



APPLE TREE DENTAL



2019 Benefit Summary



Benefits Overview

When you think about your total compensation package, don't forget about your benefits. Along with your pay, Apple Tree Dental has provided a benefit program with real financial value. Your benefits package will improve your life and the lives of your family members. A great deal of time and effort has been invested in designing, funding, and maintaining a quality benefit plan. But you and your family can also play an important role in getting the most from your benefits by making sure that you understand them.

Apple Tree Dental is proud to offer a comprehensive benefits package to eligible, full-time employees who work 36 hours per week (30 hours for medical). The complete benefits package is briefly summarized in this booklet. You will receive plan booklets, which give you more detailed information about each of these programs.

Benefit Plans Offered

- ▶ Medical
- ▶ Health Savings Account (HSA)
- ▶ Dental
- ▶ Vision
- ▶ Flexible Spending Account (FSA)
- ▶ Life Insurance and Accidental Death & Dismemberment (AD&D) Insurance
- ▶ Disability Insurance
- ▶ Voluntary Life and AD&D
- ▶ 401(k)
- ▶ Paid Time off (PTO) and Holidays

Eligibility

You and your dependents are eligible for Apple Tree Dental benefits if you work more than 36 hours per week (30 hours for medical). The waiting period is the first of the month following 60 days of employment.

Eligible dependents are your spouse, children under age 26, and disabled dependents of any age. Elections made now will remain until the next open enrollment unless you or your family members experience a qualifying event. If you experience a qualifying event, you must contact HR within 30 days.

Some examples of changes in family status that may justify a change in benefit elections include:

- ▶ Marriage/Divorce
- ▶ Death of spouse or dependent
- ▶ Birth or adoption of a child, including placement for adoption
- ▶ Your spouse terminating employment where he/she has access to benefits
- ▶ You or your spouse switching employment status from full-time to part-time or vice versa
- ▶ Your dependent no longer qualifies as an eligible dependent due to exceeding the age of eligibility (26)

Medical Benefits

Administered by Blue Cross Blue Shield of Minnesota

Plan Information

Group number: 232541

Effective Date: January 1, 2019

Comprehensive and preventive healthcare coverage is important in protecting you and your family from the financial risks of unexpected illness and injury. A little prevention usually goes a long way—especially in healthcare. Routine exams and regular preventive care provide an inexpensive review of your health. Small problems can potentially develop into large expenses. By identifying the problems early, often they can be treated at little cost.

Comprehensive healthcare also provides peace of mind. In case of an illness or injury, you and your family are covered with an excellent medical plan through Apple Tree Dental.

Plan Design

A brief explanation is listed below: (A preventive care service includes a yearly physical exam). The plan designs show Blue Cross Blue Shield's cost-sharing percentages.

Plan Design Features	\$2,000-35-70% High Value Network	\$3,000-100% HSA	\$4,500-100% HSA
In-Network			
Lifetime Benefit Maximum	Unlimited	Unlimited	Unlimited
CY Deductible	\$2,000 per person \$4,000 per family	\$3,000 per person \$6,000 per family	\$4,500 per person \$9,000 per family
Coinsurance	70%	100%	100%
Medical Out-of-Pocket Maximum	\$4,000 per person \$8,000 per family	\$3,000 per person \$6,000 per family	\$4,500 per person \$9,000 per family
Preventive Care	\$0 (no deductible)	\$0 (no deductible)	\$0 (no deductible)
Office Visit/Urgent Care	\$35 Copay	Deductible, then 100%	Deductible, then 100%
Retail/Convenience Care	\$15 Copay	Deductible, then 100%	Deductible, then 100%
Lab & Pathology	Deductible, then 70%	Deductible, then 100%	Deductible, then 100%
X-ray & Other Imaging	Deductible, then 70%	Deductible, then 100%	Deductible, then 100%
IP & OP Hospitalization	Deductible, then 70%	Deductible, then 100%	Deductible, then 100%
Emergency Room	Deductible, then 70%	Deductible, then 100%	Deductible, then 100%
Prescription Drugs (Rx)			
Preventive Rx Coverage*	Not included	Included	Included
Generic/Brand/Non-Formulary	\$15 copay/\$50 copay/\$100 copay	Deductible, then 100%	Deductible, then 100%
Mail Order	\$45 copay/\$150 copay/\$300 copay	Deductible, then 100%	Deductible, then 100%
Out-of-Network			
Deductible	\$4,000 per person \$8,000 per family	\$6,000 per person \$12,000 per family	\$9,000 per person \$18,000 per family
Out-of-Pocket Maximum	\$12,000 per person \$24,000 per family	\$9,000 per person \$18,000 per family	\$13,500 per person \$27,000 per family
Coinsurance	50%	50%	50%

