DAKOTA 911 POLICE FIRE EMS 2024 BENEFIS

Dakota 911 is proud to offer a comprehensive benefits package to eligible employees, as briefly summarized in this booklet.

Employees share the costs of some benefits, and Dakota 911 provides other benefits at no cost. In addition, there are voluntary benefits (short-term disability, supplemental life and vision) with reasonable group rates that can be elected, and paid for through Dakota 911 payroll deductions.

More detailed information about each program, and annual notices are available at www.dakota911.benefithub.com.



This guide is an attempt to provide employees with a total benefit overview. It provides information needed to make important decisions about benefit elections for you and your family. Dakota 911 encourages you to review the information carefully.

If any information in this guide differs from the provider plan documents, the provider plan information overrules.

STOP HERE!



In order to ensure a positive open enrollment experience, please read the following information before continuing with enrollment.

Benefits Enrollment

- 1. When you open the enrollment form and a warning appears at the top of your screen, accept or "enable". This will ensure formulas throughout the document work correctly.
- 2. If you are waiving coverage, or if you don't want to contribute dollars, you must select "waive" or enter \$0.
- 3. Complete the form <u>section-by-section</u>. Information throughout the form populates based on information entered in previous sections.
- 4. Tabbing through the document will move you to all the fields that may need your attention (white fields). However, you may also need to hover over or click on the field to see notes or select from a drop down.
- 5. This form is NOT mobile/tablet-friendly.
- 6. It is your responsibility to ensure beneficiary designations are updated as part of your annual open enrollment process for all basic and voluntary life insurance. Choosing not to provide this information <u>could</u> impede claim processing.
- 7. Hard copy of your benefits enrollment form must be:
 - a. printed,
 - b. signed (signature must be original),
 - c. returned to Admin by 5pm on Friday, November 10th, 2023.

OTHER 2024 REMINDERS:

- 1. When making a direct deposit change, the new direction <u>completely</u> replaces previous direction.
- 2. Signatures on any/all payroll forms must be original or e-signatures.

NOTICES



Plan Summaries and Annual Notices

Dakota 911 is required to provide employees with a series of summaries, notices and disclosures annually. Summaries of Benefits and Coverage (SBC) are distributed to employees electronically unless requested otherwise. SBCs are also available to staff at www.dakota911.benefithub.com.

Annual Notices will be provided to employees no later than December 31st, 2023, with the exception of the Creditable Coverage notice, which is required to be provided to staff no later than October 15th annually. The Creditable Coverage notice was provided to all staff on October 10th, 2023.

MEDICAL & DENTAL SUMMARIES OF BENEFITS & COVERAGE

- \$2,500/\$5,000 HRA Open Access SBC
- \$3,200/\$6,400 HSA Open Access SBC
- \$3,200/\$6,400 HSA Rx Plus Open Access SBC
- \$4,000/\$8,000 HRA Open Access SBC

- \$4,000/\$8,000 HSA Open Access SBC
- \$4,000/\$8,000 HSA Rx Plus Open Access SBC
- Dental Distinctions II SOB

NOTICES & DISCLOSURES

- Medicare Creditable Coverage
- Medicaid and the Children's Health Insurance Program (CHIPRA)
- Women's Health and Cancer Rights Act Notice
- HIPAA Special Enrollment Rights
- HIPAA Privacy Practices

- COBRA General Notice
- Notification of Possible Federal Public Service Loan Forgiveness Eligibility (PSLF)
- Marketplace Coverage Notice
- FMLA Leave Act
- Minnesota Parental Leave Act (MNPLA)



2024 CHANGES



Following is a summary of material modifications (SMM) to employee Medical plans. Also provided is a recap of some other changes you will see in 2024 benefits offerings.

MEDICAL PLANS

- Dakota 911 premium contribution changes.
- Dakota 911 will no longer be offering the Select Network.
- The \$3,000/\$6,000 HSA Deductible is increasing to \$3,200/\$6,400 to satisfy IRS "embedded deductible" requirements.
- Dakota 911 annual HSA contribution increases.
- Coverage for additional diagnostic and testing services in-network after a screening mammogram, as ordered by a provider are covered at 100% post-deductible.
- Coverage for diagnosis, monitoring and treatment of certain rare diseases outside the network follows the in-network benefit that corresponds to the service that is provided.
- Contraceptive supplies are limited to a 12-month supply per fill.
- Weight loss drugs will no longer be covered.

DENTAL PLANS

Dakota 911 premium contribution changes.

DISABILITY PLANS

- Short-term Disability weekly maximum benefit is increasing to \$1,000.
- Long-term Disability monthly maximum benefit is increasing to \$8,000. Anything over the previous \$5,700 benefit is subject to 3/12 pre-existing conditions.

SPENDING ACCOUNTS

- The HSA contribution limit will increase to \$4,150 for single enrollment and \$8,300 for plus and family enrollments.
- The IRS has not set the 2024 Medical FSA annual contribution limit as of this guide.



OFFERINGS & ELIGIBILITY

Benefits Offered

Medical

Dental

- Vision
- Disability
 - Short-term
 - Long-term
- Life
 - Basic
 - Voluntary
- PERA
- Deferred Compensation
- Roth IRA

New Hire Eligibility

New hires and their dependents are eligible for Dakota 911 benefits on the 1st day of the month immediately following their start date. If starting on the first of the month, the employee is benefits-eligible the first of the following month.

Eligible dependents are the employee's spouse, children under age 26, or disabled dependents of any age. Enrollment must be done within 30 days of hire date and elections remain in effect the entire calendar year.

Current Employee Eligibility

Current employees are eligible to make enrollment changes, effective 1/1 of the coming year, during annual open enrollment. Current employees and their dependents experiencing a qualified change in status, as defined by IRS regulation <u>may</u> be eligible for mid-year benefit changes. It is the employee's responsibility to notify Dakota 911 HR of any qualified change in status. The employee has 30 days from the date of the event to make allowable enrollment changes. Allowable changes are determined by the type of event and are typically limited to adding newly eligible dependents to the current plan.

