronic health information be sent to another entity or person, so long as that request is clear, conspicuous and specific. Any charge that is assessed to you for these copies, if any, must be reasonable and based on the Plan's cost.

Right to Amend PHI. If you feel that the PHI we have for you is incorrect or incomplete, you may ask us to amend your information. Your request for an amendment must be in writing to our HIPAA Privacy Contact at the address below. Your written request must also specify the basis for the amendment. We may deny your request for an amendment in certain circumstances, as permitted by the Privacy Rule.

Right to Receive an Accounting of PHI Disclosures. You have the right to receive an accounting of certain disclosures of your PHI that we have made. Your request for an accounting of disclosures must be in writing to our HIPAA Privacy Contact at the address below. Your written request must specify the time period for which you are requesting an accounting. That time period may not be longer than six years from the date of your request. Your written request should state the format (paper, electronic, etc.) in which you want to receive your accounting. We may charge a fee for the costs of responding to more than one accounting request in a 12-month period. We may deny your request for an accounting in certain circumstances, as permitted by the Privacy Rule.

Right to Obtain a Paper Copy of Notice. You have the right to receive a paper copy of this Notice at any time, even if you have agreed to receive this notice electronically. To obtain a paper copy of this Notice, please make your request in writing to our HIPAA Privacy Contact at the address below.

Section 4. Complaints - If you believe your privacy rights have been violated, you may file a complaint with Chipotle or with the Secretary of the Department of Health and Human Services. To file a complaint with Chipotle, write to our HIPAA Privacy Contact at the address below. Your complaint must be submitted in writing. You will not be retaliated against for filing a complaint.

Section 5. Address - If you have any questions about or privacy practices or the information contained in this Notice, please contact our HIPAA Privacy Contact at: Chipotle Mexican Grill, Inc., HR Benefits Manager 1401 Wynkoop St, Ste. 500, Denver, Colorado 80202, 303-595-4000

Medicaid and the Children's Health Insurance Program (CHIP) Offer Free or Low-Cost Health Coverage to Children and Families

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs, but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, you can contact your state Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your state Medicaid or CHIP office or dial **1-877-KIDS NOW** or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must permit you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, you can contact the Department of Labor at www.askebsa.dol.gov or call **1-866-444-EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of August 10, 2017. You should contact your state for further information on eligibility.

State	Contact Information
Alabama - Medicaid	Website: http://www.myalhipp.com Phone: 1-855-692-5447
Alaska - Medicaid	Website: http://myakhipp.com/ Phone: 1-866-251-4861 Email: CustomerService@MyAKHIPP.com Medicaid Eligibility: http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx
Arkansas - Medicaid	Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (1-855-692-7447)
Colorado - Health First Colorado (Colorado's Medicaid Program) & Child Health Plus Plan (CHP+)	Health First Colorado: Website: https://www.healthfirstcolorado.com/ Phone: 1-800-221-3943, State Relay 711 CHP+: Website: Colorado.gov/HCPF/Child-Health-Plan-Plus Phone: 1-800-359-1991, State Relay 711
Florida - Medicaid	Website: http://flmedicaidtplrecovery.com/hipp/ Phone: 1-877-357-3268
Georgia - Medicaid	Website: http://dch.georgia.gov/medicaid (Click Health Insurance Premium Payment (HIPP)) Phone: 1-404-656-4507
Indiana - Medicaid	Healthy Indiana Plan for low-income adults 19-64: Website: http://www.in.gov/fssa/hip/ All other Medicaid: Website: http://www.indianamedicaid.com Phone: 1-800-403-0964
Iowa - Medicaid	Website: http://dhs.iowa.gov/ime/members/medicaid-a-to-z/hipp Phone: 1-888-346-9562
Kansas - Medicaid	Website: http://www.kdheks.gov/hcf/ Phone: 1-800-792-4884 Phone (In-state): 1-785-296-3512
Kentucky - Medicaid	Website: http://chfs.ky.gov/hcf/ Phone: 1-800-635-2570
Louisiana - Medicaid	Website: http://dhh.louisiana.gov/index.cfm/subhome/1/n/331 Phone: 1-888-695-2447
Maine - Medicaid	Website: http://www.maine.gov/dhhs/ofi/public-assistance/index.html Phone: 1-800-442-6003 TTY: Maine relay 711