*For the Preventive Rx List, please go to Apple Tree Dental Benefit Center at www.appletreedental.benefithub.com.



Medical Rates

\$2,000-35-70% Plan:

This plan provides 70% coverage after the \$2,000 per person/\$4,000 per family in-network annual deductible has been met. Deductible does not apply to preventive care, primary or specialist office visit from in-network providers. Your in-network office, specialty, and urgent care visits are covered with a \$35 copay.

Level of Coverage	Employee Semi-Monthly Cost
Employee Only	\$117.51
EE + Child(ren)	\$222.79
EE + Spouse	\$424.27
Family	\$523.26

\$3,000-100% HSA Plan:

This plan provides 100% coverage after the \$3,000 per person/\$6,000 family in-network annual deductible has been met. Deductible does not apply to preventive care from in-network providers.

Level of Coverage	Employee Semi-Monthly Cost
Employee Only	\$101.47
EE + Child(ren)	\$201.38
EE + Spouse	\$413.88
Family	\$515.95

\$4,500-100% HSA Plan:

This plan provides 100% coverage after the \$4,500 per person/\$9,000 family in-network annual deductible has been met. Deductible does not apply to preventive care from in-network providers.

Level of Coverage	Employee Semi-Monthly Cost
Employee Only	\$62.84
EE + Child(ren)	\$136.09
EE + Spouse	\$325.02
Family	\$411.64

Blue Cross Blue Shield Plan Features

The following programs are offered at no additional cost by Blue Cross Blue Shield of Minnesota

High Value Network

The High Value Network is associated with the \$2,000 Deductible plan and it gives you an opportunity to reduce your cost by opting in to a narrow network of providers. If you accept the narrower physician options, you can maintain the same benefit plan design at a more affordable premium cost. Please visit the www.bluecrossmnonline.com website to see your provider options.

Fitness Center Discount

Work out at least eight times per month at any facility that participates in the BlueCross BlueShield local and national network of fitness centers and get a \$20 credit off your monthly membership. Visit www.bluecrossmnonline.com for additional details and a list of participating fitness centers.

24-Hour Nurse Advice Line

For quick access to a registered nurse anytime you have symptoms or questions about your health, call the Nurse Advice Line. You will be connected to a registered nurse who can help you decide whether to seek care immediately or wait until your clinic opens. Call [1.800.622.9524](tel:1.800.622.9524) whenever you need professional medical advice. Always dial 911 for medical emergencies.

Doctor on Demand

Have you ever imagined being able to visit a doctor online from home or work? You don't have to imagine anymore. An online care professional will review your information, make a diagnosis, prescribe medications, answer any questions, and will also suggest follow-up care as appropriate. Visit www.DoctorOnDemand.com/bluecrossmn today.

Stop-Smoking Support

It's easy, it works and it's free for all members of BCBSMN. Call and quit in your own way, at your own pace. To learn more or to get started, call [1.888.873.5973](tel:1.888.873.5973). Call anytime: Quit Coaches are standing by 24 hours a day, seven days a week. You can also register online at www.bluecrossmnonline.com.

Blue Cross Online Member Center

Use your Blue Cross member ID card to register online at www.bluecrossmnonline.com to understand your health plan, view your claims and HRA payments, get the right care and be your healthiest.



Health Savings Account (HSA)

Administered by Bremer Bank

Administrative costs are 100% employer-paid.