Employees with dependents who are <u>losing</u> coverage eligibility under the plan for any reason including marriage, loss of student status, loss of dependency status or attainment of a specific age, must notify Human Resources within 60 days after the event in order for that participant to retain COBRA rights.



Insured by HealthPartners—Group #25267

Dakota 911 offers four different High Deductible Health Plans (HDHPs). Two of the plans are HRA-funded and the other two plans are HSA-funded and have a "buy-up" feature for certain preventative medications. All plans have "deductibles" that must be covered by the employee at 100%.

<u>Embedded deductible</u>: A system that combines individual and family deductibles in a family health insurance policy preventing any single family member from having to meet the full family deductible before benefits.

<u>Co-Insurance</u>: The share of costs the carrier will pay after the employee has met their deductible.

<u>Network</u>: A group of providers who contract with a health plan to provide services to its members at negotiated rates.

All Dakota 911 plans are on the Open Access network. HealthPartners' most robust network, Open Access includes Mayo Clinics and Hazelden. Complete HealthPartners Open Access network provider listing: www.healthpartners.com/openaccess

2024 Monthly Medical Employee Premiums							
Dian	НДНР	- HRA	HDHP - HSA				
Plan	\$2,500/\$5,000 \$4,000/\$8,000		\$3,200/\$6,400	\$4,000/\$8,000			
Employee Only	\$ 64.75	\$ 44.30	\$ 44.62	\$ 25.60			
Employee + Spouse	\$500.74	\$340.01	\$374.90	\$233.15			
Employee + Children	\$430.50	\$277.62	\$303.53	\$170.80			
Family	\$664.87	\$586.12	\$580.25	\$444.10			

Control how much you spend by engaging the most cost-efficient healthcare services. Log into your Health-Partners account and click on "my plan" for cost tools. Here are some service level options:

FREE	Nurse Line	Help considering home treatment or a doctor visit.
FREE	www.Virtuwell.com	Online with board-certified nurse practitioner.
\$	Retail/Minute Clinic	Walk-in clinic offering first-come/first –served diagnosis and treatment of minor illnesses.
\$-\$\$\$	www.doctorondemand.com	Online with doctor, psychiatrist or licensed psychologist.
\$-\$\$\$	www.teladoc.com	Online with doctor.
\$\$-\$\$\$	Primary Doctor	Best place for injuries, routine health exams & anything that may require testing or follow-up.
\$\$\$\$	Emergency Room	Emergency treatment.



HEALTHPARTNERS PLAN COMPARISON								
PLAN NAME \$2,500 HRA \$4,000 HRA \$3,200 HSA \$4,000 HSA								
IN-NETWORK BENEFITS	OPEN ACCESS	OPEN ACCESS	OPEN ACCESS	OPEN ACCESS				
Deductible Type		Embed	lded					
Calendar Year (CY) Deductible (Ind/Family)	\$2,500/\$5,000	\$4,000/\$8,000	\$3,200/\$6,400	\$4,000/\$8,000				
Out-of-Pocket Max Type		Embed	dded					
CY Out-of-Pocket Max Type (Ind/Family)	\$2,500/\$5,000	\$4,000/\$8,000	\$3,200/\$6,400	\$4,000/\$8,000				
Co-insurance (you pay after deductible)		0%	, ,					
Preventive Care		Covered	100%					
Primary Care Visit Office Visit		0% after de	eductible					
Convenience Care	Covere	d 100%	0% after o	deductible				
Specialist Visit		0% after de	eductible					
Telehealth		Covered	100%					
Urgent Care		0% after de	eductible					
Emergency Room	0% after deductible							
Inpatient Hospital	0% after deductible							
Outpatient Surgery	0% after deductible							
Chiropractic (visit limitations)	0% after deductible							
Phys/Occ/Speech Therapy (visit limitations)	0% after deductible							
Diagnostic Test (X-ray, blood work)		0% after de	eductible					
Imaging (CT/PET scan, MRI)		0% after de	eductible					
Prescription Drug Benefit								
Deductible (Ind/Family)	N	/A	Combine	d w/Med				
Preventive Drug		ACA prevent	tive: 100%					
Retail		31 Da	ays					
Tier I/Tier II/Tier III	20% (Min: \$2	L0; Max: \$25)	0% after o	deductible				
Specialty	\$20 to n	nax \$200	0% after o	deductible				
Mail Order	90 Days							
Tier I/Tier II/Tier III	20% (Min: \$10; Max: \$25) 0% after deductible							
OUT-OF-NETWORK BENEFITS	OPEN ACCESS OPEN ACCESS OPEN ACCESS OPEN ACCESS			OPEN ACCESS				
Deductible Type		Embed	dded					
	· · · · · · · · · · · · · · · · · · ·	¢6 000 /¢43 000	\$6,400/\$12,800	\$8,000/\$16,000				
CY Deductible (Ind/Family)	\$4,000/\$8,000	\$6,000/\$12,000	30,400/312,800	70,000/ 710,000				
CY Deductible (Ind/Family) Out-of-Pocket Max Type	\$4,000/\$8,000	\$6,000/\$12,000 Embed		70,000/710,000				
, , ,	\$4,000/\$8,000 \$7,000/\$14,000			\$16,000/\$24,000				

This is only a summary. Read your Certificate of Coverage for more information. Services that aren't covered include those that are cosmetic, investigative, not medically necessary or covered by workers' compensation or non-fault insurance. For more information, visit www.healthpartners.com or call Member Services at 952/883-5000 and 800/883-2177.



