



ORION
ASSOCIATES

Employee Benefit Program Summary

2019

Full-time Employees

Welcome!

Orion Associates offers eligible employees these benefits:

- Health Insurance
- Dental Insurance
- Vision Insurance
- Flexible Benefit Plan
- Basic Term Life and AD&D Insurance
- Voluntary Term Life and AD&D Insurance
- Short-term Disability Insurance
- Supplemental Plans
- Employee Assistance Program
- Pet Insurance

What You Should Know

- Benefit eligible full-time employees work over 35 hours per week. If you work 20 or more hours per week, you are eligible for the Supplemental Plans.
- Benefits begin on the first of the month following 30 days of employment when your enrollment information is submitted in a timely manner.
- Enrollment, changes, and cancellations for most plans are limited to your initial benefit eligibility period or our annual open enrollment period unless you have a qualifying life event such as marriage, divorce, birth, loss of other coverage, a job status change, or other life events.

Questions about your benefits?
Please contact your Human Resource Generalist.

Orion Associates, Inc.

EMPLOYEE BENEFIT PROGRAM

2019

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Orion Associates, Inc. reserves the right to change, amend, terminate, or otherwise alter any benefit plan at any time. The benefits described in this document are only summaries.

In case of error and for all claim adjudication, the master contracts will prevail.

Please read your benefit certificates for more detail and information.

HEALTH INSURANCE CONTACT INFORMATION

To learn about health insurance options, please contact:

Gravie
Phone: (800) 501-2920
Email: help@gravie.com
www.gravie.com



DENTAL PLAN

Orion Associates offers a dental plan from Principal Financial Group. You may use any licensed dentist, but benefits are highest when you use a Principal Plan Dental provider.

Dental Plan Highlights

| Dental Plan Service/Feature | PPO Network Benefit | Out of Network Benefit |
|--|--------------------------------------|--|
| Network Name | Principal Plan Dental | Any licensed dentist <i>You may be balance-billed for costs over allowed amounts.</i> |
| Maximum Annual Benefit <i>Per calendar year</i> | \$1,000/person | \$1,000/person |
| Deductible <i>Per calendar year</i> | \$50/person; \$150/family | \$50/person; \$150/family |
| Preventive & Diagnostic Care Cleanings, Exams, X-rays | 100% covered <i>No deductible</i> | 100% covered <i>No deductible</i> |
| Basic Procedures Fillings, Simple oral surgery, Endodontics, Periodontics | 80% covered | 80% covered |
| Major Procedures Root Canal Therapy, Complex oral surgery, Crowns, Onlays, Inlays, Bridges, Dentures | 50% covered | 50% covered |
| Orthodontia | Not covered | Not covered |

Refer to your Certificate for more detail. The Master Contract will be used in case of error and for all claim adjudication.

Dental Plan Network Providers

Although you may see any dentist you wish, benefits are highest when you see a Principal Plan Dental provider. To find a provider:

- Visit www.principal.com. Choose *Insure*, then *Find a Dentist*.
- Call Customer Service at (800) 554-3392.



Dental Plan Premiums

Orion Associates pays a significant portion of your premium for dental coverage, including dependent coverage. These are the contributions:

| 2019 Coverage Status | Orion Pays <i>Per Month</i> | You Pay <i>Per Paycheck</i> |
|---------------------------------------|--------------------------------|--------------------------------|
| Employee | \$24.62 | \$3.08 |
| Employee + Spouse | \$47.30 | \$5.91 |
| Employee + Child(ren) | \$49.24 | \$6.15 |
| Employee + Spouse + Child(ren) | \$78.08 | \$9.76 |

Your contribution is deducted twice each month, even if there are three pay periods in one month.

VISION PLAN

Orion Associates offers a vision plan from Unum-Starmount. You may use any vision provider, but benefits are highest when you use Unum Vision Care providers.