An HSA is an individually owned, tax-exempt trust account, which may be used as either a savings or a spending account. Its intended purpose is to provide pretax contribution and tax-free interest growth to pay for qualified out-of-pocket medical expenses now or at retirement

Important Note: To be eligible to open an HSA, you must meet the eligibility requirements set forth by the IRS. If you are covered under your spouse's medical plan, if you and/or your spouse participate in a medical reimbursement flexible spending account plan (unless this plan is limited to dental and vision care expenses only) and/or if you are currently on Medicare, you are not eligible to contribute to an HSA.

The HSA is funded by the Employee (voluntary) contributions on a pretax basis via payroll deduction. The maximum contributions to HSA accounts for 2019 are listed below. You may also qualify to contribute an additional \$1,000 to your HSA if you are age 55 or older. The HSA is fully owned by the employee and stays with the employee, even at termination of employment. Funds accumulate year after year; there is no "use it or lose it" rule.

HSA Annual Contribution Limits	
	2019
Employee Only	\$3,500
Employee + 1, Family	\$7,000



Dental Benefits

Administered by HealthPartners

Good oral care enhances overall physical health, appearance and mental well-being. Problems with the teeth and gums are common and easily treated health problems. Keep your teeth healthy and your smile bright with the Apple Tree Dental dental benefit plan.

	In-Network PPO	Out-of-Network PPO
Annual Deductible	None	None
Annual Benefit Maximum	\$1,500	\$1,500
Preventive Dental Services (cleanings, exams, x-rays)	you pay nothing	you pay nothing
Basic Dental Services I fillings (amalgam and anterior composite)	you pay nothing	you pay nothing
Posterior composite (white fillings), root canal therapy, non-surgical periodontics, and simple extractions	you pay 20%	you pay 20%
Basic Dental Services II Surgical periodontics Complex oral surgery	you pay 20%	you pay 20%
Special Care Restorative crowns & onlays	you pay 50%	you pay 50%
Prosthetics Bridges, dentures & partial dentures, dental implants	you pay 50%	you pay 50%

Dental Coverage	Employer Semi-Monthly Cost	Employee Semi-Monthly Cost
Single	\$24.64	\$0.00
Family	\$56.53	\$21.44

Summary Plan Descriptions are available in Human Resources or Contact HealthPartners at 800.883.2177 or visit www.healthpartners.com.



Vision Benefits

Administered by EyeMed

Plan Information

Group Number: VC-19

Effective Date: January 1, 2019

The plan provides coverage for eye exam, lenses, frames, contact lenses, and lasik coverage. Members are free to select any eye doctor, pay the doctor for all services, and then submit a receipt for reimbursement. The plan features an increasing annual maximum so members have more money to spend on exams and vision care products each year. Employees may purchase coverage for spouse and/or children.

Your Coverage

Vision Care Specialist	In-Network Cost	Out-of -Network Reimbursement
Exam with Dilation as Necessary	\$10 copay	Up to \$30
Contact Lens Fit & Follow Up — available once a comprehensive eye exam has been completed		
Standard Contact Lens Fit & Follow-Up	Up to \$40	N/A
Premium Contact Lens	10% off retail price	N/A
Retinal Imaging	Up to \$39	N/A
Frames	\$0 copay, \$130 allowance, 20% off balance over \$130	Up to \$65
Standard Plastic Lenses		
Single	\$25 copay	Up to \$25
Vision	\$25 copay	Up to \$40
Bifocal	\$25 copay	Up to \$40
Trifocal	\$25 copay	Up to \$60
Lenticular	\$25 copay	Up to \$40
Lens Options — paid by the member in addition to the price of the lenses		
UV Treatment	\$15	N/A
Tint (Solid & Gradient)	\$15	N/A
Standard Plastic Scratch Coating	\$15	N/A
Standard Polycarbonate— Adults	\$33 copay	Up to \$5
Standard Polycarbonate— Kids	\$0 copay	Up to \$20
Under 19 Standard Anti-Reflective	\$45	Up to \$20
Coating Polarized	20% off retail price	N/A
Other Add-Ons and Services	20% off retail price	N/A
Contact Lenses — contact lens allowance includes materials only		
Conventional	\$0 copay, \$130 allowance, 15% off balance over \$130	Up to \$104
Disposable	\$0 copay, \$130 allowance, plus balance over \$130	Up to \$104
Medically Necessary	\$0 copay, paid in full	Up to \$200