HSA Rx Plus Buy-Up

HSA participants may choose to "buy-up" their **HSA** plan. The HSA Rx Plus plan offers added coverage of <u>some</u> preventative medication for <u>some</u> chronic conditions. Chronic conditions that <u>may</u> benefit from the Rx Plus plan include:

Alcohol Dependency	Behavioral Health	Cancer	Diabetes	Smoking Cessation
Asthma & COPD	Blood Pressure	Cholesterol	Heart Health	Weight Loss

Refer to the approved HealthPartners PreferredRx list of medications to ensure prescribed medication is covered before selecting the Rx Plus buy-up plan. Please note that the list is reviewed by clinical experts and updated every three months. Eligible prescriptions may benefit from the following co-pays outside of elected plan deductibles:

2024 HSA Rx Plus Buy-Up							
	OPEN ACCESS NETWORK						
Retail: 31-day supply	Copayment for 31-day supply of s	select preventive medications.					
	Generic: \$12.00	Brand: \$45.00					
Tier I/Tier II/Tier III	Otherwise: 100% after deductible						
Mail Order: 90-day supply	Copayment for 90-day supply of select preventive medications.						
,,	Generic: \$24.00	Brand: \$90.00					
Tier I/Tier II/Tier III	Otherwise: 100% after deductible						
Specialty	100% after deductible						

Drug List: www.healthpartners.com/referredrx

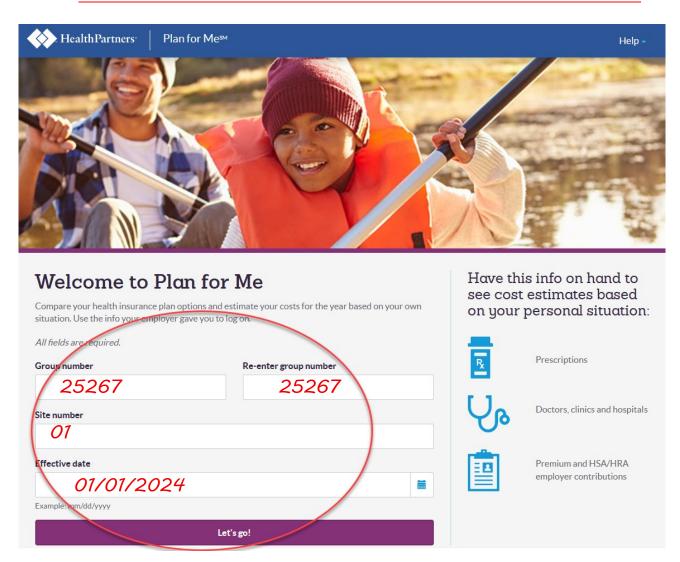
2024 HSA Rx Plus Monthly Medical Premiums							
Network		OPEN ACCES	SS NETWORK				
Dia	\$3,200	/\$6,400	\$4,000/\$,8000				
Plan	Buy-Up	Premium	Buy-Up	Premium			
Employee Only	\$22.50	\$67.12	\$23.50	\$49.10			
Employee + Spouse	\$48.00	\$422.90	\$48.50	\$281.65			
Employee + Children	\$45.50	\$349.03	\$46.00	\$216.80			
Family	\$59.00	\$639.25	\$60.00	\$504.10			



HEALTHPARTNERS PLAN FOR ME

To assist in making the best medical plan selection, HealthPartners offers a program called "Plan for Me". This plan helps compare options and estimate costs for the year based on employee-specific needs.

GO TO WWW.HEALTHPARTNERS.COM/PUBLIC/PLANFORME/



Refer to the HealthPartners booklet for information on Plan for Me and much more:

- Open Access Network
- HSA Rx Plus
- Preventive Care
- Virtuwell/Doctor on Demand
- Prescription eligibility, assistance & delivery
- Nurse, Pharmacy and Behavioral Health Navigators
- Cancer & Healthy Baby Support
- EAP (HPEAP.com, password DCC)

- Healthy Discounts
- Travel Support
- HP Mobile
- Wellbeats



HRA/HSA/FSA

Administered by WEX Benefits — Group #46544

Dakota 911 offers three types of healthcare spending accounts, a Health Reimbursement Account (HRA) funded by a VEBA, a Health Savings Account (HSA) and a Flexible Spending Account (FSA). Each account type has tax advantages and can be used for eligible expenses, but each has very specific guidelines that are subject to employer policy and IRS regulations. While the HRA and HSA accounts are portable, FSA accounts must be spent down by the end of the year or employment separation, whichever comes first. The following few pages provide specific details on each of the three spending accounts offered to Dakota 911 employees.

<u>Portable Account</u>: An account that is employee-owned and that is not subject to forfeiture regardless of plan participation or employment changes.

<u>Tax Dependent</u>: The IRS defines a tax dependent as a qualifying child (under age 19 or under 24 if a full-time student, or any age if permanently and totally disabled) or a qualifying relative. A qualifying dependent can have income but cannot provide more than half of their own annual support.

	HRA (funded by a VEBA)	HSA	FSA
ACCOUNT OWNERSHIP	Employee	Employee	Employer
WHO CONTRIBUTES?	Employer	Employer & Employee	Employee
TAX-DEDUCTIBLE CONTRIBUTIONS	Yes	Yes	Yes
TAX-FREE DISTRIBUTIONS	Yes, eligible expenses	Yes, eligible expenses	Yes, eligible expenses
INVESTMENT OPTIONS?	Yes	Yes	No
TAX-FREE EARNINGS	Yes	Yes	No
CONTRIBUTION ADJUSTMENTS	Open Enrollment	Anytime	Open Enrollment
PORTABLE	Yes	Yes	No

Dakota 911 contributes funds to employee HRA and HSA accounts annually. These contributions are split into two semi-annual deposits, in January and July. The optional FSA is fully-funded by the employee.

2024 Annual Employer HRA/HSA Contributions						
Plan	\$2,500 HDHP.HRA	\$4,000 HDHP.HRA	\$3,200 HDHP.HSA	\$4,000 HDHP.HSA		
Employee	\$1,750.00	\$2,000.00	\$2,000.00	\$2,250.00		
Employee + Spouse	\$2,000.00	\$2,250.00	\$2,500.00	\$2,750.00		
Employee + Children	\$2,000.00	\$2,250.00	\$2,500.00	\$2,750.00		
Family	\$2,000.00	\$2,250.00	\$2,500.00	\$2,750.00		

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HRA (FUNDED BY A VEBA)

What is an HRA?