State	Contact Information
Massachusetts - Medicaid and CHIP	Medicaid & CHIP Website: http://www.mass.gov/eohhs/gov/departments/masshealth/ Medicaid & CHIP Phone: 1-800-462-1120
Minnesota - Medicaid	Website: http://mn.gov/dhs/ma/ Phone (Outside Twin City area): 1-800-657-3739 Phone (Twin City area): 1-651-431-2670
Missouri - Medicaid	Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 1-573-751-2005
Montana - Medicaid	Website: http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP Phone: 1-800-694-3084
Nebraska - Medicaid	Website: http://www.ACCESSNebraska.ne.gov Phone: 1-855-632-7633 Lincoln: 1-402-473-4000 Omaha: 1-402-595-1178
Nevada - Medicaid	Website: http://dwss.nv.gov/ Phone: 1-800-992-0900
New Hampshire - Medicaid	Website: http://www.dhhs.nh.gov/oii/documents/hippapp.pdf Phone: 1-603-271-5218
New Jersey - Medicaid and CHIP	Medicaid Website: http://www.state.nj.us/humanservices/dmahs/clients/medicaid/ Medicaid Phone: 1-609-631-2392 CHIP Website: http://www.njfamilycare.org/index.html CHIP Phone: 1-800-701-0710
New York - Medicaid	Website: https://www.health.ny.gov/health_care/medicaid Phone: 1-800-541-2831
North Carolina - Medicaid	Website: https://dma.ncdhhs.gov/ Phone: 1-919-855-4100 (Main office) Phone: 1-855-696-2447 (HIPP)
North Dakota - Medicaid	Website: http://www.nd.gov/dhs/services/medicalserv/medicaid/ Phone: 1-844-854-4825
Oklahoma - Medicaid and CHIP	Website: http://www.insureoklahoma.org Phone: 1-888-365-3742
Oregon - Medicaid and CHIP	Medicaid & CHIP Website: http://healthcare.oregon.gov/Pages/index.aspx http://www.oregonhealthcare.gov/index-es.html Medicaid & CHIP Phone: 1-800-699-9075
Pennsylvania - Medicaid	Website: http://www.dhs.pa.gov/provider/medicalassistance/healthinsurancepremiumpaymenthippprogram/index.htm Phone: 1-800-692-7462
Rhode Island - Medicaid	Website: http://www.eohhs.ri.gov/ Phone: 1-855-697-4347
South Carolina - Medicaid	Website: http://www.scdhhs.gov Phone: 1-888-549-0820
South Dakota - Medicaid	Website: http://dss.sd.gov Phone: 1-888-828-0059
Texas - Medicaid	Website: http://www.gethipptexas.com/ Phone: 1-800-440-0493
Utah - Medicaid and CHIP	Medicaid Website: https://medicaid.utah.gov CHIP Website: http://health.utah.gov/chip Phone: 1-877-543-7669
Vermont- Medicaid	Website: http://www.greenmountaincare.org Phone: 1-800-250-8427
Virginia - Medicaid and CHIP	Medicaid Website: http://www.coverva.org/programs_premium_assistance.cfm CHIP Phone: 1-855-242-8282 Medicaid Phone: 1-800-432-5924 CHIP Website: http://www.coverva.org/programs_premium_assistance.cfm
Washington - Medicaid	Website: http://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/health-insurance-premium-program Phone: 1-800-562-3022, ext. 15473
West Virginia - Medicaid	Website: http://mywvhipp.com/ Phone: 1-855-699-8447

State	Contact Information
Wisconsin - Medicaid and CHIP	Website: https://www.dhs.wisconsin.gov/publications/p1/p10095.pdf Phone: 1-800-362-3002
Wyoming - Medicaid	Website: https://wyequalitycare.acs-inc.com/ Phone: 1-307-777-7531

To see if any more states have added a premium assistance program since August 10, 2017, or for more information on special enrollment rights, you can contact either:

U.S. Department of Labor

Employee Benefits Security Administration
www.dol.gov/agencies/ebsa
 1-866-444-EBSA (3272)

U.S. Department of Health and Human Services

Centers for Medicare & Medicaid Services
www.cms.hhs.gov
 1-877-267-2323, Menu Option 4, Ext. 61565

Important Notice from Chipotle About Creditable Prescription Drug Coverage and Medicare

The purpose of this notice is to advise you that the prescription drug coverage under the Chipotle medical plans is expected to pay out, on average, at least as much as the standard Medicare prescription drug coverage will pay in 2018. This is known as “creditable coverage.”

