



2020 - 2021 Employee Health & Wellness Guide

Medical | Dental | Life | Disability | FSA | DCA | EAP



768 Route 10 Gilsum NH 03448
www.badgerbalm.com

Health & Wellness Benefits

Nothing is more important to you and your loved ones than good health. That's why at W.S. Badger we are committed to a comprehensive employee benefit program that helps our employees stay healthy & feel secure.

Stay Healthy

- Health Insurance
- Health Reimbursement Arrangement (HRA)
- Health Savings Account (HSA)
- Pre-Tax Flexible Spending Account (FSA)
- Dental Insurance
- Wellness Fund

Feel Secure

- Life Insurance
- Short Term Disability
- Long Term Disability
- Employee Assistance Program

Benefit	Eligibility	Cost Sharing
Health Insurance	Regular FT 30+ hours	70% Badger / 30% Employee
Dental Insurance	Regular FT 30+ hours	100% Employee
Health Reimbursement (HRA)	Enrolled in Badger Health Insurance	100% Badger
Health Savings Account (HSA)	Eligible to make or receive contributions	Up to \$1000 from Badger from Wellness; additional to max contribution from employee
Flexible Spending (FSA)	Regular FT or PT	100% Employee
Badger Wellness Fund	Regular FT 30+ hours	100% Badger
Life Insurance	PT 20+ Hours	100% Badger
Short Term Disability Insurance	PT 20+ Hours	100% Badger
Long Term Disability Insurance	PT 20+ Hours	100% Badger
Employee Assistance Program	PT 20+ Hours	100% Badger

Contact Information

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WS Badger Human Resources

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Health Insurance & HRA

Cigna	Member Services
www.mycigna.com	866-494-2111



Health Savings Account

Mascoma Bank	Customer Service
www.mascomabank.com	888-627-2662



FSA / DCA

American Benefits Group	Customer Service
support@amben.com	800-499-3539
www.amben.com	Employer ID: ABGWSBCO



Dental Insurance

Delta Dental	Member Service
www.nedelta.com	800-832-5700



Life & Disability

Lincoln Financial Group	Member Service
www.lfg.com	800-423-2765





Health Insurance

Health Insurance Oct 1, 2020 – Sept 30, 2021 Cigna HRA Open Access Plus Plan

Service Category	Coverage Information
Annual Deductible	\$5,000 individual \$10,000 family
Annual Out-of-Pocket Maximum	\$5,000 individual \$10,000 family
Network	Nationwide
Coinsurance	0%
PCP Required	No
Preventive & Well Care Services	Covered in full
Telemedicine	\$55 copay
Telehealth	Subject to Deductible, then covered in full
Physician Office Visit & Specialist Visit	Subject to Deductible, then covered in full
Inpatient Medical/Surgical Care Diagnostic Lab & Other Testing Hospital Inpatient & Outpatient Physical/Occupational/Speech/Hearing Therapy Emergency Room Urgent Care Ambulance Mental Health: Inpatient & Outpatient Substance Abuse: Inpatient & Outpatient	Subject to Deductible, then covered in full
Routine Eye Exam	\$20 copay
Prescription Drugs - Preventive (Wellness)	Covered at 100% (no deductible)
Prescription Drugs; Generic, Preferred Brand & Non-preferred Brand	Subject to Deductible, then covered in full

Summary information provided for your convenience. If there is any discrepancy between the information above, and information in Cigna produced materials including Summary of Benefits and Coverage (SBC) rely on the latter.

Who is Eligible and When?

All regular full-time employees working 30+ hours a week are eligible to enroll in health insurance. Eligibility for newly hired employees is the 1st of the month following 30 days of full-time employment. Current, eligible employees who have elected to waive coverage are able to enroll during Open Enrollment. Only if they experience a qualifying event (including losing coverage elsewhere, getting married, having a baby) are they able to enroll outside of the open enrollment period.

Domestic Partnership: An employee's domestic partner and domestic partner's dependent children can enroll in the Badger health insurance and dental insurance plans. To enroll, an Affidavit of Domestic Partnership needs to be signed by the employee and the partner. Domestic partners' qualified medical expenses are NOT eligible for reimbursement through the FSA or HSA, unless they are also qualified tax dependents.

Waiving or Declining Health Insurance

If you are eligible for health insurance and will not be enrolling because of alternative coverage, or choose not to have insurance, a waiver form must be signed during the enrollment period. If you elect not to enroll, you may not join the plan until the next enrollment period, October 1, 2021, unless there is a "qualifying event." See W.S. Badger HR for more information about qualifying events.

All employees should be aware of possible Federal tax penalties for declining Badger's health insurance plan enrollment, as well as alternatives for health insurance available through the Health Insurance Exchange. For more information about declining health insurance, see: <https://www.healthcare.gov/get-coverage/> and <http://www.valuepenguin.com/ppaca/exchanges/nh>.

What happens if I leave Badger?

