

2026

Benefits Guide

An overview of the wide array of benefits provided by Christensen Group to help you enjoy increased well-being and financial security.

These benefits are effective on January 01, 2026.



Benefits Offered and Eligibility

Christensen Group is proud to offer a comprehensive benefits package for you and your family. This program is designed to take great care of you when you need it. Make sure to explore your options to help you make the selections that best meet your needs.

Benefits Offered

Throughout this booklet we will cover the following employee benefits being offered by Christensen Group.

Medical Insurance
Health Savings Account (HSA)
Flexible Spending Account (FSA)
Dependent Care Account (DCA)
Dental Insurance
Vision Insurance
Basic Life Insurance
Voluntary Life Insurance
Short Term Disability Insurance
Long Term Disability Insurance
Accident
Critical Illness
Hospital
Legal & ID Shield Insurance
Pet Insurance
FEDlogic
401(k) Plans
Other Employee Benefits

Enrollment and Coverage Change Notice

For most benefit plans, enrollment and changes to existing coverage (other than as a new hire or newly benefit eligible employee within your eligibility period) are permitted only during the annual open enrollment period or if you have a qualifying life event.

- Open enrollment occurs in November, for a January 1 effective date.
- Qualifying life events include loss of other coverage, job status change, marriage, divorce, legal separation, birth, adoption, ceasing to be a dependent child, and other events as prescribed by law. Please notify Human Resources of any qualifying event within 30 days.

Eligible members

The following members are eligible to receive benefits during the upcoming plan year:

All regular, full-time employees scheduled to work 30 hours or more and their eligible dependents are benefit eligible.

Employee
Legal Married Spouse
Legal Children
Stepchildren

When your benefits begin (New Hires)

All benefits begin on the first of the month following your first day of employment.

Important Contacts

Christensen Group provides an array of benefits that can help you enjoy increased well-being, deal with an unexpected illness or accident, build and protect your financial security, balance your personal and professional life and meet everyday needs. These benefits are affordable, comprehensive and competitive.

The table below summarizes the benefits available to eligible employees and their dependents. These benefits are described in greater detail in this booklet.

QUESTIONS?

If you have any questions about your benefit options, please contact:

Carolyn Evans
HR Specialist
(952) 653-0088
CEvans@christensengroup.com

Meghan Brown
HR Director
(952) 653-0095
MBrown@christensengroup.com

Coverage	Carrier	Group #	Phone	Website
Medical	HealthEZ	CHRS625	(844) 617-1495	www.christensengroubenefits.com
Health Savings Account (HSA)	Alerus	-	(800) 279-3200	www.alerus.com
Flexible Spending Account (FSA)	Alerus	-	(800) 279-3200	www.alerus.com
Dependent Care Account (DCA)	Alerus	-	(800) 279-3200	www.alerus.com
Wellness Spending Account	BRI	Christensengroup (Company Code)	(800) 473-9595	Participantservices@benefitresource.com
Dental	Delta Dental of MN	100478	(800) 448-3815	www.deltadentalmn.org
Vision	Superior	31417	(800) 507-3800	www.superiorvision.com
Basic Life	UNUM	935147	(866) 679-3054	www.unum.com
Voluntary Life	Reliance Standard	GL675375&VAR658451	(888) 451-6861	See Human Resources
Short Term Disability and Long-Term Disability	UNUM	935147	(866) 679-3054	www.unum.com
Accident, Critical Illness, Hospital	UNUM	TBD	(866) 679-3054	www.unum.com
Legal & ID Shield	Legal Shield	-	(800) 654-7757	www.legalshield.com
Pet Insurance	Nationwide	6200	(877) 669-6877	www.petinsurance.com
Advocacy Service – Federal and State Benefit Options	FEDlogic	Employee Access Code: chri25	(877) 837-4196	www.fedlogicgroup.com
401(k)	Empower	-	(800) 338-4015	www.empowermyretirement.com

Medical Plan

Preventive Care

Understanding the full value of covered benefits allows you to take responsibility for maintaining good health and incorporate healthy habits into your lifestyle. Some examples include getting regular physical examinations, mammograms and immunizations.

Through the plan offered by Christensen Group all covered employees and dependents are eligible to receive routine wellness services like these, at no cost; all copays, coinsurance, and deductibles are waived.

The US Preventive Services Task Force maintains a regular list of recommended services that all Affordable Care Act (i.e., Health Care Reform) compliant insurance plans should cover at 100% for in-network providers.

The following is a list of common services that are included in the plans offered this year.



Update on health care reform

Effective January 1, 2019, the Tax Cuts and Jobs Act (TCJA) repealed the individual mandate to maintain health insurance or be responsible for a "shared responsibility payment". We hope to keep offering these benefits as a valuable part of your total compensation in the future. However, because we offer you coverage that satisfies all the health reform requirements, you will not qualify for any federal assistance to purchase an individual or family policy on the open market (the "marketplace").



Covered preventive care services

- Routine Physical Exam
- Well Baby and Childcare
- Immunizations
- Screening for Gestational Diabetes
- Obesity Screening and Counseling
- Routine Digital Rectal Exam
- Routine Colonoscopy
- Routine Colorectal Cancer Screening
- Routine Prostate Test
- Routine Lab Procedures
- Routine Mammograms
- Routine Pap Smear
- Smoking Cessation Programs
- Health Education/Counseling Services
- Health Counseling for STDs and HIV
- Testing for HPV and HIV
- Screening and Counseling for Domestic Violence

Medical Plan

Summary of Plan Options



The following plans are your medical insurance options for the upcoming year.