Vision Plan Highlights

| Plan Feature/Service | Network Member Cost | Out-of-Network Reimbursement |
|-------------------------------------|---|------------------------------------|
| Network Name | Unum Vision Care | n/a |
| Frames | Once every 12 months \$120 allowance | Once every 12 months Up to \$50 |
| Standard Plastic Lenses | Once every 12 months | Once every 12 months |
| Single Vision | \$10 Copay | Up to \$25 |
| Bifocal | \$10 Copay | Up to \$40 |
| Trifocal | \$10 Copay | Up to \$50 |
| Standard Progressive | \$70 allowance | Up to \$40 |
| Lens Add-ons* | | |
| Standard scratch coating | \$15 (covered at Walmart) | Not covered |
| Standard anti-reflective coating | \$45 | |
| Standard Polycarbonate | \$40 (covered under age 19) | |
| Standard anti-reflective coating | \$45 | |
| Polarized | \$75 | |
| Contact Lenses | Once every 12 months | Once every 12 months |
| Elective – includes fit & follow-up | \$10 Copay, then \$120 allowance | Up to \$100 |
| Medically Necessary | \$210 allowance | Up to \$210 |
| LASIK Surgery | Discounts available. | Not applicable |
| From TLC Vision Network | | |

See the certificate for more details. The Master Contract will be used for all claim processing and in case of error.

*Lens add-on discounts are available from providers labeled Value Added (VA) or Service Plus (SP) at www.UnumVisionCare.com.

Vision Plan Network Providers

To find Unum-Starmount Vision Care providers, contact Unum:



(866) 679-3054

www.UnumVisionCare.com

Vision Plan Contributions

If you enroll in this plan, you pay 100% of the premium via tax-deductible payroll deductions. Your contributions are as follows:

| 2019 Coverage Status | You Pay Per Paycheck |
|--------------------------------------|-------------------------|
| Employee | \$2.74 |
| Employee + Spouse | \$5.49 |
| Employee + Child/ren | \$6.01 |
| Employee + Spouse + Child/ren | \$9.43 |

Your contribution is deducted twice each month, even if there are three pay periods in one month.

FLEXIBLE BENEFIT PLAN

Orion Associates offers a flexible benefit plan through Alerus. This plan can help reduce your taxable income so you pay less tax three ways:

- 1. Premiums:** Premiums for the Orion Associates medical, dental/vision plan premiums are deducted from your pay on a pre-tax basis if you participate in those plans.
- 2. Medical Flex Spending Account (FSA):** You may use pre-tax deductions for medical, dental and vision expenses not paid by your or your spouse's insurance plans up to \$2,700, depending upon your election. *NOTICE: If you are enrolled in an HSA Health Plan, this FSA is not available to you.*
- 3. Dependent Care FSA:** You may use pre-tax deductions to help pay dependent care expenses up to \$5,000 or \$2,500 if married filing separately.

Using Your Flex Plan

The flex plan year runs from January 1, 2019 through December 31, 2019. Claims incurred during the plan year may be reimbursed to you by Alerus until March 31, 2020.



(800) 495-4015 www.alerusb.com

BASIC LIFE INSURANCE PLAN

Orion Associates provides a Basic Term Life and AD&D plan through Unum for all eligible employees. We pay 100% of the premium for you. You are automatically enrolled in this plan if you are eligible.

Basic Life and AD&D Plan Highlights

Orion Associates pays the premium for this coverage.

| Unum Plan Feature | Basic Life Plan Benefit |
|---|---|
| Term Life Insurance Amount | \$10,000 per employee |
| Accidental Death and Dismemberment (AD&D) Amount | \$10,000 per employee |
| Benefit Reduction Ages | From the original amount, at age 65, a 25% reduction; at age 70, a 50% reduction |
| Accelerated Death Benefit | If you have a terminal illness, you may be able to withdraw a portion of your term life amount. |
| Portability/Conversion Privileges | You may be able to continue this plan through the portability privilege within 60 days of your ineligibility date. You may also be able to convert this plan to another life plan within 31 days of losing this coverage. |

Refer to your Certificate for more detail. The Master Contract will be used in case of error and for all claim adjudication.

VOLUNTARY LIFE INSURANCE PLAN

Orion Associates offers a Voluntary Term Life and AD&D plan through Unum for all eligible employees. This plan can help supplement your life insurance protection.