HRA stands for Health Reimbursement Arrangement. A typical HRA is an employer-owned/funded account from which employees can claim reimbursement for qualified medical expenses. Contributions to the HRA are tax-deductible and earnings and distributions for eligible expenses are tax-free.

What makes the Dakota 911 HRA different?

The Dakota 911 HRA is paired with a VEBA (Voluntary Employee Beneficiary Association), making the HRA employee-owned and portable. Under the VEBA employees have immediate access to contributions. Employees also have the ability to designate beneficiaries, and invest funds.

What are eligible expenses?

Eligible expenses are regulated by the IRS and include certain medical, dental and vision costs along with other items as listed in section 213(d) of the Internal Revenue Code. Funds may also be saved for use post-Dakota 911 employment and in retirement.

HRA Eligibility

HRA account holders must be covered by a qualified High Deductible Health Plan. They can also be covered by another non-HDHP plan. VEBA funds can be used toward dependent expenses regardless of tax dependency.

How is an HRA Funded?

- Employer annual contributions are determined by plan design and plan enrollment, not familial status
- Employer annual contributions are split into two semi-annual deposits made in January and July
- Employer annual contributions to employee HRA accounts opened after January 1st are pro-rated

2024 HRA Plan Employer Contributions:

2024 Annual Employer HRA/HSA Contributions					
Plan	\$2,500 HDHP.HRA	\$4,000 HDHP.HRA			
Employee	\$1,750.00	\$2,000.00			
Employee + Spouse	\$2,000.00	\$2,250.00			
Employee + Children	\$2,000.00	\$2,250.00			
Family	\$2,000.00	\$2,250.00			



HSA

What in an HSA?

HSA stands for Health Savings (or Spending) Account. An HSA is an employee-owned account to which Dakota 911 contributes funds for use toward eligible expenses. Employees also have the option of making payroll-deducted contributions to their HSA. Contributions to the HSA are tax-deductible and earnings and distributions for eligible expenses are tax-free.

What are eligible expenses?

Eligible expenses are regulated by the IRS and include certain medical, dental and vision costs along with other items as listed in section 213(d) of the Internal Revenue Code. Funds may also be saved for use post-Dakota 911 employment and in retirement.

HSA Eligibility

HSA account holders must be covered by a High Deductible Health Plan (HDHP) and cannot be covered by another health insurance plan unless that plan is also a qualified high deductible health plan. You may be ineligible to participate in an HSA if you are claimed as a dependent on another's tax return, you are enrolled in Medicare, or you are covered under another traditional medical insurance plan, full HRA (not limited to dental and vision), full FSA or TRICARE.

How is an HSA Funded?

- Employer and voluntary employee annual contributions are set by plan design and plan enrollment
- Adult children may qualify for coverage under an employee's medical plan to age 26, but must be tax dependents for the employee to use HSA funds towards the child's eligible expenses
- Employer annual contributions are split into two semi-annual deposits made in January and July
- Employer annual contributions to employee HSA accounts opened after January 1st are pro-rated
- HSA funding, and use of those funds is regulated by the IRS

2024 HSA Contribution limits include both employee and employer contributions:

Single: \$4,150	Family: \$8,3	00	Catch-up for 55 and Older: \$1,000		
Plan	IRS Max		Dakota 911 Contribution		Employee Max Election
\$3,200 HSA Single	\$4,150	-	\$2,000	=	\$2,150
\$6,400 HSA + & Family	\$8,300	-	\$2,500	=	\$5,800
4,000 HSA Single	\$4,150	-	\$2,250	=	\$1,900
8,000 HSA + & Family	\$8,300	-	\$2,750	II	\$5,550



HSA CONTRIBUTION ELIGIBILITY & LIMITS MATRIX

HSA CONTRIBUTION ELIGIBILITY & LIMITS MATRIX					
	SPOUSE #1	SPOUSE #1	SPOUSE #1	SPOUSE #1	SPOUSE #1
	No coverage of	Self-only non-	Self-only HDHP	Non-individual non-HDHP	Non-individual
	any kind	HDHP coverage	coverage	Coverage	HDHP Coverage
Spouse #2 No coverage of any kind	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Max HSA contribution is \$4,150. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Max HSA contribution is \$8,300. Spouse #2: Not eligible to contribute to an HSA.
Spouse #2 Self-only non-HDHP cov- erage	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Max HSA contribution is \$4,150. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Max HSA contribution is \$8,300. Spouse #2: Not eligible to contribute to an HSA.
Spouse #2 Self-only HDHP coverage	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Max HSA contribution is \$4,150.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Max HSA contribution is \$4,150.	Spouse #1: Max HSA contribution is \$4,150. Spouse #2: Max HSA contribution is \$4,150.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA unless they are not covered by their spouse's non-HDHP coverage, in which case their max HSA contribution is \$4,150.	Spouse #1 & Spouse #2: Max HSA contribution to be divided between them ins \$8,300.
SPOUSE #2 Non-individual non-HDHP cov- erage	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Not eligible to contribute to an HSA unless they are not covered by their spouse's non-HDHP coverage, in which case their max HSA contribution is \$4,150. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Not eligible to contribute to an HSA.	Spouse #1: Eligible to contribute max HSA contribution of \$8,300 provided they are not covered by spouse's non-HDHP. Spouse #2: Not eligible to contribute to an HSA.
SPOUSE #2 Non-individual HDHP coverage	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Max HSA contribution is \$8,300.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Max HSA contribu- tion is \$8,300.	Spouse #1 & Spouse #2: Max HSA contribution to be divided between them ins \$8,300.	Spouse #1: Not eligible to contribute to an HSA. Spouse #2: Eligible to contribute max HSA contribution of \$8,300 provided they are not covered by spouse's non-HDHP.	Spouse #1 & Spouse #2: Max HSA contribution to be divided between them ins \$8,300.