In Network	Plan Option 1: \$3,400-80% HSA + Prev Rx America's PPO/Aetna	Plan Option 2: \$5,250-80% HSA + Prev Rx America's PPO/Aetna	Plan Option 3: \$3,000-\$40 Copay America's PPO/Aetna
Deductibles (Single / Family) Calendar Year	\$3,400 / \$6,400	\$5,250 / \$10,000	\$3,000 / \$9,000
Out-of-Pocket Maximum (Single / Family) Calendar Year	\$6,400 / \$12,800	\$5,950 / \$11,900	\$5,000 / \$10,000
Health Savings Account (HSA)	HSA qualified	HSA qualified	Not HSA qualified
Preventive Care	100% coverage	100% coverage	100% coverage
Primary Care Visit	Deductible then 80% coverage	Deductible then 80% coverage	\$40 copay
Specialist Visit	Deductible then 80% coverage	Deductible then 80% coverage	\$40 copay
Virtual Care E-Visit	Deductible then 80% coverage	Deductible then 80% coverage	\$15 copay
Inpatient & Outpatient	Deductible then 80% coverage	Deductible then 80% coverage	Deductible then 80% coverage
Emergency Room	Deductible then 80% coverage	Deductible then 80% coverage	Deductible then 80% coverage
Urgent Care	Deductible then 80% coverage	Deductible then 80% coverage	\$40 copay
Pharmacy / RX (30 Day Supply)	Generic: Deductible then 80% coverage	Generic: Deductible then 80% coverage	Generic: \$12 copay
90-Day supply through retail is 3x 30-Day Copay	Preferred brand: Deductible then 80% coverage	Preferred brand: Deductible then 80% coverage	Preferred brand: \$50 copay
90-Day supply through mail order is 2.5x 30-Day Copay	Non-Preferred brand: Deductible then 80% coverage	Non-Preferred brand: Deductible then 80% coverage	Non-Preferred brand: \$90 copay
	Some preventive drugs are covered at no charge	Some preventive drugs are covered at no charge	Some preventive drugs are covered at no charge

ACTION REQUIRED:

Christensen Group will be requiring all employees enrolling in the 2026 medical plan to complete a preventative care visit (physical) from their primary care provider or you will be charged a \$150 surcharge per month. This is only a requirement for employees – not your spouse or children.

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Christensen Group’s Monthly Cost

The following costs are what Christensen Group is paying for your medical insurance options for the upcoming year.

Tier	Average CG Monthly Cost
Employee	\$829.14
Employee + Spouse	\$1,404.97
Employee + Child(ren)	\$1,273.17
Employee + Family	\$1,656.26

Spousal surcharge: \$400 per month charge if your spouse is on the CG plan when they could be on their own employer's plan.

Medical Plan

Summary of Plan Costs



The following costs are for your medical insurance options for the upcoming year.

Plan Option 1: \$3,400-80% HSA + Prev Rx	
Employee Contribution Monthly	
Employee	\$138.65
Employee + Spouse	\$544.11
Employee + Child(ren)	\$532.15
Employee + Family	\$956.67
Plan Option 2: \$5,250-80% HSA + Prev Rx	
Employee Contribution Monthly	
Employee	\$21.53
Employee + Spouse	\$328.85
Employee + Child(ren)	\$239.17
Employee + Family	\$637.98
Plan Option 3: \$3,000-\$40 Copay	
Employee Contribution Monthly	
Employee	\$263.08
Employee + Spouse	\$717.50
Employee + Child(ren)	\$687.62
Employee + Family	\$1,315.42

Medical Plan

HealthEZ Networks

Your medical network is America's PPO for members in Minnesota.



Your travel network is Aetna for members traveling outside of Minnesota.



Your medical and travel network is Aetna for members residing in all other states.



What is a medical network?

Your medical network is a group of healthcare providers. It includes doctors, specialists, hospitals, surgical centers and other facilities. These healthcare providers offer services at a lower rate than out-of-network providers, which you will see reflected on your statements as a discount.

What if I go outside of my medical network?

There may be times when you decide to visit a doctor or clinic that is out-of-network. The costs for these visits and services are often higher than seeing doctors that are in-network. You will be responsible for paying the difference between the provider's full charge and the amount your health insurance plan pays. This is called balance billing.

How do I know if my provider is in-network?

Please visit your dedicated Benefit Website and click "*Find Care.*"

We have a dedicated website where you can find information related to the medical plans.

<https://www.ChristensenGroupBenefits.com>

Medical Plan

HealthEZ Resources

24/7 Helpline (800) 719-4814

Help is just a phone call away.

Get free confidential help today. 24 hours a day, 7 days a week, 365 days a year!

The HealthEZ Helpline is here to answer your questions and offer advice. Access our team for guidance on:

- Health symptoms and concerns
- Medications and side effects
- Reliable self-care home treatments
- When to go to the doctor
- When to go to urgent care
- When to go the emergency room
- Local physician and hospital resources
- Wellness information

International Travel

What do I need to know? How to handle medical expenses when traveling abroad

Traveling abroad doesn't always go according to plan. Whether you're planning to travel internationally, or if your last trip left you with a medical expense. There are steps you can take to get submit those expenses. Call HealthEZ at the number listed on the back of your ID card.

Medical Infusion Carve-Out (MICO) Program

MICO is a program designed to reduce the costs of high-cost specialty infusions by leveraging manufacturer's assistance programs, specialty pharmacy dispensing, and a cost-plus reimbursement model.

If you or a covered dependent is prescribed certain high-cost infusion drugs, an advocate will reach out to you to arrange for you to get the drug at significant savings to the plan.

This is a general outline of value-added services; they are subject to be amended or changed based carrier agreements.