Under certain circumstances, you and your dependents may continue to participate in health coverage, dental insurance, and the Medical Flexible Spending Account through the Consolidated Omnibus Budget Reconciliation Act. COBRA is a federal guarantee of the continuation of health insurance plan coverage after employment ends, which allows you to remain on medical and dental coverage, at the employee's expense, for up to 18 or 36 months, depending on the circumstances.

Former employees who enroll via COBRA will be responsible for the full cost of the monthly premiums.

How do I enroll?

During Open Enrollment, September 2020, your health insurance enrollment must be completed through your ADP password-protected webpage.

Newly hired, regular full-time employees will enroll for health insurance benefits during the new employee orientation period. Eligibility begins the 1st day of the month, following the 30th day of employment.

With W. S. Badger's health insurance plan, Preventive Care services should be covered in full.

Preventive Care is care you receive when you are healthy and symptom-free, such as routine check-ups, screenings and immunizations.

Diagnosis & treatment are different from preventive care. They involve testing or treatment for a symptom or health issue you already have, such as an existing illness or injury. When a health care provider takes steps to diagnose or treat your health condition, the charges will be subject to you will be responsible for the Member Cost Sharing as stated in your plan.

For a list of services that should be considered based on your age and gender see:

<https://www.healthcare.gov/what-are-my-preventive-care-benefits>

In addition to coverage for Preventive Services, your plan includes coverage for certain Preventive Rx and supplies.

Generally speaking, preventive medications are used to prevent conditions like high blood pressure, high cholesterol, diabetes, asthma, osteoporosis, heart attack, stroke and prenatal nutrient deficiency. For a sample list, please see page 6.

Preventive medications are used to prevent conditions like high blood pressure, high cholesterol, diabetes, asthma, osteoporosis, heart attack, stroke and prenatal nutrient deficiency.

This document shows the most commonly prescribed preventive generic and preferred brand medications covered as of January 1, 2020.^{1,2} **The Preventive Generics and Preferred Brand Drug List is updated often so it's important to know that this is not a complete list of the medications your plan covers.** Also, your specific plan may not cover all of the medications in this document.

Here's some helpful information about this drug list:

- › Medications are listed alphabetically by the condition they prevent.
- › Brand name medications are capitalized and generic medications are lowercase.
- › Some brand name preventive medications have a generic equivalent. For these medications, the generic will be listed in parenthesis next to the brand name.
- › Some preventive medications are also considered "specialty" medications. Some plans may cover specialty medications on a specialty tier, may limit coverage to a 30-day supply and/or require you to use preferred specialty pharmacy to receive coverage. Log in to the **myCigna**® app or website, or check your plan materials, to learn more about how your plan covers specialty medications.

Coverage for preventive medications.

Some plans have specific coverage requirements for preventive medications. For example, some plans may:

- › Require you to pay a copay, coinsurance (the percentage you pay after you meet your deductible) and/or deductible (the amount you pay before your plan starts to pay) to receive coverage for a preventive generic medication.
- › Cover preventive generic medications at 100%, or no cost (\$0) to you.

Log into the **myCigna** app or website, or check your plan materials, to learn more about how your plan covers preventive medications. You can also click on "Price a Medication" to see how much your medication will cost you at the different pharmacies in your network.³

Go generic and save.

Ask your doctor if a preventive generic medication may be right for you. Generics have the same strength and active ingredients as brand name medications, but often cost much less – in some cases, up to 85% less.⁴

Preventive Generics and Preferred Brands Drug List

Asthma related

Advair HFA
albuterol
albuterol HFA
Anoro Ellipta
Atrovent HFA
Breo Ellipta
budesonide suspension
caffeine citrate oral solution
cromolyn nebulizer solution
Dulera
Flovent Diskus
Flovent HFA
fluticasone-salmeterol
Incruse Ellipta
ipratropium solution
ipratropium-albuterol
levalbuterol
levalbuterol concentrate
levalbuterol HFA
metaproterenol
montelukast
ProAir HFA
ProAir Respiclick

ProAir Respiclick
QVAR RediHaler
Serevent Diskus
Symbicort
terbutaline tablet
Theochron
theophylline
theophylline anhydrous
Wixela Inhub
Xolair
zafirlukast
zileuton ER

Blood pressure related

acebutolol
acetazolamide tablet
acetazolamide ER
aliskiren
amiloride
amiloride-HCTZ
amlodipine
amlodipine-benazepril
amlodipine-olmesartan
amlodipine-valsartan
amlodipine-valsartan-HCTZ

atenolol
atenolol-chlorthalidone
benazepril
benazepril-HCTZ
betaxolol tablet
bisoprolol
bisoprolol-HCTZ
bumetanide tablet
candesartan
candesartan-HCTZ
captopril
captopril-HCTZ
Cartia XT
carvedilol
carvedilol ER
chlorothiazide tablet
chlorthalidone
clonidine patch, tablet
diltiazem tablet
diltiazem 12hr ER
diltiazem 24hr ER
diltiazem 24hr ER (CD)
diltiazem 24hr ER (LA)
diltiazem 24hr ER (XR)
Dilt-XR

doxazosin
enalapril
enalapril-HCTZ
eprenone
eprosartan
felodipine ER
fosinopril
fosinopril-HCTZ
furosemide solution, tablet
guanfacine
hydralazine tablet
hydrochlorothiazide
indapamide
irbesartan
irbesartan-HCTZ
isradipine
labetalol tablet
lisinopril
lisinopril-HCTZ
losartan
losartan-HCTZ
Matzim LA
methazolamide
methyldopa