Vision Care Specialist	In-Network Cost	Out-of -Network Reimbursement
Laser Vision Correction		
LASIK or PRK from U.S. Laser Network	15% off the retail price or 5% off the promotional price	N/A
Additional Pairs	Members also receive a 40% discount off complete pair eyeglass purchase and 15% off conventional contact lenses once the funded benefit has been used.	N/A
Frequency		
Examination	Once every 12 months	
Lenses or Contact Lenses	Once every 12 months	
Frame	Once every 24 months	

Vision Rates

Level of Coverage	Employee Semi-Monthly Cost
Employee	\$3.59
EE + 1	\$7.17
Family	\$10.28



Flexible Spending Accounts (FSA's)

Administered by WageWorks (ADP)

Effective Date: January 1, 2019

Administrative costs are 100% employer-paid

You can save money on your healthcare and/or dependent day care expenses with an FSA.

Pretax Premiums— Insurance premiums for health, dental, vision, critical illness and accident coverage are paid with pretax dollars through the Flexible Benefit Plan, which reduces taxable compensation for employees. These tax savings can help offset the impact of insurance premium costs.

Medical Expense Reimbursement Account— Allows an employee to set aside up to \$2,650 per plan year for qualified medical, dental and vision expenses. If you are participating in the HSA, the only allowable claims are for dental and vision.

Dependent Care Expense Reimbursement Account— This account allows an employee to set aside up to \$5,000 per IRS guidelines for dependent care expenses.

Funds that are not used by the end of the plan year are forfeited.

Here's How an FSA Works

- You decide the annual amount you want to contribute to either or both FSA's based on your expected healthcare and/or dependent childcare/elder care expenses.
- Your contributions are deducted from each paycheck before income and Social Security taxes, and deposited into your FSA.
- You can pay with the Healthcare FSA debit card for eligible healthcare expenses. For dependent care, you pay for eligible expenses when incurred, and then submit a reimbursement claim form or file the claim online.
- You are reimbursed from your FSA. So, you actually pay your expenses with tax-free dollars.

*Remember, the Flexible Spending Account accumulates on a calendar year basis. The elections you make will be for 2019.

Employee Assistance Program (EAP)

Administered by Lincoln Financial Group

The employee assistance program can help you and your household members with a wide variety of issues including marriage and relationship concerns, mental health and stress issues, family problems, legal referrals, elder care, financial matters, substance abuse, will preparation, grief and work-related issues. The program holds all information in the strictest confidence.

Member Services include the following:

Professional, confidential assistance to help resolve any personal problem that may interfere with a member's health, emotional well-being or job performance

- 24/7 access to master's degree-prepared counselors
- Unlimited assessment and professional consultation by phone; no appointment necessary
- Referral to appropriate resources
- Assistance with childcare and elder care resource and referral needs
- Services available to all eligible employees and members of their immediate household

Plan Cost

100% Employer-Paid

Life and Accidental Death & Dismemberment (AD&D) Insurance

Administered by Lincoln Financial Group

Effective Date: January 1, 2019

100% Paid by Apple Tree Dental

Life and accidental death and dismemberment (AD&D) insurance can provide financial protection for named beneficiaries in the event the insured individual dies prematurely, or if you or your beneficiaries lose a limb or die in an accident. It includes support services to help beneficiaries cope with the emotional and financial planning issues. This plan also provides coverage in the event of a dismembering accident.

Here are a few details of the plan available to you:

- Benefits equal 1 times annual salary to \$100,000
- Death benefits are doubled if death is the result of an Accident
- Benefits reduce to 65% at age 65; 50% at age 70
- Portability — you can take the coverage with you at group rates
- Premiums are waived if you are totally disabled (subject to the elimination period)



Disability Insurance

Administered by Lincoln Financial Group

100% Paid by Apple Tree Dental

Monthly expenses add up quickly. Ask yourself how you would cover these expenses if you are unable to work and earn a paycheck. The Lincoln Financial Group's Disability Income Protection insurance can help you meet expenses by replacing a portion of your monthly income if you become disabled.