Voluntary Life and AD&D Plan Highlights

You pay the premium through payroll deduction for any voluntary coverage you may purchase. See the chart below for monthly rates.

| Unum Plan Feature | Voluntary Life Plan Benefit | | |
|--|---|---|--------------------------------|
| Annual Open Enrollment | Plan members may increase coverage up to these guaranteed limits during annual open enrollment periods: Employees – Up to \$110,000 Spouses – Up to \$25,000 | | |
| Term Life Insurance Amount | Employees: \$10,000 – \$500,000 maximum Spouses: \$5,000 - \$500,000 maximum Children: \$2,000 - \$10,000 depending upon age | | |
| Accidental Death and Dismemberment (AD&D) Amount <i>Some limits apply.</i> | Employees: \$10,000 - \$500,000 maximum Spouses: \$5,000 - \$500,000 maximum Children: \$2,000 - \$10,000 depending upon age | | |
| Benefit Reduction Ages | From the original amount, at age 70, a 35% reduction; at age 75, a 55% reduction | | |
| Accelerated Death Benefit | If you have a terminal illness, you may be able to withdraw a portion of your term life amount. | | |
| Portability/Conversion Privileges | This plan offers a portability privilege within 60 days of your termination or ineligibility date. You may also be able to convert this plan to another life plan within 31 days of losing this coverage. | | |
| Your Premiums Shown monthly | Member Age | Employee Rate Per \$10,000 | Spouse Rate Per \$5,000 |
| | 0 – 29 | \$0.670 | \$0.335 |
| | 30 – 34 | \$0.830 | \$0.415 |
| | 35 – 39 | \$1.290 | \$0.645 |
| | 40 – 44 | \$1.880 | \$0.940 |
| | 45 – 49 | \$2.940 | \$1.470 |
| | 50 – 54 | \$4.810 | \$2.405 |
| | 55 – 59 | \$7.910 | \$3.955 |
| | 60 – 64 | \$12.350 | \$6.175 |
| | 65 – 69 | \$22.990 | \$11.495 |
| | 70 and older | \$45.010 | \$22.505 |
| | AD&D Benefit | \$0.270 | \$0.135 |
| | Child Rates | \$0.779 / \$2,000 all children AD&D: \$0.068 / \$2,000 | |

Refer to your Certificate for more detail. The Master Contract will be used in case of error and for all claim adjudication.



(800) 438-6388 www.unum.com/employees

SHORT-TERM DISABILITY PLAN

Orion Associates provides a short-term disability (STD) insurance benefit through Unum for all eligible employees. This plan helps protect your income in the event you can no longer work due to a disability. We pay 100% of the premiums for you.

Short-term Plan Highlights

| Unum Plan Feature | Short-term Disability Benefit |
|--------------------------------------|--|
| Benefit Amount | 66.6667% of weekly earnings up to \$500/week maximum |
| Day Benefits Begin | 15 th day of a qualifying disability |
| Benefit Duration | Up to 24 weeks |
| Pre-existing Condition Limits | None |

Refer to your Certificate for more detail. The Master Contract will be used in case of error and for all claim adjudication.



(800) 438-6388 www.unum.com/employees

EMPLOYEE ASSISTANCE PROGRAM (EAP)

Work-Life Assistance

The employee assistance program from Unum provides free and confidential guidance from professional, master's-level consultants.

Find help with personal or work-related concerns, such as:

- Managing relationships
- Dealing with workplace stress
- Finding child or elder care
- Addressing financial issues
- Stress management
- Depression

(800) 854-1446

www.unum.com/employees/services/life-balance

LifeBalance

SUPPLEMENTAL PLANS

Orion Associates offers full and part-time employees supplemental insurance plans through Colonial Life. If you enroll in a supplemental plan, you pay 100% of the premium through payroll deduction. Choose from three plans: Short-term Disability, Accident and Medical Bridge.

Short-term Disability Plan – A Buy-up Option to your Principal STD Plan

Short Term Disability replaces a portion of your income to help make ends meet if you are totally disabled due to a covered accident or covered sickness that happens outside of work. Have you thought about what you would do if you were unable to work? How would you cover the cost of your daily living expenses? Colonial Life's Short Term Disability Insurance provides a monthly benefit to replace lost income in the event of a covered accident or illness. This coverage helps you to maintain your lifestyle.