Blood pressure related continued

methyl dopa-HCTZ
 metolazone
 metoprolol tablet
 metoprolol ER-HCTZ
 metoprolol-HCTZ
 minoxidil tablet
 moexipril
 nadolol
 nicardipine capsule
 nifedipine
 nifedipine ER
 nimodipine
 nisoldipine
 olmesartan
 olmesartan-amlodipine-HCTZ
 olmesartan-HCTZ
 perindopril
 phenoxybenzamine
 pindolol
 prazosin
 propranolol tablet, solution
 propranolol ER
 propranolol-HCTZ
 quinapril
 quinapril-HCTZ
 ramipril
 Sorine
 sotalol tablet
 sotalol AF
 spironolactone
 spironolactone-HCTZ
 Taztia XT
 telmisartan
 telmisartan-amlodipine
 telmisartan-HCTZ
 terazosin
 timolol tablet
 torsemide
 trandolapril
 trandolapril-verapamil ER
 triamterene-HCTZ
 valsartan
 valsartan-HCTZ
 Vecamyl
 verapamil capsule, tablet
 verapamil ER
 verapamil ER PM
 verapamil SR

Blood thinner related

aspirin-dipyridamole ER
 Brilinta
 cilostazol
 clopidogrel
 dipyridamole tablet
 Eliquis
 Jantoven
 prasugrel
 warfarin
 Xarelto

Cholesterol related

amlodipine-atorvastatin
 atorvastatin
 cholestyramine
 cholestyramine light
 colessevelam
 colestipol
 ezetimibe
 ezetimibe-simvastatin
 fenofibrate
 fenofibric acid
 fluvastatin ER
 fluvastatin
 gemfibrozil
 lovastatin
 niacin 500mg tablet
 niacin ER tablet
 Niacor
 omega-3 acid ethyl esters
 pravastatin
 Prevalite
 rosuvastatin
 simvastatin
 Vascepa

Diabetes related

*Log in to the **myCigna** app or website, or check your plan materials, to learn more about how your plan covers diabetes-related preventive medications.*

acarbose
 Basaglar
 Bydureon
 Byetta
 Diabetic Supplies (i.e. lancets, syringes, urine test, alcohol pads)
 Farxiga
 glimepiride
 glipizide
 glipizide ER
 glipizide XL
 glipizide-metformin
 glyburide

glyburide micronized
 glyburide-metformin
 Glyxambi
 Humalog
 Humulin
 Insulin Lispro
 Janumet
 Janumet XR
 Januvia
 Jardiance
 Levemir
 metformin
 metformin ER 500mg, 750mg tablet
 miglitol
 nateglinide
 Ozempic
 pioglitazone
 pioglitazone-glimepiride
 pioglitazone-metformin
 repaglinide
 repaglinide-metformin
 Segluromet
 Soliqua 100-33
 Steglatro
 SymlinPen 120
 SymlinPen 60
 Synjardy
 Synjardy XR
 tolbutamide
 Tresiba
 Tresiba FlexTouch U-100
 Tresiba FlexTouch U-200
 Trulicity
 Victoza 2-pak
 Victoza 3-pak
 Xigduo XR
 Xultophy 100-3.6

Osteoporosis related

alendronate
 calcitonin-salmon
 etidronate
 Forteo
 ibandronate tablet
 raloxifene
 risedronate
 risedronate DR
 Tymlos

Prenatal vitamins

Your plan considers all prescription strength prenatal vitamins to be "preventive."

Check your drug list to see which tier your plan covers prenatal vitamins on.



Express Scripts Pharmacy

If you take a medication every day to treat an ongoing health condition, Express Scripts Pharmacy, our home delivery pharmacy, may be a convenient option for you. Express Scripts Pharmacy, which is a Cigna company, is one of the country's largest home delivery pharmacies.

Why choose home delivery?

- › **Convenience.** Don't waste time standing in line at the pharmacy. Express Scripts Pharmacy will ship your medication to you at no extra cost. And when you sign up for automatic refills,* it's even easier to stay on track with your important medications.
- › **Safe, private delivery.** Express Scripts Pharmacy's packaging is designed to protect your privacy and stand up to bad weather.
- › **Easy refills.** Fill up to a 90-day supply of your medication at one time, so you fill less often.
- › **Free refill reminders.** Express Scripts Pharmacy will send you refill reminders** to help make sure you don't miss a dose.
- › **Track your orders.** You can refill your prescription and track your orders online or from your mobile phone.
- › **24/7 access to licensed pharmacists.** Express Scripts' pharmacists are trained to provide specialized support for conditions like diabetes, high blood pressure and high cholesterol.
- › **Payment assistance.** If you need help paying for your medication, Express Scripts Pharmacy offers an Extended Payment Plan, which gives you the option to split your bill into three smaller payments.