Please see your member materials from HealthEZ for a full description of value-added services included with your specific medical plan coverage.

HealthEZ

Manage your health benefits without all the headaches

Download the free myHealthEZ app to view your benefits, manage and pay bills, locate care providers near you, and access your digital insurance card-right from your phone. Scan the QR code with your device's camera to download the myHealthEZ app and put the power of hassle-free benefits management at your fingertips.



Medical Plan

HealthEZ Resources



Care Navigation and Advocacy (800) 668-3893

Navigating the health care system can be challenging, we are here to make it easy!

Your health advocate is a trained medical professional and vital part of your health care team. We are here to help you and your family at all stages of life whether you have a chronic illness requiring extensive treatment, need surgical intervention, or having a baby – we are here to help you navigate through your healthcare journey making sure all your health care needs are being met while providing the very best healthcare possible.

Benefits	• Doctor appointments • Prior Authorizations • One point of contact • In network provider assistance • 24-hour Helpline • ER, Urgent care, Telehealth guidance
Continuing Care	• Referrals to internal programs, ex: BYB, Livongo, Case Management • Discharge planning • Preventative care accountability • Durable medical equipment • Assistance with home-based care • Follow up care assistance
Understanding your Health	• Education and resources • Understanding your diagnosis • Top Doc referrals • Second opinion assistance

Maternity Support (800) 808-4848

Honest information. Healthy babies. Happy moms.

Our Boost Your Baby program matches moms-to-be with a Mommy Mentor to support a healthy pregnancy. These mentors:

- Check in with moms once a month throughout the pregnancy and are always available for questions.
- Advise on mental health during pregnancy and post-partum.
- Assist with anything from pregnancy advice to information on in-network doctors and hospitals.

Care Management (612) 382-4407 or helpline@healthez.com

If you require medical services like a surgery, hospital stay or are diagnosed with a complex medical condition, you may receive a call, text or email from someone on the HealthEZ care management team.

The nurse is there to help you:

- Understand your treatment options
- Coordination of services among your doctors
- Make sure you have everything you need for a quick recovery with the right care

Livongo

Good for Your Health and Your Wallet

Livongo helps you stay on top of your health. Join today and get connected device, personalized guidance, on-demand coaching, an easy-to use app, and more for helping managing:

- Pre-diabetes
- Diabetes
- Hypertension

This program is offered at no cost to you and your family members enrolled on your company's medical plan.

This is a general outline of value-added services; they are subject to be amended or changed based carrier agreements.
Please see your member materials from HealthEZ for a full description of value-added services included with your specific medical plan coverage.

Medical Plan

HealthEZ Resources



EZchoice

How much will it cost to see the doctor? Know before you go.

A simple online search and detailed results can help save you money.

You will know what you owe before you are sent a bill.

EZchoice makes provider choice easy and costs transparent so you can be confident you're not overspending on care.

- Shop 500 common services for cost.*
- Integrated within our app for the best member experience.
- Have confidence and transparency in your medical care costs.

*EZchoice estimates are not a guarantee of medical coverage or pricing.

Payer Matrix

Payer Matrix helps find alternative funding sources for select high-cost specialty drugs. A simple online search and detailed results can help save you money.

If you are prescribed a qualified specialty drug, engage with Payer Matrix. Costs paid by alternative funding sources won't count toward your deductible or out-of-pocket maximum amounts.

- A case coordinator will contact you.
- Your case coordinator will tell you what you need to know about the program and walk you through the enrollment process and requirements.
- They will also answer any questions you may have.

Please be ready to provide personal and financial details, as many of the programs available through alternative funding sources are based on need.

EZpay + HSA

Paying your medical bills, the easy way

With EZPay, you'll never need to submit another reimbursement form, either.

Add your HSA to EZpay!

- 1 Open or download the HealthEZ app.



- 2 Tap "My Plan," then "Bills."



- 3 Enroll in EZPay and add the cards you want to use, plus the order you want to use them.



Pro tip: Scan your cards to save even more time.

- 4 You will get a notice that a new bill has arrived. Just review, tap and EZpay will do the rest.

This is a general outline of value-added services; they are subject to be amended or changed based carrier agreements.

Please see your member materials from HealthEZ for a full description of value-added services included with your specific medical plan coverage.

Health Savings Account (HSA)

Overview & Details

HSAs benefit everyone who is eligible to have this account – single individuals, families, and soon-to-be retirees. You save money on taxes in three ways:

Tax-Free Deposits

The money you contribute to your HSA isn't taxed (up to the IRS annual limit)

Tax-Free Earnings

Your interest and any investment earnings grow tax-free

Tax-Free Withdrawals

Money used toward eligible health care expenses isn't taxed – now or in the future

Setting aside pre-tax dollars into your HSA you pay fewer taxes and increase your take-home pay by your tax savings. You save money on eligible expenses that you are paying for out of your pocket. The amount you save depends on your tax bracket. For example, if you are in the 30 percent tax bracket, you can save \$30 on every \$100 spent on eligible health care expenses.

HSA funds roll over from year to year and accumulate in your account. There is no "use-it-or-lose-it" rule with HSAs, and you decide how and when to use your HSA funds, which can be used for eligible expenses you have now, in the future, or during retirement. Additionally, when you have a certain balance in your HSA, investment opportunities are available.



2026 HSA Contribution Limits

Single Coverage: \$4,400

Family Coverage: \$8,750

If you are over 55 you may contribute an additional \$1,000 to your HSA each year.

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Flexible Spending Account (FSA)

Overview & Details

As a reminder, FSAs are use it or lose it accounts. Unlike HSAs, money in your FSA at the end of the year may not carry over to the next year. Therefore, it's important to not over-fund your FSA.