- Monthly Benefit Period options
- Choice of Elimination / Waiting Period
- Coverage includes maternity (9-month birth exclusion applies) and partial disability benefits.
- *Full – time employees (30+ Hours) protect up to 40% of your monthly income: \$400 - \$6,500 in \$100 increments*
- *Part – time employees (20-29 Hours) protect up to 60% of your monthly income: \$400 - \$6,500 in \$100 increments*
- Guarantee issue (no underwriting questions) for new hires only
- Benefits are paid directly to you, regardless of any other insurance you may have with other companies.
- PORTABLE: If you change jobs you can take your coverage with you at the same affordable rates.
- WAIVER OF PREMIUM is included if you are still disabled after 90 days.
- OWN OCCUPATION definition of disability and worldwide coverage
- LEVEL PREMIUMS: Rates do not increase as you get older.

Per Pay Period Rates

3 Months 0 Days Accident / 7 Days Sickness Elimination Period

| Monthly Benefit | \$400 | \$700 | \$1000 | \$1200 | \$1500 | \$1800 | \$2000 | \$2200 | \$2500 | \$3000 |
|-----------------|-------|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| Age 17-49 | 3.28 | 5.74 | 8.20 | 9.84 | 12.30 | 14.76 | 16.40 | 18.04 | 20.50 | 24.60 |
| Age 50-69 | 3.98 | 6.97 | 9.95 | 11.94 | 14.93 | 17.91 | 19.90 | 21.89 | 24.88 | 29.85 |

6 Months 0 Days Accident / 14 Days Sickness Elimination Period

| Monthly Benefit | \$400 | \$700 | \$1000 | \$1200 | \$1500 | \$1800 | \$2000 | \$2200 | \$2500 | \$3000 |
|-----------------|-------|-------|--------|--------|--------|--------|--------|--------|--------|--------|
| Age 17-49 | 3.14 | 5.50 | 7.85 | 9.42 | 11.78 | 14.13 | 15.70 | 17.27 | 19.63 | 23.55 |
| Age 50-69 | 4.12 | 7.21 | 10.30 | 12.36 | 15.45 | 18.54 | 20.60 | 22.66 | 25.75 | 30.90 |

AAA Risk

Rate Example: 30-year old with a 3-month benefit period, 0/7 elimination period and a \$1,500 monthly benefit would cost \$12.30 per pay period.

Example - Pregnancy Benefit Payout (vaginal delivery using the above criteria):
 \$1,500 monthly benefit = \$50 per day payment multiplied by 5 weeks = \$1,750 total maternity payment.



Accident Plan

Common injuries like major cuts, fractures or dislocations can result in hundreds of dollars in out-of-pocket medical expenses and time missed from work. Colonial's Accident Care Insurance helps cover unexpected expenses such as co-pays, deductibles, co-insurance and includes benefits for initial care (ambulance, ER, doctor's office visit, etc.), hospitalization, follow-up care plus accidental death & dismemberment benefits. The plan includes:

- On & Off Job Accident Coverage with ability to cover your spouse and dependent children
- Health Screening - annual \$100 benefit
- Guarantee issue
- Worldwide coverage
- You have the ability to cover your spouse and dependent children

Per Pay Period Rates – Plan 2

| | |
|--------------------|----------|
| Name Insured: | \$ 7.84 |
| Employee & Spouse: | \$ 12.48 |
| One-parent Family: | \$ 12.86 |
| Two-parent Family: | \$ 17.51 |

Example #1:

4 year old fell on the ice and cut his chin, took an ambulance to the hospital where he received stitches. Subsequent to the ER visit, have a doctor's follow-up visit.

Benefit Payments Received:

| | |
|-----------------------|-----------------------------------|
| • Ambulance | \$ 200 |
| • Emergency Room | \$ 125 |
| • Follow-Up Treatment | \$150 (\$50 per visit x 3 visits) |
| • Stitches | <u>\$ 25</u> |
| Total Benefit Payment | \$ 500 |

Example #2:

Bob broke his ankle sliding into second base playing softball. He took an ambulance to the emergency room for treatment and was admitted to the hospital as his injury required surgery. After the surgery, Bob needed to use crutches for three weeks, go to physical therapy for six days and had two doctor's office follow-up visits to check on his progress.