Use the myCigna® app or website. Connect to your Express Scripts online account portal, and more.

- › **Compare your medication costs before you place your order.** You can use the "Price a Medication" feature to find out how much your medication will cost you to fill at home delivery compared to an in-network retail pharmacy.***
- › **See which medications your plan covers and search for lower-cost alternatives** (if available).
- › **Connect to your Express Scripts online account portal to manage your medications.**
 - Refill your prescriptions and/or request a new prescription
 - Check your order status and track shipments so you know when you should get your medication
 - Sign up for Express Scripts' automatic refills and/or auto renewal program
 - See your order and medication histories
 - Update your profile information, like your contact and payment information, what allergies and/or health conditions you have, and how you'd like Express Scripts Pharmacy to contact you



Two easy ways to place a new order

1. **Electronically:** For fastest service, ask your doctor's office to send your prescription electronically to Express Scripts Home Delivery, NCPDP 2623735.
2. **By fax:** Have your doctor's office call 888.327.9791 to get a Fax Order Form.

For current prescriptions – it's easy to move them to Express Scripts Pharmacy.

Just call 800.835.3784 and have your doctor's contact information and prescription medication name(s) and dosage(s) ready. Express Scripts Pharmacy will do the rest.

Questions?

We're available anytime, 24/7/365.

- › Talk to customer service about a benefit question: Call the number on your Cigna ID card
- › You can also chat with us online on the myCigna website, Monday–Friday, 9:00 a.m.–8:00 p.m. EST.

800.835.3784



Place an order



Talk to customer service about an order



Talk to a pharmacist about your medication

Telemedicine

- Accessed through app MD Live
- Medical & Behavioral Mental Health Virtual Care
- With a licensed NH provider
- Under Cigna plan should cost \$55 Copay
- 866-726-3171 or www.mycigna.com

MDLIVE

Medical virtual care

Board-certified doctors and pediatricians can diagnose, treat and prescribe most medications for minor medical conditions, such as:

- | | |
|----------------|----------------------------|
| › Acne | › Joint aches |
| › Allergies | › Nausea |
| › Asthma | › Pink eye |
| › Bronchitis | › Rashes |
| › Cold and flu | › Respiratory infections |
| › Constipation | › Shingles |
| › Diarrhea | › Sinus infections |
| › Earaches | › Skin infections |
| › Fever | › Sore throats |
| › Headache | › Urinary tract infections |
| › Infections | |
| › Insect bites | |

Behavioral/mental health virtual care

Licensed counselors and psychiatrists can diagnose, treat and prescribe most medications for nonemergency behavioral/mental health conditions, such as:

- | | |
|---------------------------|------------------------------------|
| › Addictions | › Postpartum depression |
| › Bipolar disorders | › Relationship and marriage issues |
| › Child/adolescent issues | › Stress |
| › Depression | › Trauma/PTSD |
| › Eating disorders | › Women's issues |
| › Grief/loss | |
| › Life changes | |
| › Men's issues | |
| › Panic disorders | |
| › Parenting issues | |

Telehealth

- Virtual care with your (local?) provider(s)
- Has gained popularity during the Covid-19 pandemic
- Charges subject to normal cost sharing – under your Cigna plan, that means charges are subject to your deductible



W.S. Badger's health insurance plan operates on Cigna's Open Access Plus network

Primary care physician (PCP) – You can decide to choose a PCP as your personal doctor to help coordinate care and act as a personal health advocate. **It's recommended but not required.**


No-referral specialist care – If you need to see a specialist, you don't need a referral to see an in-network doctor.

You may need precertification for hospital stays and some types of outpatient care. Use in-network health care professionals, and there's no paperwork to fill out.

Emergency and urgent care – When you need care, you have coverage.

Out-of-network – If you choose to see a doctor who is not in the network, you will not have coverage except in emergencies.

To find your providers: <https://www.cigna.com>

 Find a Doctor, Dentist or Facility



Employer or
School

OAP

Open Access Plus, OA plus, Choice Fund OA Plus

Open Access Plus, OA plus, Choice Fund OA Plus WITH CareLink

W.S. Badger has generously established a Health Reimbursement Account (HRA) to minimize your exposure to the costs of using your insurance. **Beginning 10/1/20, Cigna will manage the HRA.**

Coverage Level	EE Only	EE Plus
Plan Deductible	\$5,000	\$10,000
Employee Responsibility	\$1,400	\$2,800
HRA Pays Provider Directly	\$1,401 - \$5,000	\$2,801-\$10,000
Cigna Pays	\$5,001+	\$10,001+

If you are enrolled in a Badger Harvard Pilgrim plan through 9/30/20 and have incurred deductible expenses since January 2020, Cigna will give you deductible credit for those expenses.