What in an FSA?

FSA stands for Flexible Spending Account. An FSA is a non-portable employer-owned account.

What are eligible expenses?

Eligible expenses are regulated by the IRS and include certain medical, dental and vision costs along with other items as listed in section 213(d) of the Internal Revenue Code. Funds in this account must be <u>spent</u> prior to separation from employment or the end of the calendar year, whichever comes first, or they are forfeited.

FSA Eligibility

<u>Medical FSA</u>: Can be elected and used by all family members not covered elsewhere by an HSA for any 213(d) eligible expenses.

<u>Dependent Care FSA:</u> Can be elected and used by both VEBA and HSA participants for daycare expenses of a qualifying dependent.

Combination FSA: Can be elected and used by HSA participants for qualified dental and vision expenses only.

How is an FSA Funded?

- FSAs are funded in January by the employer and immediately available for use by the employee
- Employees pay back the front-loaded funds through payroll deductions over the course of the year
- FSA funding, and use of those funds is regulated by the IRS

2024 FSA Contribution limits:

2024 FSA Limits					
Plan IRS Max					
Medical FSA	\$3,200				
Dependent Care FSA	\$5,000				
Combination FSA	\$3,200				

Run-out Period

Employees have 90 days after the close of the plan (calendar) year or separation from employment, whichever comes first, to submit claims for reimbursement of eligible expenses incurred during that plan (calendar) year.

DENTAL

Insured by HealthPartners—Group #25267



HealthPartners Distinctions II Benefit Level 1 features HealthPartners Dental and Park Dental. Benefit Level 2 offers coverage via the HealthPartners Open Access network of more than 2,900 PPO dentists in Minnesota and bordering communities.

Plan	Distinctions II			
Network	Benefit Level 1	Benefit Level 2	Out of Network	
Calendar Year (CY) Deductible (Ind/Family)	\$0/\$0	\$25/\$75	\$50/\$150	
CY Annual Maximum	\$3,000	\$2,500	\$1,500	
Coinsurance				
Preventive & Diagnostic Services	100%	100%	100%	
Cleaning Frequency	2 times per year	2 times per year	2 times per year	
Deductible Waived	Yes	Yes	Yes	
Fillings, & Simple Extractions	100%	80%	80%	
Periodontics	80%	80%	50%	
Endodontics	80%	80%	50%	
Implants/Prosthetics	50%	50%	50%	
Orthodontics	Not Covered	Not Covered	Not Covered	
Benefit limitations may apply. Call member services with any questions: 800/883-2177.				

Little Partners—Members 12 and under are covered 100% at in-network dentist, with no deductibles, no coinsurance and no annual maximum.

MouthWise Matters—Members living with diabetes or who are pregnant receive 100% in-network coverage with no annual limits on medically necessary services including exams, cleanings, scaling and root planning upon referral by HealthPartners network dentist.

For a complete listing of In-Network providers, go to: www.healthpartners.com/care/find/doctors/dentists/.

Install the HealthPartners app for one-touch access to provider listings, your ID cards and plan information.



2024 Monthly Dental Employee Premiums		
Plan	HealthPartners Distinctions II	
Pian	Employee	
Employee Only	\$0.00	
Employee + 1	\$41.20	
Family	\$50.92	

VISION-MATERIALS ONLY

Insured by EyeMed—Group #1017422 Under Mutual of Omaha—Group #G000ATL3

Vision Insurance (Materials Only)—Policy #GLLV-ATL3—employee pays 100% of cost

Because eye exams are covered under the medical plan, Dakota 911 offers a materials-only vision plan. Participation in this plan may help to cover the costs of lenses, frames, contacts and laser vision correction. Spouse and Dependents to age 26 are eligible for this plan only if the employee also elects coverage.

BENEFITS				
MATERIALS	IN NETWORK	OUT OF NETWORK		
BENEFIT FREQUENCY				
Lenses <u>or</u> Contacts; Frame	Once every 12 months	Once every 12 months		
FRAMES				
Allowance	Up to \$130 + 20% off	Reimburse up to \$58		
STANDARD PLASTIC LENSES				
Single Vision	\$25 Copay	Reimburse up to \$20		
Bifocal	\$25 Copay	Reimburse up to \$36		
Trifocal or Lenticular	\$25 Copay	Reimburse up to \$64		
Standard Progressive	\$65 Copay	Reimburse up to \$36		
CONTACT LENSES (only one option available)	able per Benefit Frequency)			
Allowance—Conventional	Up to \$130 + 15% off	Reimburse up to \$89		
Allowance—Disposable	Up to \$130	Reimburse up to \$104		
Medically Necessary	\$0 Copay	Reimburse up to \$210		
Separate Fitting Allowance	Standard—Up to \$40 Premium—10% off	NA		

For a complete listing of In-Network providers, go to: www.mutualofomaha.com/vision and scroll to *locate a provider*.

Install the eyeMed app for one-touch access to provider listings, your ID cards and plan information.



2024 Monthly Vision Rates			
Employee \$5.57			
Employee + One \$9.74			
Family \$14.46			

LIFE INSURANCE



Insured by Mutual of Omaha—Group #G000ATL3

Basic Life Insurance—Policy #GLUG-ATL3—no cost to employee

Basic group term life coverage begins automatically once employees meet the eligibility requirements and satisfy any waiting period applicable to the policy. It includes AD&D which would pay an additional benefit, up to the amount of the life benefit, if the employee suffers a covered loss due to an accident injury. Basic life insurance is calculated based on the employee's wage as of 1/1 of the plan year. Dakota 911 provides basic life insurance of 1x the employee's annual salary up to \$50,000 at no cost to the employee.

