

2023

# Benefits Guide

January 1 - December 31, 2023



**Welcome!** Your benefits are an important part of your overall compensation. We are pleased to offer a comprehensive array of valuable benefits to protect your health, your family and your way of life. This guide answers some of the basic questions you may have about your benefits. Please read it carefully, along with any supplemental materials you receive.

## Eligibility

You are eligible for benefits if you work 30 or more hours per week. You may also enroll your eligible family members under certain plans you choose for yourself. Eligible family members include:

- ▶ Your legally married spouse
- ▶ Your children who are your natural children, stepchildren, adopted children or children for whom you have legal custody (age restrictions may apply). Disabled children age 26 or older who meet certain criteria may continue on your health coverage.

## When Coverage Begins

- ▶ **New Hires:** You must complete the enrollment process within 31 days of your date of hire. If you enroll on time, health coverage is effective on your date of hire, dental and vision are effective on the 1st of the month following hire date. Confirm the effective date with your employer on all other lines of coverage.

If you fail to enroll on time, you will **NOT** have benefits coverage (except for company-paid benefits).

- ▶ **Open Enrollment:** Changes made during Open Enrollment are effective January 1 - December 31, 2023.

To enroll online, go to <https://ew14.ultipro.com>.

## Choose Carefully!

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualified life event during the year. Following are examples of the most common qualified life events:

- ▶ Marriage or divorce
- ▶ Birth or adoption of a child
- ▶ Child reaching the maximum age limit
- ▶ Death of a spouse or child
- ▶ You lose coverage under your spouse's plan
- ▶ You gain access to state coverage under Medicaid or CHIP

## Making Changes

**To make changes to your benefit elections, you must contact Human Resources within 31 days of the qualified life event (including newborns).** Be prepared to show documentation of the event such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

# Medical

We are proud to offer you a medical plan through HealthPartners. Following is a high-level overview of the coverage available.

Key Medical Benefits	HDHP - HSA	
	In-Network	Out-of-Network <sup>1</sup>
<b>Deductible</b> (per calendar year)		
Individual / Family	\$3,500 / \$7,000	\$7,000 / \$14,000
<b>Out-of-Pocket Maximum</b> (per calendar year)		
Individual / Family	\$3,500 / \$7,000	\$10,000 / \$20,000
<b>Company Contribution to Your Health Savings Account (HSA)</b> (per calendar year; prorated for new hires/newly eligible)		
Individual / Family	\$900 / \$900	
<b>Covered Services</b>		
Office Visits (physician/specialist)	0%*	30%*
Routine Preventive Care	No charge	30%*
Outpatient Diagnostic (lab/X-ray)	0%*	30%*
Complex Imaging	0%*	30%*
Chiropractic	0%*	30%*
Ambulance	0%*	
Emergency Room	0%*	
Urgent Care Facility	0%*	
Inpatient Hospital Stay	0%*	30%*
Outpatient Surgery	0%*	30%*
<b>Prescription Drugs</b>		
Retail Pharmacy (30-day supply)	0%*	30%*
Mail Order (90-day supply)	0%*	30%*

Coinurance percentages and copay amounts shown in the above chart represent what the member is responsible for paying.

\*Benefits with an asterisk ( \* ) require that the deductible be met before the Plan begins to pay.

To be eligible for the HSA, you cannot be covered through Medicare Part A or Part B or TRICARE programs. See the plan documents for full details.

1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.

# Dental

We are proud to offer you a dental plan through Delta Dental of Minnesota. Following is a high-level overview of the coverage available.

Key Dental Benefits	Delta Dental PPO	
	In-Network	Out-of-Network <sup>1</sup>
<b>Deductible</b> (per calendar year)		
Individual / Family	\$50 / \$100	
<b>Benefit Maximum</b> (per calendar year; preventive, basic, and major services combined)		
Per Individual	\$1,500	
<b>Covered Services</b>		
<b>Preventive Services</b>	0%	
<b>Basic Services</b>	20%*	
<b>Major Services</b>	50%*	
<b>Orthodontia</b> (Child & Adult)	50% to a \$2,000 lifetime maximum	50%

Coinurance percentages and copay amounts shown in the above chart represent what the member is responsible for paying.