Health FSA Eligible Expenses

- Medical expenses: co-pays, co-insurance, and deductibles
- Dental expenses: exams, cleanings, X-rays, and braces
- Vision expenses: exams, contact lenses and supplies, eyeglasses, and laser eye surgery
- Professional services: physical therapy, chiropractor, and acupuncture
- Prescription drugs and insulin
- Over-the-counter health care items: bandages, pregnancy test kits, blood pressure monitors, etc.

To access a list of qualified expenses please visit: www.alerus.com

Dependent Care FSA Eligible Expenses – *Highly-compensated employee FSA contributions may be limited per IRS rules.*

- Care for your child who is under age 13
- Before and after-school care
- Babysitting and nanny expenses while you and your spouse are working
- Day care, nursery school, and preschool, summer day camp
- Care for a relative who is physically or mentally incapable of self-care and lives in your home.



Medical FSA

Full Medical FSA: You may use pre-tax dollars to help pay for medical, dental and vision expenses up to \$3,400.

Limited FSA – If you are enrolled in the HSA compatible plan and making contributions to the HSA. You may use pre-tax dollars to help pay for dental and vision expenses **only** (no medical expenses permitted per IRS rules) up to \$3,400.

Carry Over

A unique feature of your plan is that you can carry over up to \$680 to use during the following plan year.

Dependent Care FSA

Election Maximum: \$7,500
(\$3,750 if married, filing separately)



Using your plan dollars

The Flexible Spending plan runs January 1st, 2026 – December 31st, 2026.
Funds not claimed by March 31st, 2027, will be lost per IRS rules.

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Value of Pre-Tax Benefits

Example of Tax Advantage

Section 125 Plan

Christensen Group Insurance operates a Premium Only Section 125 Plan, which allows you to reduce your total taxable income by your portion of group insurance premiums. In effect, this is just like getting a raise – your withholding taxes are reduced, and your take-home pay increases!

Example below of an Employee earning \$30,000 annually, paying \$200/month for benefits.

	Without Pre-Tax Benefits	With Pre-Tax Benefits
Gross Pay	\$30,000	\$30,000
Insurance deductions/payments	\$0	\$2,400
Taxable Income	\$30,000	\$27,600
Taxes at 25%	\$7,500	\$6,900
After-Tax Payment for Benefits	\$2,400	\$0
Take-home pay	\$20,100	\$20,700
Increase in take home pay	\$0	\$600

Please note the above will vary based on your income and tax rate.

HSA vs FSA

	Health Savings Account	General Purpose Health Care FSA	Limited Purpose Health Care FSA	Dependent Care FSA
Who owns the account?	Individual/employee/you	CG	CG	CG
Who can contribute?	Employees enrolled in a qualified HDHP.	Employees NOT enrolled in an HSA. Election is not tied to a health plan.	Employees enrolled in a qualified HDHP. Election is not tied to a health plan.	All employees with eligible dependents. Election is not tied to a health plan.
What is the annual contribution limit?	2026: \$4,400 / employee \$8,750 / family \$1,000 catch-up if age 55+	\$3,400	\$3,400	\$7,500
What expenses are covered?	Medical, dental, vision, prescriptions & OTC medications, COBRA premiums, retiree medical insurance premiums.	Qualified medical, dental, vision prescription, and OTC medications.	Dental and vision only. Can be used with an HSA.	Eligible dependent care expenses such as daycare or care for an adult who is unable to care for themselves.
Who can I use my account for?	Yourself and your tax qualified dependents.	Yourself, spouse and dependents up to age 26.	Yourself, spouse and dependents up to age 26.	Qualified dependents up to age 13 and adult dependents who are incapable of caring for themselves.
Will unused funds roll over year to year?	Yes, the funds will always remain in your HSA until you use them.	Up to \$680 for the 2026 plan year.	Up to \$680 for the 2026 plan year.	No
Is the account portable after termination?	Yes, funds can be accessed after termination. You can continue to use the money for eligible expenses; you cannot contribute until you are enrolled in another HDHP.	No, account ends with termination.	No, account ends with termination.	No, account ends with termination.

Wellness Spending Account

Overview & Details



As a reminder, you cannot change your election or election amounts after November 14th. If you miss the open enrollment window, you must wait until the next open enrollment to enroll in Bucket 1 or Bucket 2.

You must elect or waive the wellness spending account. When electing, put the dollar amount you'd like towards Bucket 1: Train Right Fitness, Bucket 2: Gym Membership/Equipment/Nutrition, or Bucket 3: Mental Health and Wellbeing in the spaces given. You may also do a combination of buckets. The combination cannot exceed your yearly allotted amount.

Wellness Spending Account Expenses

- Bucket 1: Train Right Fitness
- Bucket 2: Gym Membership, Equipment, Nutrition, Fitness Streaming Services
- Bucket 3*: Mental Health and Wellbeing **You can enroll in Bucket 3 any time during the year.*



Wellness Spending Account

Yearly Allowed Amount:

0-1 Years (Hired after June 30, 2025) **\$500**

1 Year and Over (Hired before June 30, 2025) **\$750**



How to Submit Claims

Here is a step-by-step article on how to file a claim: https://connect.christensengroup.com/knowledge#/wellness-spending-account-claim-submission?from_search=86466419

You will fill out an attestation form from BRI and attach a detailed receipt to it.

BRI, our administrator, will either approve or deny your claim.

- If your claim is approved, you will receive a reimbursement of 50% via direct deposit or by check. Claims are paid out every Friday.
- If your claim is denied, you have 21 days to resubmit it for approval.
- At the end of this year's plan year, you will have 60 days to submit any claims from the previous fiscal year. All claims for the 2026 plan year would need to be submitted by March 1, 2027.