Voluntary Term Life Insurance - Policy #GVTL-ATL3—employee pays 100% of the cost

Employees may purchase optional life and AD&D insurance. Electing coverage also allows employees to purchase life insurance for their dependents. Optional life insurance premiums for employees and their spouses are determined by the employee's age as of 1/1 of the plan year. Coverage amounts are also based on salary as of 1/1. Premiums and Coverage do not increase mid-year. Coverage terminates the end of the month the employee separates from employment. Dependents coverage terminates the end of the month they are no longer eligible. Child coverage does not include AD&D. Age reduction and exclusions apply.

New hires who elect coverage within 30 days of hire are not subject to Evidence of Insurability (EOI) for guaranteed issue. Dakota 911 staff electing new or increased coverage beyond Guaranteed Issue is subject to EOI and underwriting before approval.

At open enrollment employees are eligible for an Annual Benefit Increase that allows them to increase \$5,000 without Evidence of Insurability <u>up to the guaranteed issue</u> of \$150,000.

Employee - \$5,000—\$500,000 in increments of \$5,000 Max of 5x annual salary

New Hire Guaranteed Issue: \$150,000.

Spouse - \$5,000—\$250,000, in increments of \$5,000 100% of employee benefit up to \$250,000 New Hire Guaranteed Issue: \$75,000.

Children - \$5,000, \$10,000 or \$15,000 for each eligible child, birth to 26 years for one flat rate.

Calculation: \$25,000 coverage for a 40 year old

 $$25,000/1000 = 25 \times .11 = 2.75

2024 Optional Life Rates			
Age	Monthly (1,000 of coverage	
Age	Employee	Spouse	Child(ren)
Under 20	\$0.07	\$0.07	
20—29	\$0.07	\$0.07	
30-39	\$0.10	\$0.10	On a flat rate
40-44	\$0.11	\$0.11	One flat rate covers all listed/
45-49	\$0.17	\$0.17	eligible children:
50-54	\$0.23	\$0.23	\$0.45 for \$5,000
55-59	\$0.38	\$0.38	\$.90 for \$10,000
60-64	\$0.63	\$0.63	
65-69	\$1.13	\$1.13	\$1.35 for \$15,000
70-84	\$1.68	\$1.68	
85 and Over	N/	١	





DISABILITY INSURANCE

Insured by Mutual of Omaha—Group #G000ATL3

Short-Term Disability (STD) - Policy #GUCATL3—employee pays 100% of the cost

Short-Term Disability pays a percentage of the employee's salary (60%) if they become temporarily disabled, unable to work due to sickness or injury not related to their job. Newly hired employees can elect Short-Term Disability within the first 30 days of employment. Current employees may elect Short-Term Disability at open enrollment for the upcoming year. Benefits begin on the 15th day of an illness or non-job related accident, and may pay up to 11 weeks (depending on the disability) or until Long-Term Disability benefits commence, whichever comes first. Pre-existing conditions and 14 day elimination period apply.

2024 Short-Term Disability—All Ages		
Maximum Weekly Benefit: \$1,000		
Monthly Cost/Eligible Weekly Benefit:	\$.056	

Calculation:

1/1 Hourly Wage x 40 hours=basic weekly income x 60% =eligible weekly benefit (maximum of \$1,000) Eligible weekly benefit (actual or maximum of \$1,000) x .056=monthly cost

Long-Term Disability (LTD) - Policy #GLTD-ATL3—no cost to employee

Long-term Disability replaces a portion of the employee's income (60%) if they become totally disabled and unable to work. In some circumstances, employees may also be eligible for Long-term Disability benefits if they are disabled and only able to work part-time as a result of their disability. Employees are eligible for Long-term Disability once they have worked for Dakota 911 for at least 90 days and are approved by the provider. Pre-existing conditions, elimination periods and maximum benefit periods apply. Long-Term Disability is an employer-paid benefit, but the premium cost is documented as taxable income on employee paystubs.

2024 Long-Term Disability—All Ages		
Maximum Monthly Benefit: \$8,000		
Monthly Cost/\$100 Weekly Payroll: \$.25		

Calculation:

1/1 Hourly Wage x 2080 hours=annual salary \div 12 = monthly salary Monthly salary x .0025 (.25/\$100 of weekly payroll) = eligible monthly benefit (maximum of \$8,000)

Wages as of January 1st are used to calculate short-and long-term disability rates and are updated midyear only if a claim is submitted. Disability coverage terminates the day of separation from employment.

BENEFICIARIES



Beneficiary Designations

When employees first start a job, they may be idealistic about who they want to receive their assets. Life changes such as marriage, having children, divorce, and other events make it necessary to review and update beneficiary designations on a regular basis.

While beneficiary designations for employee pensions, 457 and Roth IRA plans must be updated directly with the carrier, designations for Dakota 911-sponsored life insurance plans are not retained by the carrier. As such, Dakota 911 assists employees in retaining that information. Including beneficiary designations directly in the annual open enrolment documentation ensures regular designee consideration.

If the employee is married, their spouse is automatically their beneficiary for the pension and 457 plans, and the Roth IRA. If they wish to select a different beneficiary under those plans, their spouse's notarized signature is required.

Neither a life insurance plan nor an insurer will pay benefits directly to a minor child. Benefits from the plan—such as life insurance—must be paid to an adult, such as a guardian, or to a trust established for the benefit of the child.

Discussing options with a legal advisor, and putting a little time into beneficiary considerations will help protect assets and ensure they are distributed to designated loved ones as intended. Remember, the EAP offers financial and legal guidance at hpeap.com or 866/326-7194.