\*Benefits with an asterisk ( \* ) require that the deductible be met before the Plan begins to pay.

1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.

# Vision

We are proud to offer you a vision plan through Avesis.

Key Vision Benefits	In-Network	Out-of-Network Reimbursement
<b>Exam</b> (once every 12 months)	\$10	Up to \$35
<b>Materials Copay</b>	\$10	N/A
<b>Lenses</b> (once every 12 months)	No charge after materials copay	
Single Vision		Up to \$25
Bifocal		Up to \$40
Trifocal		Up to \$50
<b>Frames</b> (once every 24 months)	\$35 wholesale or \$100 retail allowance	Up to \$45
<b>Contact Lenses</b> (once every 12 months; in lieu of glasses)	\$110 allowance	Up to \$110

# Health Savings Account (HSA)

A High-Deductible Health Plan (HDHP) gives you the freedom to seek care from the provider of your choice. You will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the network. In addition, the HDHP comes with a health savings account (HSA) that allows you to save pre-tax dollars<sup>1</sup> to pay for any qualified health care expenses as defined by the IRS, including most out-of-pocket medical, medications, dental and vision expenses. For a complete list of qualified health care expenses, visit [www.irs.gov/pub/irs-pdf/p502.pdf](http://www.irs.gov/pub/irs-pdf/p502.pdf).

1. Tax free under federal tax law; state taxation rules may apply.



# Flexible Spending Accounts (FSAs)

We provide you with an opportunity to participate in up to two different flexible spending accounts (FSAs) administered through Alerus. FSAs allow you to set aside a portion of your income, before taxes, to pay for qualified health care and/or dependent care expenses. Because that portion of your income is not taxed, you pay less in federal income, Social Security and Medicare taxes.

## Health Care FSA

For 2023, you may contribute up to \$3,050 to cover qualified health care expenses incurred by you, your spouse and your children up to age 26. For a complete list of eligible expenses, visit [www.irs.gov/pub/irs-pdf/p502.pdf](http://www.irs.gov/pub/irs-pdf/p502.pdf).

## Limited-Purpose Health Care FSA (for HSA participants)

If you enroll in the HSA medical plan, you may only participate in a limited-purpose Health Care FSA. This type of FSA allows you to be reimbursed for eligible dental, orthodontia and vision expenses while preserving your HSA funds for eligible medical expenses.

## Dependent Care FSA

For 2023, you may contribute up to \$5,000 (per family) to cover eligible dependent care expenses (\$2,500 if you and your spouse file separate tax returns). For a complete list of eligible expenses, visit [www.irs.gov/pub/irs-pdf/p503.pdf](http://www.irs.gov/pub/irs-pdf/p503.pdf).

## FSA RULES

### YOU MUST ENROLL EACH YEAR TO PARTICIPATE.

Because FSAs can give you a significant tax advantage, they must be administered according to specific IRS rules:

**Health Care FSA:** Unused funds of up to \$570 from one year can carry over to the following year. Carryover funds will not count against or offset the amount that you can contribute annually. Unused funds over \$570 will **NOT** be returned to you or carried over to the following year.

**Dependent Care FSA:** Unused funds will **NOT** be returned to you or carried over to the following year.

Maximum contribution amount is established by the IRS and your employer each year. See plan document for details.



# Voluntary Benefits

## Accident Insurance

Accident insurance can soften the financial impact of an accidental injury by paying a benefit to you to help cover the unexpected out-of-pocket costs related to treating your injuries.

## Critical Illness with Cancer Indemnity

This plan pays a flat dollar amount to you when a covered person is diagnosed with a covered condition. Other benefits include payments, directly to you, for hospital confinement, medical imaging, radiation and chemotherapy, immunotherapy, transportation and lodging. The plan also includes a cancer screening wellness benefit.