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BetterYou

Overview & Details



BetterYou is a healthy habits companion that helps you find time in the day for your health. Set goals around physical, social, and mental health, the app will measure your progress, and help you find time in the day to achieve your goals.

BetterYou is independently operated. Christensen Group will not have access to your personal goals.

BetterYou Help Center

https://intercom.help/betteryou_helpcenter/en/

You can enroll any time through signing up with your Christensen Group email.

Click [here](#) and sign up with your company email.

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First Stop Health

Overview & Details



First Stop Health is a telemedicine and virtual counseling benefit via phone or video.

This is available to all benefit eligible employees whether you are enrolled in the CG medical plans or not.

Dependents are eligible for this benefit if they are enrolled in the CG medical plan.

What do I get from the Benefit?

Need a doctor? Get treatments within minutes for minor injuries, illnesses and prescriptions.

- Cough & Sore Throats
- Infection (Sinus, Ear, UTI)
- Skin Rash
- Medical Refills

Feeling anxious or stressed? Licensed counselors are available 24/7 because sometimes you need someone to talk to and help you work through your troubles.

- Anxiety
- Relationships (Marital, Workplace)
- Substance Misuse



Visits are Free – No deductible, no copays!

Prescriptions, if needed, are an extra charge through your insurance.

Visit www.fshealth.com or download their app from the app store or google play.

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Dental Insurance

Summary of Coverage



The following plans are your dental insurance option for the upcoming year.

In Network	Delta Dental of MN
	PPO and Premier
Calendar Year Deductible (Single / Family)	\$50 / \$150
Calendar Year Maximum (per person)	\$1,000 Diagnostic & Preventive Care will not apply to the maximum
Preventive Care: <i>Exams, Cleanings, X-rays, Fluorides, Space Maintainers & Sealants</i>	100% coverage
Basic Services: <i>Emergency treatment for pain, Fillings, Endodontics and Periodontics</i>	Deductible then 80% coverage
Major Services: <i>Oral Surgery, Crowns, Extractions, Dentures, Bridges, Implants, Occlusal Guards</i>	Deductible then 50% coverage

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Dental Insurance

Summary of Plan Costs and Find a Provider



The following costs are for your dental insurance option for the upcoming year.

Monthly Employee Contribution	Dental
	This is your contribution, paid pre-tax through payroll deductions.
Employee	\$19.14
Employee + One	\$58.23
Employee + Family	\$101.80

Find a Provider

PPO

Gives you the lowest out-of-pocket costs. Participating dentists in the network agree to accept lower fees for procedures, providing larger discounts that result in savings for Delta Dental members.

To search the PPO network: deltadentalmn.org then click on find a dentist and search the Delta Dental PPO network by city and state.

Premier

The largest dentist network in the country. In fact, more than four out of five dentists in the nation have agreed to accept Delta Dental's pre-negotiated fees for dental procedures. Seeing an out of network dentist is always an option. However, by utilizing one, you will be missing out on discounts available to you.

To search the Premier network: deltadentalmn.org then click on find a dentist and search the Delta Dental Premier network.

Through our Best Places to Work in Insurance survey, we heard you loud and clear: our dental plan was not meeting expectations. We took that feedback seriously and conducted a market review.

Beginning in 2026, Christensen Group will contribute 50% of the cost of employee-only dental coverage to all tiers, making it a true cost-share benefit.

This step is a direct response to your feedback and reflects our commitment to strengthening the benefits that matter most to you.

Vision Insurance

Summary of Coverage



The following plans are your vision insurance option for the upcoming year.

In Network	Superior Vision
	Superior National
Materials / Contact Lens Fitting	\$10 copay / \$25 copay
Lenses (Once every 12 months)	
Single	Covered in full
Bifocal	Covered in full
Trifocal	Covered in full
Progressive	Covered up to the providers retail trifocal amount
Frames (Once every 24 months)	\$130 allowance
Elective Contact Lenses (in lieu of lenses and frames)	Discounts range from 10%-50%
Contact Fitting and Evaluation	Covered in full with a maximum copay of \$60
Medically Necessary Contact Lenses (Once per 12 months)	Covered in full after eyewear copay

*Exams are not covered in the plan.

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Vision Insurance

Summary of Plan Cost and Find a Provider



The following plans are your vision insurance options for the upcoming year.

Employee Contribution per Month	
Employee	\$6.01
Employee + Spouse	\$12.02
Employee + Child(ren)	\$13.16
Family	\$20.50

Find a Provider

Superior National

To search for a network provider:

superiorvision.com click on find an eye care professional and select the Superior National network.

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Basic Life Insurance and AD&D

Summary of Coverage



Christensen Group pays 100% of premiums for your Basic Life and AD&D Insurance with Unum.

Basic Life/AD&D Plan Features	Benefit
Employee Life/AD&D Benefit Amount	\$50,000
Spouse Life/AD&D Benefit Amount	\$10,000
Child Life/AD&D Benefit Amount	
Live birth to 14 days	\$500
14 days to 6 months	\$1,000
6 months to 26 years old	\$5,000
Reduction Schedule	35% reduction at Age 65 50% reduction at Age 70



Employee Assistance Program (EAP)

When you have questions, concerns or emotional issues surrounding your personal or work life, you can count on us to offer help. Through Unum's work-life balance employee assistance program (EAP), you have unlimited access to consultants by telephone, resources and tools online, and up to three face-to-face visits with a counselors for help with a short-term problem.

