



2025 BENEFITS AT A GLANCE

A comprehensive health insurance plan is open to all eligible Team Members and their dependents (including domestic partners). Health benefits begin the 1st of the month following 60 days of employment.

Medical Plan – Team Member Cost Per Paycheck

Medical plan options are provided through Imagine 360.

In-network preventative care services, regardless of the plan, are covered at 100% (immunizations, physicals, mammograms, and hearing exams). Below is an overview of how much you can expect to pay per paycheck.

PLAN	TEAM MEMBER ONLY	FAMILY PLAN	CALENDAR-YEAR DEDUCTIBLE
Base PPO*	\$22.49	\$183.69	In network: \$5,000 (individual); \$10,000 (family)
Buy Up PPO	\$117.93	\$349.26	In network: \$2,500 (individual); \$5,000 (family)
HDHP PPO/HSA	\$48.44	\$200.08	In network: \$3,500 (Individual); \$7,000 (family)

** This plan provides you with an HRA benefits debit card that Includes \$1,000 (Team Member only) or \$2,000 (Team Member + dependent)*

PRESCRIPTION OPTIONS	RETAIL PHARMACY COPAYS	MAIL ORDER 90-DAY SUPPLY COPAYS
Generic	\$10 (HDHP/HSA Plan) \$10 (Base & Buy Up Plans)	2x copay
Preferred Brand Name	\$50 (HDHP/HSA Plan) \$50 (Base & Buy Up Plans)	2x copay
Non-Preferred Brand Name	\$80 (HDHP/HSA Plan) \$80 (Base & Buy Up Plans)	2x copay

HDHP/HSA PLAN MEMBERS: THE ABOVE PHARMACY COPAYS ARE IN EFFECT AFTER THE CALENDAR-YEAR DEDUCTIBLE HAS BEEN MET.

NO-COST HOME DELIVERY PROGRAM: WHEN ORDERED THROUGH MAIL ORDER PHARMACY, SOME MEDICATIONS ARE PROVIDED AT NO COST. SEE BENEFITS GUIDE FOR THE LIST OF MEDICATIONS.

UNUM DENTAL INSURANCE	EyeMed (thru UNUM) VISION INSURANCE
<p>Coverage based on in-network services:</p> <ul style="list-style-type: none"> • Preventive procedures: 100% coverage • Basic procedures: 80% coverage • Major procedures: 50% coverage • Max individual coverage per year: \$1,250 • Buy Up Dental Plan also available 	<ul style="list-style-type: none"> • \$10 copay for vision exam • \$25 copay on prescription single vision lenses • Frames are covered at 20% over \$130 allowance • Contacts are covered at 85% over \$130 allowance

LIFE INSURANCE	ALERUS 403(B)
<ul style="list-style-type: none"> • Company pays 100% of Basic Term Life and AD&D insurance: 1x your annual salary (max \$250,000) • Additional voluntary life insurance option available for Team Member and dependents at Team Member cost. 	<p>Pre-tax or post-tax (ROTH) retirement plan</p> <ul style="list-style-type: none"> • Company match: 50¢ per dollar with max match of 3% (Team Member contribution of 6%) • 100% vested after 5 years of employment

MORE BENEFITS!	
<p>Flexible Spending Account (FSA) There are 2 types of accounts you can enroll in: Healthcare FSA or Dependent Care FSA. Both offer the benefit of reducing your taxable income.</p> <p>Health Savings Account (HSA) If enrolled in the HDHP Health Plan, Team Members may enroll into the HSA funding account. This account offers the benefit of reducing your taxable income.</p>	<ul style="list-style-type: none"> • 25% Team Member Discount at retail stores on donated items • University Federal Credit Union Membership • Counseling services • Tuition support through PelotonU • Discounted gym membership • Paid Time Off, Holidays and Personal Days
<p>Short Term Disability/Long Term Disability Available to all team members at an additional cost based on income and age. Long Term Disability is provided to salaried Team Members at no cost.</p>	