## Disability

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness.

### Voluntary Short-Term Disability

Provided at an affordable group rate through Mutual of Omaha.

<b>Benefit Percentage</b>	40% or 60%
<b>Weekly Benefit Maximum</b>	\$1,000
<b>When Benefits Begin</b>	On the 8 <sup>th</sup> day of disability
<b>Maximum Benefit Duration</b>	12 weeks

# Employee Assistance Program (EAP)

Life is full of challenges, and sometimes balancing it is difficult. We are proud to provide a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The employee assistance program (EAP) is provided at **NO COST** to you through The Standard.

The EAP can help with the following issues, among others:

- ▶ Mental health
- ▶ Relationships or marital conflicts
- ▶ Child and eldercare
- ▶ Substance abuse
- ▶ Grief and loss
- ▶ Legal or financial issues

## EAP Benefits

- ▶ Assistance for you and your household members
- ▶ Up to three (3) in-person sessions with a counselor per issue, per year, per individual
- ▶ Unlimited toll-free phone access and online resources

## Supplemental Life/AD&D (Employee-paid)

If you determine you need more than the basic coverage, you may purchase additional coverage through **Mutual of Omaha** for yourself and your eligible family members.

	Benefit Option	Guaranteed Issue*
<b>Employee</b>	\$10,000 increments up to 5 times your annual salary to a maximum of \$500,000	\$150,000
<b>Spouse</b>	\$5,000 increments up to \$100,000, coverage cannot exceed the employees election	\$25,000
<b>Child(ren)</b>	\$1,000 increments to a maximum of \$10,000	\$10,000

\*During your initial eligibility period only, you can receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.

# Valuable Extras

- ▶ Employer paid life insurance - \$20,000
- ▶ Employer paid Long-Term Disability
- ▶ 401(k)
- ▶ Paid Time Off

# Contact Information

Coverage	Carrier	Phone #	Website/Email
Medical	Health Partners	800-883-2177	<a href="http://healthpartners.com">healthpartners.com</a>
Dental	Delta Dental of Minnesota	800-448-3815	<a href="http://deltadentalmn.org">deltadentalmn.org</a>
Vision	Avesis	800-828-9341	<a href="http://avesis.com">avesis.com</a>
Health Savings Account (HSA) and Flexible Spending Accounts (FSAs)	Alerus	877-661-4727	<a href="http://www.alerusb.com">www.alerusb.com</a>
Life and AD&D	Mutual of Omaha	800-877-5176	<a href="http://mutualofomaha.com">mutualofomaha.com</a>
Disability	Mutual of Omaha	800-877-5176	<a href="http://mutualofomaha.com">mutualofomaha.com</a>
Employee Assistance Program (EAP)	The Standard	888-293-6948	<a href="http://www.workhealthlife.com/Standard3">www.workhealthlife.com/Standard3</a>
Accident and Critical Illness Insurance	Allstate	800-521-3535	<a href="http://www.allstatebenefits.com">www.allstatebenefits.com</a>

## Benefits Website

Our benefits website can be accessed anytime you want additional information on our benefits programs.

## Questions?

If you have additional questions, you may also contact:

Human Resources  
701-476-7480  
[\\_humanresources@wallworkinc.com](mailto:_humanresources@wallworkinc.com)



## Benefit Spot

We've gone mobile! To help you access your benefits information—even when you're away from work and need it most—we've launched a mobile benefits app. To get started, Download "Benefit Spot" on the Apple App Store or Google Play and **enter company code: WAL**



**DISCLAIMER:** The material in this benefits brochure is for informational purposes only and is neither an offer of coverage or medical or legal advice. It contains only a partial description of plan or program benefits and does not constitute a contract. Please refer to the Summary Plan Description (SPD) for complete plan details. In case of a conflict between your plan documents and this information, the plan documents will always govern. **Annual Notices:** ERISA and various other state and federal laws require that employers provide disclosure and annual notices to their plan participants. The company will distribute all required notices annually.