Short-Term Disability Highlights

- 60% of your weekly earnings to a maximum of \$500
- 0-day injury/7-day wait before benefits begin
- 13-week benefit duration
- Total Disability not required to be eligible for benefits
- Maternity benefits covered at 6 weeks less the elimination period

Long-Term Disability Highlights*

- 60% of your monthly earnings to a maximum of \$5,000
- 90-Day waiting period before benefits begin (no gap in coverage between Short-Term and Long-Term Disability)
- Benefits last for 2 years
- Total Disability not required to be eligible for benefits
- Definition of Disability: 2-year own occupation/gainful occupation thereafter
- If you have a loss of 2 of 6 activities of daily living, benefits pay an additional 20% to a maximum of \$5,000

*Dentists, please see HR for more Long-Term Disability information.

** THIS IS NOT A CONTRACT — PLEASE REFER TO YOUR MASTER POLICY FOR CONTRACTUAL DEFINITIONS **

Voluntary Life and AD&D Insurance

Administered by Lincoln Financial Group

Effective Date: January 1, 2019

Life and accidental death and dismemberment (AD&D) insurance can provide financial protection for named beneficiaries in the event the insured individual dies prematurely. It includes support services to help beneficiaries cope with the emotional and financial planning issues. This plan also provides coverage in the event of a dismembering accident.

- **Benefit Amount:** Employee - Up to 5x salary to a maximum of \$500,000/Spouse - Up to 100% of Employee amount with a max of \$250,000/Child - \$10,000 maximum.
- If you purchased coverage during your initial enrollment, you are eligible for the following Guarantee Issue Amounts — no health questions asked up to:
 - **Guarantee issue:** Employee - \$120,000/Spouse - \$30,000/Children - \$10,000
 - Fully Portable — You can take the coverage with you if you leave employment
 - If you purchase the minimum coverage at the initial enrollment, you have the ability to buy-up up to the Guarantee Issue Amount at each anniversary with no health questions asked.
 - If you waive coverage at the initial enrollment, any amounts purchased in the future will be subject to evidence of insurability.

Age	Monthly Employee Rates per \$1,000	Monthly Spouse Rates per \$1,000	Monthly Child Rate per \$10,000
00-34	0.057	0.037	\$1.460
35-39	0.086	0.066	Employee AD&D Rate per \$1,000
40-44	0.143	0.123	
45-49	0.200	0.180	\$0.020
50-54	0.372	0.352	Spouse AD&D Rate per \$1,000
55-59	0.744	0.724	
60-64	1.144	1.124	\$0.020
65-69	2.032	2.012	Child AD&D Rate per \$10,000
70-99	3.662	3.642	
			\$0.360

To calculate the monthly premium for your Voluntary Life coverage, use the above rates and the formula given below:

Enter amount of Voluntary Life coverage desired	1. _____
Divide Line 1 by 1,000	2. _____
Select your rate from the rate table above	3. _____
Multiply Line 2 by Line 3 for your estimated monthly premium	4. _____



Retirement Plan

Administered by ADP

Plan Year: January 1 through December 31

401(k) Retirement Plan

The future offers the potential for a longer life and the need for more income in retirement. You may need 70%-90% of your current annual income to replace your salary and live comfortably once you stop working or change your lifestyle in retirement. We all want the financial security to afford to spend retirement as we choose. And while Social Security may help, it probably won't be enough. It's up to you to make up the difference — and your plan can help.

Apple Tree Dental 401(k) Plan can help you reach your future financial goals, and it's easy to get started. The sooner you enroll, the sooner you can take advantage of these great benefits:

- Tax-advantaged saving through pretax contributions and the Roth 401(k) option
- Employer contributions
- Convenient, automatic payroll deductions
- Investments that make saving easy
- Plan features that simplify planning
- An account you can take with you

Your Contributions

How much you save will have a big impact on how much money you will have when you retire. You can contribute from 1% to 80% of your pretax salary to the plan each year. Your plan also allows you to contribute on an after tax basis through Roth 401(k) contributions.