MOBILE APPS

Most of our carriers offer a mobile app. Download the app and register to have access to ID cards, plan balances and much more. Here are some available apps:

MyHP

- View ID cards
- Check plan balances
- Refill prescriptions
- Find a doctor in your network
- Check claim status
- Contact HP for coverage questions

• iConnectYou (Employee Assistance)

- Immediate access to support
- Articles on wellbeing

MissionSquare Mobile (previously ICMARC)

• Shows your total balance

EyeMed Members

- Locate Provider
- View coverage and ID cards

WEX Benefits

- Check account balance
- Get reimbursement & Pay bills from your HSA/HRA/FSA





Public Employees Retirement Association (PERA)

Public Employees Retirement Association is a mandatory retirement plan for public employees. Contributions are state-mandated and begin immediately. Employees are fully vested after 5 years of service (3 years for employees hired prior to July 1, 2010) and contributions are tax-deferred, taxable upon receipt. For 2023, employee contributions are 6.5% of gross salary and employer contributions are 7.5% of that same salary. Prior to retirement, employee should request Dakota 911 administration provide a PERA Verification of Termination. PERA "High Five" calculations do not include PTO cash-outs.

Deferred Compensation - Administered by MissionSquare or MSRS

Deferred Comp is a supplemental 457 retirement savings program to which employees can make pre-tax contributions, reducing their taxable income for the year. These contributions and all associated earnings are not subject to tax until withdrawn. Dakota 911 sponsors Deferred Compensation participation through MissionSquare and MSRS (MNDCP), offering employees the option of payroll deduction to fund their account. Employees can enroll or change contributions at any time. Employees can also manage their investment allocations, or defer to the provider. If not identified at time of enrollment, funds are automatically allocated into a fund on their behalf. For more information, contact administration or refer to the Retirement Planning page at www.dakota911.benefithub.com.

Payroll-Deducted ROTH IRA

A Roth IRA is an individual retirement account that allows employees to set aside after-tax income up to a specified amount each year. Both earnings on the account and withdrawals after age 59 1/2 are tax free. Setting up a ROTH IRA with ICMA-RC is very easy. Dakota 911 sponsors Roth IRA participation through MissionSquare, offering employees the option of payroll deduction to fund their account. Contact Administration for materials. Employees may enroll or change their contributions at any time. For more information, contact administration or refer to the Retirement Planning page at www.dakota911.benefithub.com.

Benefits Continuation—Administered by Alerus

Dakota 911 offers former employees and their dependents to continue to participate indefinitely in the employer-sponsored hospital, medical and dental insurance groups they participated in immediately prior to retiring as long as they have met the age and service requirements necessary to receive an annuity from a public pension plan but have opted not to draw upon the funds at the time they retire. This is often referred to as an "early retiree". When an early retiree turns 65, when an employee retires at or after age 65, or when a retiree under age 65 enrolls in Medicare Parts A and B due to disability, Dakota 911 must still offer the option of indefinite coverage. However, Dakota 911 may decide to offer the retiree a different benefit plan and/or determine the retiree's premium rate differently than the premiums for active employees.





IMPORTANT 2024 DATES

DIRECT DEPOSIT

Employees receive 26 paychecks a year via direct deposit into bank accounts of their choosing. Employees also have web-based access to their pay stubs at all times. To access pay stubs and view gross salary, taxes, benefits and other deductions and net pay information, employees can log into their JDE account, click on the View/Print Pay History tab in the middle of the screen and then click on the paperclip to the far left of the check date of the desired pay stub.

2024 PAYROLL DATES

January 5th	April 12th	July 19th	October 25th
January 19th	April 26th	August 2nd	November 8th
February 2nd	May 10th	August 16th	November 22nd
February 16th	May 24th	August 30th	December 6th
March 1st	June 7th	September 13th	December 20th
March 15th	June 21st	September 27th	24 of the 26 pay periods
March 29th	July 5th	October 11th	have benefit deductions.

PTO Cash-out elections will be processed on August 30th, 2024.

Holiday and Compensatory Time balances will be processed on December 13th, 2024.

PTO ACCRUAL

Years of Service	0-5	5.01-10	10.01-15	15.01-20	20.01-25	25.01 +
Accrual/Pay Period	6.5 hours	8 hours	9.5 hours	10.5 hours	11.5 hours	12.5 hours

2024 HOLIDAYS

Holidays for union-represented staff are designated in the unit's collective bargaining agreement. Administrative offices are closed on the holidays identified below. Refer to the Employee Handbook or Union Contract for more information. In January, all employee holiday accrual banks are credited with 96 hours, 8 hours for each of the following holidays. These hours are available for immediate use but are subject to reconciliation if the employee leaves employment prior to the identified holiday.

New Year's Day	Independence Day
Martin Luther King Day	Labor Day
President's Day	Veteran's Day
Easter	Thanksgiving
Memorial Day	Christmas Eve
Juneteenth	Christmas Day