When you have medical services that are subject to the deductible you will pay the first \$1,400 (or \$2,800 if you have dependents on your plan). Once you incur \$1,401/\$2,801 in deductible expenses, the HRA* will pay until you've reached \$5,001/\$10,001, when Cigna will cover in-network eligible services in full.

***NEW beginning 10/1/20, the HRA will pay providers directly for services. You will **no longer** pay providers for amounts \$1401-\$5000.**

For Rx Reimbursements:

- You will pay for all prescription drugs with personal funds/credit card**
- Once you have reached \$1400 in medical services & Rx you can submit for reimbursement through the HRA
 - Through Portal: [Mycigna.com](https://mycigna.com)
 - Fax: 303-729-7437
 - Mail to: Cigna, PO Box 188061, Chattanooga TN 37422



Health Insurance Employee Cost

W.S. Badger will pay 70% of the cost of health insurance coverage for employees and their dependents.

For coverage 10/1/20 – 9/30/21 your bi-weekly payroll deductions will be:

Coverage Level	Employee Bi-Weekly Payroll Deduction
Employee Only	\$68.14
Employee plus Child(ren)	\$137.66
Employee plus Spouse/Partner	\$151.18
Family	\$207.20



Cigna's plan is HSA-eligible, which means you might be able to establish and fund a Health Savings Account (HSA).

HSAs are tripled tax-advantaged personally owned savings accounts where contributions are tax deductible, growth is tax free, and distributions to pay for qualified medical expenses (including vision and dental) for yourself and your tax dependents*, are tax-free.

In order to make or receive HSA contributions, you may NOT have "first dollar coverage" for medical services up to \$1400 or \$2800. This means you may NOT be enrolled in Medicare, a partner's plan, full purpose FSA, VA plan, etc.

*Most domestic partners are NOT tax dependents, and therefore while they can be enrolled in your health insurance plan, you may NOT use your HSA funds for their expenses.

Mascoma Bank allows Badgers to establish fee-free HSA accounts.

Ways to contribute to your HSA:

- Badger Wellness Fund
- Payroll Deduction
- Direct contributions from personal savings, checking, etc
- As gifts from others on your behalf

Max HSA Contribution	2020	2021
Individual Coverage	\$3,550	\$3,600
Family Coverage	\$7,100	\$7,200
Age 55 Additional	\$1,000	\$1,000



Flexible Spending Accounts

W.S. Badger offers both health (FSA) and dependent care (DCA) flexible spending accounts. Employees may contribute pre-tax dollars into these accounts to help offset eligible medical expenses or dependent care expenses. Beginning in 2020, these plans will be administered by American Benefits Group www.amben.com.

The Health Care FSA is available to all regular full-time or part-time employees, whether or not they participate in Badger's health insurance plan.

Health Care FSA

Funds from a health care FSA can be used for qualified expenses including medical, dental, vision, deductibles*, co-payments and coinsurance. For a full list of qualified expenses allowed by the IRS, see Publication 502 (www.irs.gov/publications/p502).

If you fund an HSA account, you will be eligible for a Limited Purpose FSA which you can use for vision and dental services only.

A debit card will be issued to all participants enrolled in the medical FSA. In 2020 the maximum allowable contribution amount is \$2,750.

With an FSA, the entire elected amount is available on the first day of the health plan year. Plan Year 10/1/20 – 9/30/21

Dependent Care FSA

A dependent care FSA allows employees to set aside pre-tax dollars to pay for qualified dependent care expenses. Funds can be used to pay for day care, preschool, elderly care or other dependent care. To qualify for a dependent care FSA, the IRS requires that the dependent care is necessary for you or your spouse to work, look for work or attend school full-time.

In 2020 the maximum amount you may contribute to the dependent care FSA is \$5,000* (if single or married & filing jointly) or \$2,500* (if married & filing separately)


Please note that the DCA is 100% employee funded and is only available to use as monetary contributions are made. Plan year 1/1/21-12/31/21

Visit www.amben.com for more information including tools to calculate your tax benefits and election amount estimators.

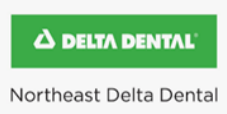
For enrollment forms, direct deposit forms, please contact Human Resources, visit www.amben.com, or call American Benefits Group at 855-294-7010.