The IRS limit on your total annual contributions is \$18,000 (2019). Those age fifty or over can save an additional \$6,000 with catch-up contributions (2019).

Try to save as much as you can to meet your retirement goals and take full advantage of the employer match and tax savings your plan offers.

Your Employer Helps

When you participate in the plan, your employer will match 50% up to the first 4% of your eligible compensation. You decide how to invest this contribution.

Pretax Savings (It costs less than you think to save for your retirement)			
Annual Salary \$30,000/Tax Bracket 15%			
Pretax Contribution Rate	2%	4%	6%
Weekly Plan Contribution	\$11.54	\$23.08	\$34.62
Weekly Tax Savings	\$1.73	\$3.46	\$5.19
Weekly Out-of-Pocket Amount	\$9.81	\$19.62	\$29.43
Annual Contribution	\$600	\$1,200	\$1,800
Account Balance After 30 Years	\$75,015	\$150,030	\$225,044

This chart is for illustrative purposes only. This example assumes contributions made at the beginning of the month and an 8% annual effective rate of return compounded monthly. Results are not meant to represent past or future performance of any specific investment vehicle. Investment return and principal value will fluctuate and when redeemed, the investment may be worth more or less than its original cost. Taxes are due upon withdrawal. Withdrawals taken prior to age 59½ may be subject to a 10% tax penalty.

See your Plan Information for details.

Paid Time Off (PTO) and Holidays

Administered by Apple Tree Dental

Plan Year

January 1, 2019 through December 31, 2019

Paid Time Off (PTO)

During your employment, you will accrue paid time off as follows for use in accordance with Apple Tree policy and practice:

Length of Service	PTO Accrued	Maximum Balance
At hire	.0385 hours/hour worked/pay period	80 hours
Over 1 but less than 5 years	.0577 hours/hour worked/pay period	120 hours
Over 5 years	.0769 hours/hour worked/pay period	160 hours

Holidays

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

Please see employee handbook for more information.



A Whole New Experience

APPLE TREE DENTAL

appletreedental.org



Contact Information

If you have specific questions about a benefit plan, please contact the administrator listed below, or your local human resources department.

Benefit	Administrator	Phone	Website
Medical	Blue Cross Blue Shield of Minnesota	1.866.870.0348	www.bluecrossmnonline.com
Health Savings Account (HSA)	Bremer Bank	1.800.992.2651	www.bremer.com
Dental	HealthPartners	1.800.883.2177	www.healthpartners.com
Vision	EyeMed	1.866.939.3633	www.eyemedvisioncare.com
Flexible Spending Account (FSA)	WageWorks (ADP)	1.866.871.0773	www.myspendingaccount.wageworks.com
Employee Assistance Program (EAP)	Lincoln Financial Group	1.877.275.5462	www.lfg.com
Disability Insurance	Lincoln Financial Group	1.877.275.5462	www.lfg.com
Voluntary Life AD&D	Lincoln Financial Group	1.877.275.5462	www.lfg.com
HR Director — Chad Engstrom	Apple Tree Dental	763.600.6830	cengstrom@applereedental.org
HR Assistant — Connie Knutson	Apple Tree Dental	763.600.6832	cknutson@applereedental.org

Apple Tree Dental Benefits Center

The Apple Tree Dental Benefits Center is our new employee communication portal that provides employees and their family members with 24/7 access to comprehensive benefit information.

Here's What You Can Find

- Benefit Plan Summaries and Details
- Benefit Plan Forms, Documents, and Carrier Resources & Links
- The BRANCH Newsletters
- Employment Policy Handbook
- Wellness Information, Including Links to HealthPartners and EyeMed
- Live Well Work Well Monthly Newsletters and Tip Sheets
- Enrollment Information and Links
- Specific Documents and Disclosures
- Life Event Checklists
- Health Care Reform Information
- Benefit/Financial Calculators
- Information on State and Federal Programs
- Benefits Glossary From A-Z
- And much more

You can access Apple Tree Dental Benefits Center anytime by going to:

www.applereedental.benefithub.com

Notes





APPLE TREE DENTAL

This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.

This benefit summary prepared by



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