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Voluntary Life Insurance and AD&D

Summary of Coverage

Employee Paid Life Plan Features		Benefit
Employee Life Benefit Amount		Increments of \$10,000; to a maximum of \$300,000
Employee Guarantee Issue		\$300,000
Spouse Life Benefit Amount		Increments of \$10,000; to a maximum of \$300,000
Spouse Guarantee Issue		\$100,000
Child Life Benefit Amount		Maximum of \$10,000
Employee Paid AD&D Plan Features		Benefit
Employee AD&D Benefit Amount		Increments of \$10,000; to a maximum of \$300,000
Spouse AD&D Benefit Amount		Increments of \$10,000; to a maximum of \$300,000
Child AD&D Benefit Amount		Maximum of \$10,000

Voluntary Life and AD&D be elected separately but in order to have AD&D, you must be enrolled in at least \$10,000 of Voluntary Life.



Guarantee Issue Amount

The employee guarantee amount is the amount of voluntary life insurance you can opt in to without answering any medical questions when you are first eligible for the coverage.

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Disability

Summary of Coverage

The following is your Short-Term Disability benefit for the upcoming year. Christensen Group pays 100% of the cost for employees.

Short Term Disability

Plan Features	
Employee Benefit Amount	60% of pre-disability earnings
Maximum Benefit Amount	Up to \$1,000 per week
Elimination Period (Accident)	7 days
Elimination Period (Illness)	7 days
Maximum Benefit Duration	Up to 12 weeks
Pre-existing Condition Limitation	N/A

Payment for the Long-Term Disability premium is paid with after-tax dollars, by Christensen Group and Christensen Group may add the amount of the premium paid to an employee's gross income to provide nontaxable disability benefits.

Long Term Disability

Plan Features	
Employee Benefit Amount	60% of pre-disability earnings
Maximum Benefit Amount	Up to \$10,000 - \$24,000 per month based on your job duties
Elimination Period	90 days
Maximum Benefit Duration	Social Security Normal Retirement Age

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Accident – NEW!

Summary of Coverage

The following is your Accident benefit for the upcoming year. You pay 100% of the cost.

How does it work?

Accident Insurance provides a set benefit amount based on the type of injury you have and the type of treatment you need. It covers accidents that occur on and off the job. And it includes a range of incidents, from common injuries to more serious events.

Why is this coverage so valuable?

It can help you with out-of-pocket costs that your medical plan doesn't cover, like co-pays and deductibles. You'll have base coverage without medical underwriting. The cost is conveniently deducted from your paycheck. You can keep your coverage if you change jobs or retire. You'll be billed directly.

How much does it cost?

Your monthly premium	
You	\$4.88
You and your spouse	\$8.44
You and your children	\$10.82
Family	\$14.38

Who can get coverage?

You:	If you're actively at work*
Your spouse:	Can get coverage as long as you have purchased coverage for yourself.
Your children:	Dependent children newborn until their 26th birthday, regardless of marital or student status.

*Employees must be legally authorized to work in the United States and actively working at a U.S. location to receive coverage. See Schedule of benefits for a complete listing of what is covered.

What's included?

Organized Sports Benefit

Each family member that has Accident coverage is eligible for a 25% increase in payable benefits within the Injury and Treatment schedule of benefit categories. See disclosures and schedule of benefits for more information.

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Critical Illness – NEW!

Summary of Coverage

The following is your Critical Illness benefit for the upcoming year. You pay 100% of the cost.

****Pre-ex applies for late entrants.**

How does it work?

If you're diagnosed with an illness that is covered by this insurance, you can receive a lump sum benefit payment. You can use the money however you want.

Why should I buy coverage now?

- It's more accessible when you buy it through your employer and the premiums are conveniently deducted from your paycheck.
- Coverage is portable. You may take the coverage with you if you leave the company or retire. You'll be billed at home.

Why is this coverage so valuable?

- The money can help you pay out-of-pocket medical expenses, like deductibles.
- You can use this coverage more than once. Even after you receive a payout for one illness, you're still covered for the remaining conditions and for the reoccurrence of any critical illness with the exception of skin cancer. The reoccurrence benefit can pay 100% of your coverage amount. Diagnoses must be at least 180 days apart or the conditions can't be related to each other

Who can get coverage?

You:	Choose \$10,000, \$20,000 or \$30,000 of coverage with no medical underwriting to qualify if you apply during this enrollment.
Your spouse:	Spouses can only get 50% of the employee coverage amount as long as you have purchased coverage for yourself.
Your children:	Children from live birth to age 26 are automatically covered at no extra cost. Their coverage amount is 50% of yours. They are covered for all the same illnesses plus these specific childhood conditions: cerebral palsy, cleft lip or palate, cystic fibrosis, Down syndrome, spina bifida, type 1 diabetes, sickle cell anemia and congenital heart disease. The diagnosis must occur after the child's coverage effective date.

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Critical Illness

Summary of Coverage

What's covered?

Critical Illnesses	
• Heart attack • Stroke • Major organ failure • End-stage kidney failure • Sudden cardiac arrest	• Coronary artery disease Major (50%): Coronary artery bypass graft or valve replacement Minor (10%): Balloon angioplasty or stent placement

Cancer conditions	
• Invasive cancer — all breast cancer is considered invasive • Non-invasive cancer (25%)	• Skin cancer

Progressive diseases	Supplemental Conditions
• Amyotrophic Lateral Sclerosis (ALS) • Dementia, including • Alzheimer's disease • Multiple Sclerosis (MS) • Parkinson's disease • Functional loss • Huntington's Disease • Lupus • Muscular Dystrophy • Myasthenia Gravis • Systemic Sclerosis (Scleroderma) • Addison's Disease	• Loss of sight, hearing or speech • Benign brain tumor • Coma • Permanent Paralysis • Occupational HIV, Hepatitis B, C or D • Occupational PTSD Paid at 25%: • Infectious Diseases • Pulmonary Embolism • Transient Ischemic Attack (TIA) • Bone Marrow/Stem Cell

Please refer to the certificate for complete definitions of these covered conditions. Coverage may vary by state. See exclusions and limitations.