W. S. Badger offers one dental plan through Delta Dental.
Summary of Benefits:

Office Visit Copayment: None			
Diagnostic / Preventive (Coverage A)	Basic (Coverage B)	Major (Coverage C)	Orthodontics (Coverage D)
No Deductible	\$75/\$225 One-time Deductible per Person/Family		No Deductible
DIAGNOSTIC: Oral evaluations twice in a 12-month period, this includes periodic, limited, problem-focused, and comprehensive evaluations Bitewing X-Rays once in a 12-month period X-Rays of individual teeth as necessary Brush biopsy once in a 12-month period PREVENTIVE: Cleanings twice in a 12-month period Fluoride twice in a 12-month period to age 15 Sealant application to permanent molars, once in a lifetime per tooth, for children to age 15	RESTORATIVE: Amalgam (silver) fillings; Composite (white) fillings ORAL SURGERY: Routine extractions ENDODONTICS: Root canal therapy PERIODONTICS: Treatment of gum disease Periodontal Cleaning (Maintenance procedures) <i>Note: Only two cleanings are covered in a 12-month period. These may be any combination of routine (Coverage A) or periodontal (Coverage B).</i> Space maintainers to age 15 Full-mouth/panoramic X-rays once in a 5-year period EMERGENCY PALLIATIVE TREATMENT	PROSTHODONTICS: Removable and fixed partial dentures (bridge); complete dentures Rebase and reline (dentures) Crowns Onlays Implants DENTURE REPAIR: Repair of removable denture to its original condition ORAL SURGERY: Complex extractions and other surgical procedures CROWN LENGTHENING: Clinical crown lengthening once in a lifetime per site	ORTHODONTICS: Correction of malposed (crooked) teeth for adults and dependent children
Delta Dental Pays 100% No Waiting Period	Delta Dental Pays 70% No Waiting Period	Delta Dental Pays 50% After a 6-Month Waiting Period*	Delta Dental Pays 50% After a 6-Month Waiting Period*
Calendar Year Maximum: \$1,500 up to \$3,000 per Person with Double-Up Max SM Health through Oral Wellness* program included (please see reverse)			Lifetime Maximum: \$1,250 per Person

	W.S. Badger Dental Insurance Cost	
Coverage Level	Total Monthly Premium	Twice Monthly Employee Payroll Deduction
Employee	\$49.23	\$24.62
Employee/Spouse	\$90.07	\$45.04
Employee/Family	\$156.33	\$78.17
Employee/Child	\$90.07	\$45.04
Employee/Children	\$156.33	\$78.17

Delta Dental Provider Lookup: <https://nedelta.com/Providers>



Dental Insurance

Northeast Delta Dental Double-Up MaxSM Carryover Benefit

Promoting Regular Care

Northeast Delta Dental offers a Double-Up Max carryover benefit feature on select dental programs. With this feature, enrollees may double their annual maximum by accumulating \$250 a year in additional benefits for use in future coverage periods. When a dental procedure is needed that costs more than the annual maximum allows, accrued carryover benefit dollars can help make up the difference.

To Qualify

- Northeast Delta Dental must have **paid** a claim for either an oral exam or a cleaning during a Calendar Year. If enrollees don't receive one of these services, they will not be eligible to accumulate dollars for future use. This puts an emphasis on prevention.
- An enrollee's **paid** claims during the Calendar Year cannot exceed a threshold of \$500.

Guidelines

- Your dental plan must have an annual maximum based on a Calendar Year (January through December).
- Accumulated amounts may only be used after the current annual maximum has been exhausted.
- Carryover benefit amounts cannot be used toward lifetime orthodontic benefits.
- The total accumulated carryover amount cannot exceed the amount of your plan's regular annual maximum.
- If your group is effective in the carryover program between January 1 and June 30, enrollees will be eligible to begin qualifying immediately for carryover benefit dollars to be used in the following year; if your group is effective between July 1 and December 31, enrollees will be eligible to begin qualifying during the next Calendar Year for carryover benefit dollars that can be used in the subsequent year.

How it Works

The Double-Up Max feature allows enrollees to accumulate additional benefit amounts to use toward future dental expenses. The following chart is an example of how it would work for an enrollee with the assumed claims shown.

(Please note: This is only an example. Your Annual Maximum may be different than the example shown.)

	Year 1	Year 2	Year 3	Year 4	Year 5
Annual maximum amount	\$1,000	\$1,000	\$1,000	\$1,000**	\$1,000
Carryover benefit amount from previous years	\$0	\$250	\$250	\$500	\$100
Benefit dollars available	\$1,000	\$1,250	\$1,250	\$1,500	\$1,100
Enrollee's total claims paid*	\$300 (less than \$500)*	\$750 (over \$500)*	\$200 (less than \$500)*	\$1,400 (over \$500)*	\$425 (less than \$500)*
Oral exam or cleaning during year	Yes	Yes	Yes	Yes	Yes
Carryover benefit amount allowed in next Calendar Year	\$250	\$0	\$250	\$0	\$250
Accumulated carryover dollars available in next Calendar Year	\$250	\$250	\$500	\$100	\$350
Accumulated carryover dollars used	\$0	\$0	\$0	\$400**	\$0

*To receive carryover benefit dollars in the next Calendar Year, paid claims during the current Calendar Year cannot exceed a \$500 threshold.
**In year 4, total claims paid were greater than \$1,000, therefore \$400 out of the \$500 accumulated dollars available was used.

Go Green! with Northeast Delta Dental's Benefit Lookup Site

At Northeast Delta Dental, we strive daily to give you the best experience possible. That includes investments in technology to give you access to the information and tools you need, all while helping reduce paper waste and our carbon footprint.

Welcome to the Northeast Delta Dental Benefit Lookup site! Now you can enjoy 24/7 access to your benefit and claim information, print additional identification cards, read your benefit booklet and Explanation of Benefits (EOB), download our mobile app, register for the Health through Oral Wellness® (HOW®) program, and so much more—all when it's convenient for you!