CONTACTS

HEALTH INSURANCE CONTACT INFORMATION		
HealthPartners Member Services M—F, 7am to 6pm CST; Healthpartners.com Call number on back of ID card, or 800/883-2177 HealthPartners EAP 866/326-7194; www.hpeap.com password: D911 iConnectYou Mobile App passcode: 112050 HealthPartners Plan for Me www.healthpartners.com/planforme	 Your coverage, claims, or account balances Finding a doctor or specialist in your network Discounts through your health plan, services & programs Emotional, Financial, Legal, Parenting, Childcare, Relationships, Senior Life, Work & Career and so much more help! Assistance in determining which plan best suits your needs 	
Group #25267; Site # all; Effective Date: 1/1/2019 HealthPartners Pharmacy Navigator M—F, 8am—5pm CST, www.healthpartners.com/mtminfo Call number on back of ID card and ask for Pharmacy Navigator	 Your pharmacy benefits If your medicine is covered on the formulary 	
HP Prescription List HP Preventive Services Guide Preferred RX/Co-Insurance Routine Checkups, screening, counsel HealthPartners Care Line Service—nurse line 24/7, 365 days a year800/551-0859	HP Provider List Open Access Network Buy-Up Med List Whether you should see a doctor Home treatment options	
HealthPartners Nurse Navigator program M—F, 7:30am—5pm CST; 800/883-2177	 Understanding your health care and benefits How to choose a treatment option 	
HealthPartners Baby Line phone service 24/7, 365 days a year; 800/845-9297	Your pregnancy/ContractionsYour new baby	
HealthPartners Behavioral Health Navigators M—F, 8am—5pm CST; Healthpartners.com; 888/638-8787	 Find in-network mental/chemical health care professionals Your behavioral health benefits 	
HealthPartners Health Assessment www.healthpartners.com; Log-in	 Click on My Plan; Scroll down to Health Assessment Print scorecard (shows only name & complete date) 	
Virtuwell— <u>www.virtuwell.com</u> (Free to enrolled members) Doctor on Demand— <u>www.doctorondemand.com</u> Teladoc— <u>www.teladoc.com</u>	Online care for varying degrees of support, diagnoses and prescriptions	
	ISA/FSA CONTACT INFORMATION	
Mutual of Omaha—Disability, Life & Vision M-F, 7am—7pm; www.mutualofomaha.com; 800/369-3809 WEX —HRA/FLEX/HSA Claims M—F, 6am—9pm; www.wexinc.com; 866/451-3399		
DEFERRED COMP/RETIREMENT CONTACT INFORMATION AUSSIGNS CHART. Deferred Course.		
MISSIONSQUARE—Deferred Comp www.icmarc.org; 202/962-4600; Investments at 800/462-4660	PERA—Retirement www.mnpera.org; 800/652-9026	
MSRS—Deferred Comp www.msrs.state.mn.us; 800/657-5757	MEDICARE CONTACT: LEIF PETERSON Leif_peterson@ajg.com; 952/345-2302	
Dakota 911 Online Resource: www.Dakota911.benefithub.com		
DAKOTA 911 CONTACT: JEN HILDEBRANDT @ 651/322-8660 OR JHILDEBRANDT@DAKOTA911MN.GOV		

HOUSEKEEPING



Direct Deposit Changes

Direct deposit forms do not require you to attach a voided stub as long as it is filled out electronically. Once completed the form must be printed and signed. When a direct deposit form is submitted, it will supersede the previous form so it must include deposit direction for all accounts. This form is available at www.Dakota911.benefithub.com.

Loss of Coverage

When medical, dental, vision or life insurance is terminated, coverage runs through the end of the month and is charged accordingly. Disability coverage ends the day the employee separates from employment.

Photo & Video Authorization

Photo & Video Authorizations will remain in place until superseded. You may change your authorization at any time by completing and submitting a new form. This form is available at www.Dakota911.benefithub.com.

Fitness Center Orientation and Use Authorization

All employees are invited to use the Dakota 911 fitness center. Prior to use of the center, employees must submit the Dakota 911 Fitness Center Orientation and Use Authorization form. This form is available at www.Dakota911.benefithub.com.

W-4

Common lifestyle changes like getting a job or a change in your marital status can change your tax liability. If you find yourself experiencing a lifestyle change that may impact your tax liability, consider consulting your tax advisor about adjusting withholdings on your W4. Adjustments can be done at any time during the year. Please remember that if you update the Federal W4, you must also complete the Minnesota Form W-4MN.

Qualifying Events

If you experience a qualifying event it is your responsibility to notify Human Resources of the event to ensure appropriate actions are taken. Qualifying events include but are not limited to marriage, divorce, the birth or adoption of a child, death of a dependent covered by your plan elections, or a dependent turning age 26. In the event there is loss of coverage for anyone covered by your plan, appropriate benefit continuation notifications need to be made.

Emergency Contacts

Emergency contact information is retained in the payroll database. It is your responsibility to keep this information updated.

CHECKLIST



REQUIRED OF ALL STAFF BY 5:00PM ON 11/10/2023

SIGNED BENEFITS ELECTION (REQUIRED OF ALL STAFF)

REQUIRED (IF APPLICABLE) BY 5:00PM ON 11/10/2023

EVIDENCE OF INSURABILITY

ONLY IF YOU ARE ELECTING NEW, OR INCREASING CURRENT VOLUNTARY LIFE BY MORE THAN \$5.000 AND EXCEEDS THE GUARANTEED ISSUE

HRA/VEBA PLAN CHANGE FORM

ONLY IF YOU ARE MOVING FROM HRA/VEBA TO HSA

SIGNED BENEFICIARY DESIGNATION

ONLY IF YOU ARE MAKING BENEFICIARY CHANGES

REQUIRED OF ALL STAFF BY 5:00PM ON 12/15/2023

2024 PTO CASHOUT ELECTION

NOTICES ACKNOWLEDGMENT

OTHER REMINDERS

REVIEW & UPDATE EMERGENCY CONTACTS IN PAYROLL

REVIEW W-4 & DISCUSS WITH TAX ADVISOR IF CHANGES ARE NEEDED

REVIEW & UPDATE BENEFICIARY DESIGNATIONS (REQUIRED FOR BASIC & VOLUNTARY LIFE)

IF YOU ARE ANTICIPATING RETIREMENT, OR A QUALIFYING EVENT IN 2024, CONSIDER SCHEDULING A TELE-MEETING WITH BENEFITS BROKER SUE FRICK DURING OPEN ENROLLMENT TO DISCUSS HOW YOUR OPEN ENROLLMENT SELECTIONS MIGHT IMPACT 2024 MID-YEAR AND FUTURE COVERAGE OPTIONS.

QUALIFYING EVENTS ARE CONSIDERED ON A CASE BY CASE BASIS AND MAY COME WITH ADDED RESTRICTIONS.

WHAT MAY BE CONSIDERED A QUALIFYING EVENT BY THE INSURANCE PROVIDER MAY NOT BE CONSIDERED A QUALIFYING EVENT UNDER IRS REGULATION.

CALL-IN CONSULTS ARE AVAILABLE TO ALL STAFF ON NOVEMBER 1ST AND NOVEMBER 8TH. SIGN UP IS LOCATED AT G: DCC STAFF/HR 2023/2024 OPEN ENROLLMENT ONE-ON-ONE TELE-MEETING SIGN-UP.

* JENNY CAN ARRANGE FOR TELE-MEETING DATE/TIME ALTERNATIVES IF NEEDED.