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Critical Illness

Monthly Costs



Monthly Costs			Monthly Costs			Monthly Costs		
Age	Employee coverage: \$10,000 Spouse coverage: \$5,000		Age	Employee coverage: \$20,000 Spouse coverage: \$10,000		Age	Employee coverage: \$30,000 Spouse coverage: \$15,000	
	Employee	Spouse		Employee	Spouse		Employee	Spouse
under 25	\$1.60	\$0.80	under 25	\$3.20	\$1.60	under 25	\$4.80	\$2.40
25 - 29	\$2.10	\$1.05	25 - 29	\$4.20	\$2.10	25 - 29	\$6.30	\$3.15
30 - 34	\$2.70	\$1.35	30 - 34	\$5.40	\$2.70	30 - 34	\$8.10	\$4.05
35 - 39	\$3.60	\$1.80	35 - 39	\$7.20	\$3.60	35 - 39	\$10.80	\$5.40
40 - 44	\$5.00	\$2.50	40 - 44	\$10.00	\$5.00	40 - 44	\$15.00	\$7.50
45 - 49	\$7.20	\$3.60	45 - 49	\$14.40	\$7.20	45 - 49	\$21.60	\$10.80
50 - 54	\$9.70	\$4.85	50 - 54	\$19.40	\$9.70	50 - 54	\$29.10	\$14.55
55 - 59	\$13.40	\$6.70	55 - 59	\$26.80	\$13.40	55 - 59	\$40.20	\$20.10
60 - 64	\$22.30	\$11.15	60 - 64	\$44.60	\$22.30	60 - 64	\$66.90	\$33.45
65 - 69	\$30.10	\$15.05	65 - 69	\$60.20	\$30.10	65 - 69	\$90.30	\$45.15
70 - 74	\$41.40	\$20.70	70 - 74	\$82.80	\$41.40	70 - 74	\$124.20	\$62.10
75 - 79	\$58.10	\$29.05	75 - 79	\$116.20	\$58.10	75 - 79	\$174.30	\$87.15
80 - 84	\$80.20	\$40.10	80 - 84	\$160.40	\$80.20	80 - 84	\$240.60	\$120.30
85+	\$119.60	\$59.80	85+	\$239.20	\$119.60	85+	\$358.80	\$179.40

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Hospital – NEW!

Summary of Coverage

The following is your Hospital benefit for the upcoming year. You pay 100% of the cost.

How does it work?

Group Hospital Insurance helps covered employees and their families cope with the financial impacts of a hospitalization. You can receive benefits when you're admitted to the hospital for a covered accident, illness or childbirth.

Why is this coverage so valuable?

- The money is payable directly to you — not to a hospital or care provider. The money can also help you pay the out-of-pocket expenses your medical plan may not cover, such as co-insurance, co-pays and deductibles.
- You get accessible rates when you buy this coverage at work.
- The cost is conveniently deducted from your paycheck.
- The benefits in this plan are compatible with a Health Savings Account (HSA).
- You may take the coverage with you if you leave the company or retire. You'll be billed directly.

Group Hospital Insurance can pay benefits that help you with the costs of a covered hospital visit.

Who can get coverage?

You:	If you're actively at work
Your spouse:	Can get coverage as long as you have purchased coverage for yourself.
Your children:	Dependent children newborn until their 26th birthday, regardless of marital or student status.

Employee must purchase coverage for themselves in order to purchase spouse or child coverage. Employees must be legally authorized to work in the United States and actively working at a U.S. location to receive coverage.

How much does it cost?

Your monthly premium	
You	\$23.73
You and your spouse	\$47.51
You and your children	\$35.49
Family	\$59.27

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Pet Insurance

Summary of Coverage

This plan is administered by Nationwide. Though pet insurance is a non-traditional benefit and is generally paid for by the employee, it is becoming increasingly popular in the workplace to help employees care for their pets without going bankrupt.

Unlike other benefits, Pet Insurance premiums are deducted from your paycheck post-tax.

To view the most current premium rates, please visit www.petinsurance.com.



My Pet Protection

- 24/7/365 Vet helpline service
- Get cash back on eligible vet bills
- Choose the reimbursement level that fits your needs
- Same price for pets of all ages
- Use any vet, anywhere
- Wellness benefit is available, capped at \$500 per policy (examples: vaccinations, routine doctor exams, routine diagnostic testing, heartworm and/or flea and tick prevention, spay or neuter surgery, routine dental cleanings, etc..)



Why Pet Insurance?

Pet insurance helps lower the veterinary expenses in several ways. Depending on the plan, it may cover vet exams, vaccinations, chronic conditions, injuries and flea treatments. When a pet needs emergency care, the safety net of pet insurance can save an individual from needing to choose between their wallet and their furry friend.

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Legal & Identity Theft

Summary of Coverage



This plan, administered by Legal Shield, provides coverage for legal advice, will preparation and access to online legal forms. Once enrolled, you will receive a directory of attorneys, and a listing of their corresponding areas of law in which they specialize.