Registration is simple:

- Go to NortheastDeltaDental.com and click on **PATIENTS**
- Click on **REGISTER HERE** under Benefit Lookup login
- Complete the three-step registration process

Note: You will need your Subscriber ID number (found on your ID card or by calling Customer Service at 1-800-832-5700).

Visit Northeast Delta Dental's website at NortheastDeltaDental.com for helpful information.



Finding a dentist in your area is easy!

Click **Find a Dentist** in the **Patients** section of our website, enter some general information about your location and network type, click **Search**, and a list of dentists serving your area will be displayed. Note: If you are enrolled in a PPO plus Premier Program, please be sure to search both networks.

Stretch your annual maximum dollars!

If your Northeast Delta Dental plan includes our PPO network, and if you are looking for ways to save money on your dental care and lower your out-of-pocket dental expenses, consider looking for a Northeast Delta Dental PPO dentist for your care



Health through Oral Wellness® (HOW®)

Health through Oral Wellness is a program designed to promote better oral health and overall health for Northeast Delta Dental Members. HOW is all about YOU because it's based on your own specific oral health risks and needs. Best of all, it's secure, confidential, and absolutely FREE.



- 1. REGISTER** - Go to HealthThroughOralWellness.com and click on "Register Now"
- 2. KNOW YOUR SCORE** - After you register, please take the free oral health risk assessment by clicking on "Free Assessment" in the **Know Your Score** section of the website
- 3. SHARE YOUR SCORE WITH YOUR DENTIST**

The next step is to share your results with your dentist at your next dental visit

- Your dentist can discuss your results with you and perform a clinical version of the assessment
- Based on your risk, as shown on your clinical assessment, you may be eligible for additional preventive benefits at no cost if your employer participates in the HOW program.*

*Additional preventive benefits are subject to the provisions of your Northeast Delta Dental policy. Only the clinical risk assessment performed by your dentist can determine your eligibility for additional preventive benefits.

EyeMed Vision Discount Program

Our vision discount program is available free to all Northeast Delta Dental subscribers and their dependents. Great Savings – Up to 35% off eyewear. Choose from any available frame, including quality name-brand products like Brooks Brothers®, Ann Klein®, Vogue®, and many more at provider locations.



Learn more at NortheastDeltaDental.com or from our Customer Service Representatives at 1-800-832-5700.



Badger Wellness Fund

W.S. Badger funds and administers our own general health and wellness reimbursement plan. The Badger Wellness Fund reimburses for both qualified and specific non-qualified expenses used to maintain good health.

Total available Wellness Fund dollars for full-time, regular employees for the October 1, 2020 – September 30, 2021 plan year is \$1,000. Part-time employees receive a prorated amount.

Once a year, at open enrollment, employees may choose to contribute money from their Wellness Funds into their H.S.A. Employees may elect to contribute any portion of their wellness funds (up to \$1,000) but are unable to change their decision throughout the year. This one-time lump sum employer funding is tax benefited.

With money not contributed to a Health Savings Account:

- Reimbursement is a taxable benefit, paid to you in your biweekly payroll check. Your balance is prorated if you become eligible after October 1.
- Funds not spent in 2019-20 do not roll over to the plan next year.
- Expenses incurred by dependent family members are eligible for reimbursement.
- You can use your Wellness Fund reimbursement for items such as athletic equipment (ie, a bicycle or skis), a fitness center membership or dance classes for your child. If you are enrolled in a medical plan other than Badger's, you could use Wellness Funds to reimburse yourself for out-of-pocket medical expenses like co-pays and deductibles, or for vision or dental care.



How do I enroll?

Enrollment is automatic. If you are eligible on the 1st day of the new plan year, October 1, you're automatically enrolled. There is no enrollment application.

New, regular employees become eligible on the 1st day of the month following the 30th day of employment.

Additional information about the Badger Wellness Fund and reimbursement forms are available from Human Resources or in Badger share drive at:

S:\Administration\Human Resources\1. HR Public\3. EMPLOYEE BENEFITS INFO.

Life, AD&D and Disability Insurance can play an important role in reducing financial stress when a family is faced with the pre-mature death or disability of a wage-earner. To help employees during critical times of need, through Lincoln Financial Group, Badger provides employer paid Life Insurance, Short Term Disability and Long Term Disability Insurance.