Why this is important. If you or your covered dependent(s) are enrolled in any prescription drug coverage during 2018 listed in this notice and are or become covered by Medicare, you may decide to enroll in a Medicare prescription drug plan later and not be subject to a late enrollment penalty — as long as you had creditable coverage within 63 days of your Medicare prescription drug plan enrollment. You should keep this notice with your important records.

If you or your family members aren’t currently covered by Medicare and won’t become covered by Medicare in the next 12 months, this notice doesn’t apply to you.

Notice of Creditable Coverage

Please read this notice carefully and keep it where you can find it. This notice has important information about your current prescription drug coverage with Chipotle and about your options under Medicare’s prescription drug coverage. It also tells you where to find more information to help you make decisions about your prescription drug coverage.

You may have heard about Medicare’s prescription drug coverage (called Part D), and wondered how it would affect you. Prescription drug coverage is available to everyone with Medicare through Medicare prescription drug plans. All Medicare prescription drug plans provide at least a standard level of coverage set by Medicare. Some plans also offer more coverage for a higher monthly premium.

Individuals can enroll in a Medicare prescription drug plan when they first become eligible, and each year from October 15 through December 7. Individuals leaving employer/union coverage may be eligible for a Medicare Special Enrollment Period.

If you are covered by a Chipotle medical plan, you’ll be interested to know that coverage is, on average, at least as good as standard Medicare prescription drug coverage for 2018. This is called creditable coverage. Coverage under either plan will help you avoid a late Part D enrollment penalty if you are or become eligible for Medicare and later decide to enroll in a Medicare prescription drug plan.

If you decide to enroll in a Medicare prescription drug plan and you're an active associate, a retiree, or a family member of an active associate or a retiree, you may also continue your employer coverage. In this case, the Chipotle plan will continue to pay primary or secondary as it had before you enrolled in a Medicare prescription drug plan. If you waive or drop Chipotle coverage, Medicare will be your only payer. You can re-enroll in the Chipotle plan during Open Enrollment or if you have a special enrollment event for the Chipotle plan.

You should know that if you waive or leave coverage with Chipotle and you go 63 days or longer without creditable prescription drug coverage (once your applicable Medicare enrollment period ends), your monthly Part D premium will go up at least 1% per month for every month that you did not have creditable coverage. For example, if you go 19 months without coverage, your Medicare prescription drug plan premium will always be at least 19% higher than what most other people pay. You'll have to pay this higher premium as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to enroll in Part D.

You may receive this notice at other times in the future — such as before the next period you can enroll in Medicare prescription drug coverage, if this Chipotle coverage changes, or upon your request.

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. Medicare participants will get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans.

Here's how to get more information about Medicare prescription drug plans:

- Visit www.medicare.gov for personalized help.
- Call your State Health Insurance Assistance Program (see a copy of the Medicare & You handbook for the telephone number).
- Call (800) MEDICARE ((800) 633-4227). TTY users should call (877) 486-2048.

For people with limited income and resources, extra help paying for a Medicare prescription drug plan is available. Information about this extra help is available from the Social Security Administration (SSA). For more information about this extra help, visit SSA online at www.socialsecurity.gov or call (800) 772-1213 (TTY:(800) 325-0778).

Remember: Keep this creditable coverage notice. If you enroll in a Medicare prescription drug plan after your applicable Medicare enrollment period ends, you may need to provide a copy of this notice when you join a Part D plan to show that you are not required to pay a higher Part D premium amount.

Date: October 2017
 Contact: Benefits Team
 Address: 1401 Wynkoop St., Suite 500
 Denver, CO 80202
 Number: (877) 625-1919

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