Legal Shield

Available legal services include services like (but are not limited to):

- Bankruptcy
- Domestic Matters
- Civil Actions
- Defense of Criminal Misdemeanors
- Consumer protection
- Small Claims & Mediation
- Traffic Tickets
- Landlord & Tenant Matters
- Real Estate
- Wills, Trusts, & Estate Planning
- Tax Issues



ID Shield

A comprehensive identity protection plan with proprietary features that go beyond other plans in monitoring your personal data and restoring it if a data breach occurs. Theft specialists are on stand-by, ready to assist you 24/7.



About Identity Theft

Identity theft occurs when others obtain and use your personal information without your permission. Once your personal information is obtained, thieves can use existing or open new credit cards in your name, write bad checks or take out loans.

Before you catch wind that your identity has been stolen, your credit may be tarnished and thieves may have racked up significant debt, all in your name!

Plan Features	Monthly Cost LegalShield Only	Monthly Cost ID Shield	Monthly Cost LegalShield & ID Shield
Employee Only	\$15.95	\$8.45	\$24.40
Employee + Spouse	\$15.95	\$15.95	\$28.90
Family	\$15.95	\$15.95	\$28.90

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Federal & State Benefit Navigation

Medicare	Medicaid	Affordable Care	SSI	Disability
Retirement	Dialysis	Cancer	ALS	Premature Baby
Veteran's Benefits	Tribal Benefits	COBRA	Survivor's Benefits	Healthcare.gov

Reasons to call *an expert*

- You're approaching or have reached age 65 and want help navigating Medicare
- You're 62+ and want to maximize your retirement benefits or plan for the future
- You or a family member have been diagnosed with a critical illness or disability
- You have a child born prematurely and is in the NICU
- You have lost a spouse and need help navigating survivor's benefits
- You are unable to work or have lost affordable health coverage

It's all about you.

Our experts are here to help your family navigate federal and state benefits. Our services are provided for you and your family by your employer and are always 100% free, confidential, and unlimited. FEDlogic will never promote, endorse, or sell any type of product or insurance.



EMPLOYEE
ACCESS CODE:

chri25

877-837-4196

FEDLOGICGROUP.COM
SERVICES@FEDLOGICGROUP.COM

This is not a Summary Plan Description. If there are differences between this information and the Plan Document or Summary Plan Description, the Plan Document will control. This Plan intends to comply with Section 404(c) of ERISA.

How it works

1

Make a phone consultation appointment

Call us at 877-837-4196 or scan the QR code to schedule a phone consultation with one of our experts. Be sure to make the appointment at a time when family members are available to listen and ask questions as well. Calls typically last an hour and are unlimited, confidential, and free.

2

Tell us your story, ask questions, and learn

You don't have to wade through tons of complex and confusing information to figure out what applies to you. We take the time to listen to your story and understand your needs, concerns, and goals. Then, we empower you with the unbiased information you need to maximize your benefits and make the best decision for your situation.

3

Enroll in your benefits

Once you feel confident you have all the information you need to make the best decision for you and your family, we'll walk you through the application and approval process.

4

Have Peace of Mind

Without education and advocacy, many people don't tap into all the Social Security and Medicare benefits they've paid into during a lifetime of employment. You'll have the peace of mind knowing that you're getting all the benefits you deserve. So, sit back, relax and celebrate!

*When life takes a turn,
turn to FEDlogic.*

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401(k) Plan Details



What is a 401(k)

A 401(k) is a retirement savings plan sponsored by your employer. It lets you save and invest a portion of your paycheck specifically for retirement. You may save either on a pre-tax or post-tax basis (Roth) basis. Generally, you may begin to withdraw your money from the plan after age 59½ without penalty.

Eligibility Requirements

Christensen Group offers employees an opportunity to participate in a 401(k)-retirement plan. The plan is managed by Empower Retirement. Participants may enroll in the CG 401(k) Plan on the first day of the month following their 21st birthday.

New employees who meet the eligibility requirements are auto-enrolled in the plan and may opt out. The initial auto-enroll feature will set each employee up with a 3% salary deferral into the plan. Each January 1, your automatic deferral amount will increase by 1% each year up to a maximum of 10% of pay, however each employee has the ability to opt out or change the participation % each year. Both Roth (after-tax) and pre-tax deferrals are accepted. Your contributions and any roll-overs are always 100% vested.

2025 Contribution Limits: 2026 Limits TBD

The 2025 calendar year maximum 401(k) contribution is \$23,500 per individual. If you are over 50 years old before 12/31, you may contribute additional "catch-up" contribution of up to \$7,500 (\$31,000 total). Note: The IRS may update this contribution limit at their discretion. Ages 60-63 = increased "catch-up" contributions of up to \$11,250 (\$34,750 total).

Rollovers

Rollovers are accepted from qualified retirement plans (401(k), profit sharing, pension) and traditional/pre-tax IRAs.

Loans

You are allowed to borrow the lesser of \$50,000 or 50% of your total vested balance. The minimum loan amount is \$1,000 with a 5-year maximum repayment term.

Withdrawals

You may make a withdrawal from your 401(k) account upon a qualifying distribution event: Retirement, Death, Disability, Termination of Service, Financial Hardship (as defined by the Internal Revenue Code).



Contact Information

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(952) 653-1047
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Aaron Decock — Retirement Plan Consultant
(952) 653-1170
adecock@cgfinancial.com

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Open Enrollment

There is specific window of time each year where you must complete your benefits elections. For the 2026 plan year, the Open Enrollment period for Christensen Group is November 10, 2025 – November 14, 2025.



Your Open Enrollment Dates

**November 10, 2025 –
November 14, 2025**



Online Enrollment

All benefits elections are done through an online system called Paylocity. Please login to Paylocity before November 14, 2025, to make your benefits elections:

<https://access.paylocity.com/>



Enrollment decisions and elections must be made by November 14, 2025.