Basic Life AD&D Insurance

(100% Employer Paid)

- Eligibility is the first of the month following 30 days of employment for employees who work 20 hours or more per week.
- Eligible employees are automatically enrolled in Basic Life AD&D Insurance
- Coverage is 1x annual earnings to a maximum of \$150,000
- Benefits are reduced by 65% at age 65; 50% at age 70; 35% at age 75

Short Term Disability Insurance (STD)

(100% Employer Paid)

- Eligibility is the first of the month following 30 days of employment for employees who work 20 hours or more per week
- Eligible employees are automatically enrolled in Short Term Disability Insurance
- Coverage is 60% of pre-disability weekly earnings to a maximum of \$2,000 per week
- Benefits begin on the 1st day of a disabling injury/accident and on the 8th day of a disabling illness
- The maximum benefit period is up to 13 weeks

Long Term Disability Insurance (LTD)

(100% Employer Paid)

- Eligibility is the first of the month following 30 days of employment for employees who work 20 hours or more per week
- Eligible employees are automatically enrolled in Long Term Disability Insurance
- Coverage is 60% of pre-disability weekly earnings to a maximum of \$2,000 per week
- Benefits begin on the 1st day of a disabling injury/accident and on the 8th day of a disabling illness
- The maximum benefit period is up to 13 weeks

Review your beneficiaries and visit lfg.com or see HR to update if needed.

Employee Assistance Program

*EmployeeConnect*SM offers professional, confidential services to help you and your loved ones improve your quality of life.



In-person guidance

Some matters are best resolved by meeting with a professional in person. With *EmployeeConnect*SM, you and your family get:

- In-person help for short-term issues (up to five sessions with a counselor per person, per issue, per year)
- In-person consultations with network lawyers, including one free 30-minute in-person consultation per legal issue, and **25% off** subsequent meetings



Unlimited 24/7 assistance

You and your family can access the following services anytime — online, on the mobile app or with a toll-free call:

- Information and referrals on family matters, such as child and elder care, pet care, vacation planning, moving, car buying, college planning and more
- Legal information and referrals for family law, estate planning, consumer and civil law
- Financial guidance on household budgeting and short- and long-term planning



Online resources

*EmployeeConnect*SM offers a wide range of information and resources you can research and access on your own. Expert advice and support tools are just a click away when you visit GuidanceResources.com or download the *GuidanceNow*SM mobile app. You'll find:

- Articles and tutorials
- Videos
- Interactive tools, including financial calculators, budgeting worksheets and more

*EmployeeConnect*SM

EMPLOYEE ASSISTANCE PROGRAM SERVICES

Confidential help 24 hours a day, seven days a week for employees and their family members. Get help with:

- | | | |
|--------------|-------------|-----------------|
| ▪ Family | ▪ Emotional | ▪ Relationships |
| ▪ Parenting | ▪ Legal | ▪ Stress |
| ▪ Addictions | ▪ Financial | |

For more information about the program, visit GuidanceResources.com, download the *GuidanceNow*SM mobile app or call 888-628-4824.

GuidanceResources.com login credentials:

Username: LFGSupport Password: LFGSupport1

No matter how well you plan, unexpected challenges will arise. When they do, help and support are nearby—thanks to *LifeKeys*® services from Lincoln Financial Group.

LifeKeys® services include:



Save money on shopping and entertainment

You have access to GuidanceResources® Online that includes 24/7 access to the Working Advantage discount network. You can save up to 60% on a variety of products and services, such as electronics, health and fitness, Broadway shows and much more. Also available in the GuidanceNow mobile app.



Help with important life matters

You'll find supportive tools and advice on a wide range of topics — including legal, financial, family and career on GuidanceResources® Online. It's one way to stay "in the know" on matters that impact your personal and professional life.



Protection against identity theft

Identity theft is widespread, and everyone is vulnerable. LifeKeys includes an online resource for the information you need to recognize and prevent identity theft — and restore your good name.



Online will preparation

Creating a will allows you to make vital decisions ahead of time — such as naming a guardian for your children or designating who will receive your property and assets after you pass away. Without a will, state officials will distribute your estate. EstateGuidance® offers you a quick and easy way to create and execute a will so you can rest easy knowing you've planned ahead for your family.



Guidance and support for your beneficiaries

LifeKeys' comprehensive program offers resources to help your loved ones address a range of common concerns. Services include grief counseling, advice on financial and legal matters and help coping with the occasional challenges of day-to-day life.



For your beneficiaries: help, guidance and support at a difficult time

The emotional impact of losing a loved one can be deep and long-lasting. All too often, financial or legal issues can add to the stress. *LifeKeys*® services can be a welcome resource for your beneficiaries.

These services are available for up to one year after a loss. Your beneficiaries will have access to six in-person sessions for grief counseling, legal, or financial information and unlimited phone counseling.

Grief counseling—advice, information and referrals on:

- Grief and loss
- Stress, anxiety and depression
- Memorial planning information
- Concerns about children and teens

Legal support—quick access to legal information on:

- Estate and probate law
- Real estate transactions
- Social Security survivor and child benefits
- Important documents your beneficiaries need

Financial services—online resources or advice from financial specialists on:

- Estate planning
- Budgeting
- Overcoming debt
- Bankruptcy
- Investments

Help with everyday life—comprehensive information on:

- Planning a memorial service
- Finding child care or elder care
- Financing your home
- Moving and relocation
- Making major purchases



It's easy to access LifeKeys® services. Just visit GuidanceResources.com, download the GuidanceNow mobile app, or call 1-855-891-3684. (First-time user: Enter Web ID LifeKeys)



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