Benefit Payments Received:

| | |
|----------------------------|--------------------------|
| • Ambulance: | \$ 200 |
| • Emergency Room | \$ 125 |
| • Hospital Admission | \$ 1,000 |
| • Surgical ankle fracture | \$ 900 |
| • Appliances (Crutches) | \$ 100 |
| • Physical Therapy | \$ 150 (\$25 x 6) |
| • Follow-Up Doctor's Visit | <u>\$ 100 (\$50 x 2)</u> |
| Total Benefit Payment | \$ 2,575 |

Medical Bridge 3000/Hospital Confinement Plan

Medical Bridge 3000 provides benefits to help pay for deductible and coinsurance costs, as well as everyday living expenses. Benefits are paid directly to the insured and are compatible with High Deductible Health Plans and Health Savings Accounts (HSAs).

- Guaranteed issue for new hires only
- Provides peace of mind should the unexpected occur
- Provides a lump-sum \$1,500 or \$2,500 benefit for hospital confinement.
- Annual \$50 wellness benefit
- Plan is portable, you can take it with you at the same rates should you change jobs or retire
- Rehabilitation Unit Benefit of \$100 per day for up to 15 days
- You have the ability to cover your spouse and dependent children.

Common Reasons for Hospital Confinement:

- Pregnancies (9-month birth exclusion applies)
- Accidents
- Pneumonia
- Heart related Issues
- Respiratory Issues
- Stroke

Per Pay Period Rates

| PLAN 1 \$1,500 Hospital Confinement Benefit with \$50 Annual Wellness Benefit and Rehabilitation Unit Benefit | Employee Only | Employee & Spouse | Employee & Dependent Children | Employee, Spouse & Dependent Children |
|---|--------------------------|----------------------------------|--|--|
| Employee Age 17-49 | 8.23 | 15.13 | 11.83 | 18.81 |
| Employee Age 50-59 | 11.37 | 21.37 | 15.18 | 25.12 |
| Employee Age 60-64 | 14.84 | 28.46 | 18.45 | 31.41 |
| Employee Age 65-74 | 18.31 | 35.92 | 22.66 | 38.86 |
| PLAN 2 \$2,500 Hospital Confinement Benefit with \$50 Annual Wellness Benefit and Rehabilitation Unit Benefit | Employee Only | Employee & Spouse | Employee & Dependent Children | Employee, Spouse & Dependent Children |
| Employee Age 17-49 | 13.12 | 24.09 | 18.70 | 29.81 |
| Employee Age 50-59 | 18.14 | 34.05 | 24.09 | 39.89 |
| Employee Age 60-64 | 23.65 | 45.32 | 29.25 | 50.2 |
| Employee Age 65-74 | 29.36 | 57.56 | 35.90 | 62.44 |

Example #1:

Laura enrolled in the Medical Bridge \$2,500 benefit plan and was admitted to the hospital for delivery.

- Laura received a lump sum benefit payment of \$2,500.

Example #2:

Steve enrolled in the Medical Bridge \$1,500 benefit plan and was experiencing chest pains and spent 24 hours in hospital observation.

- Steve received a lump sum benefit payment of \$1,500.



(800) 325-4368 www.coloniallife.com

PET INSURANCE PLAN

Meridian offers pet insurance through Nationwide. Choose plans for dogs, cats, birds, and other common pets plus exotics. Premiums may be paid via payroll deduction.

Dogs and Cats

Use any vet. Choose from these plans offering 90% back on vet bills after a \$250 annual deductible:

My Pet ProtectionSM Plan covers expenses for:

- Accidents & Illness
- Behavioral treatments
- Hereditary & Congenital
- Rx therapeutic diets/supplements
- Cancer
- Specialty & ER coverage
- Dental diseases

My Pet ProtectionSM with Wellness Plan covers all of the above plus these expenses:

- Wellness Exams
- Teeth Cleaning
- Spay or Neuter
- Shots
- Flea and Tick
- More

Both My Pet ProtectionSM plans also include boarding or kennel fees if you are hospitalized; advertising, reward and replacement cost if your pet is lost or stolen; and vet expenses associated with the death of a pet. *Conditions apply.*

Other Animals

Plans for avian and exotic pets are also available.

All plans include **vethelplineSM** offering free 24/7 access to veterinarians by phone, email or online chat. (865) 331-2833

For rates and more information, or to enroll in a plan, contact Nationwide.



Nationwide[®]

(877) 738-7874 www.PetsNationwide.com

- Applications approved between the 1st and the 15th of a month become effective on the 1st of the following month.
- Applications approved from the 16th – end of a month are effective 30 – 45 days later on the 1st of the month.