

2026

# Employee Benefits



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This benefit summary describes the benefit plans available to you as an employee of Lincoln Savings Bank. The details of these plans are contained in the official plan documents that have been provided to you by your employer, including some insurance contacts. This summary is meant only to cover the highlights of each plan. It does not contain all the details that are included in your summary plan description as described by the Employee Retirement Income Security Act (ERISA).

If there is ever a question about one of these plans, or if there is a conflict between the information in this summary and the formal language of the plan documents, the formal wording in the plan documents will govern. Please note that the benefits described in the summary may be changed at any time and do not represent a contractual obligation on the part of Lincoln Savings Bank.

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# Welcome!

We are committed to providing competitive benefit programs that are flexible enough to meet your individual needs. Our comprehensive benefits are carefully designed to give you the tools you need to keep you and your family healthy, provide financial protection in the event of unforeseen circumstances and help you build long-term security for retirement.

Getting the most from your benefits is up to you. You know your family, your goals and your lifestyle best. This benefits guide was designed to answer some of the basic questions you may have about your benefits. Please take the time to review this guide to make sure you understand the benefits that are available to you and your family and be sure to act before the enrollment deadline.



# **Benefits Eligibility**

#### **Dependents**

You can enroll the following dependents in our group benefit plans:

- · Your legal spouse or domestic partner
- Children
  - A child under the age of 26 who is your natural child, stepchild, legally adopted child, or child for whom you have obtained legal guardianship
  - Unmarried children of any age if totally disabled and claimed as a dependent on your federal income tax return (documentation of disability status required)
  - Unmarried, full-time students

# **Qualifying Life Events**

Your benefit elections made during Open Enrollment will be effective January 1, 2026. You may not make changes to your elections unless you experience a qualifying life event, including change in legal marital status (marriage, divorce, death of spouse), change in dependents (birth, adoption), change in employment status (termination, part-time), or if you gain/lose coverage elsewhere.



#### **Important**

If you need to make a change before the next Open Enrollment period due to a change in status, you must submit the required documentation WITHIN 30 DAYS of the qualifying life change event.

Contact human resources or login to the ADP Enrollment Portal to process a Qualifying Life Event.

#### **New Hires**

New hires can join the plan the first of the month following date of hire. Spouses and dependent children of the employee are also eligible to participate in our benefit plans.





# **Choose Your Medical Plan**

Your medical plans will be offered through HealthPartners. Please review your Summary of Benefits and Coverage (SBC) for additional coverage information and full plan details.

When you first join Lincoln Savings Bank, your benefits are effective the first month following your date of hire. If you do not enroll when first eligible, you will be automatically enrolled only in company sponsored benefits such as basic life and AD&D, long-term disability, and the Employee Assistance Program (EAP). You must then wait until the next Open Enrollment to make changes for the following plan year unless you experience a qualifying life event.

You may visit any medical provider you choose, but in-network providers offer the highest level of benefits and lowest outof-pocket costs. In-network providers charge members reduced, contracted rates instead of their typical fees. Providers outside the plan's network set their own rates, so you may be responsible for the difference if a provider's fees are above the Reasonable and Customary (R&C) limits.



#### **Register Online**

Your connection to great healthcare is only a click away. Register for an account at the HealthPartners website so you can access time-saving tools, find tips for healthy living, choose a doctor, manage your EOBs, and more!

#### **Download The Mobile App**

With the HealthPartners mobile app, you've got the tools you need to manage your healthcare from your smartphone. The mobile app is available in the Apple and Google Play stores.







# **Medical Plan Comparison**

## **HealthPartners**

# **Understanding Your Deductibles**

In both plans the individual deductible in addition to the overall family deductible means that an individual participant may reach their deductible and begin having services paid by the plan regardless of whether the family deductible has been met.

To find an in-network provider search the HealthPartners Website by clicking HERE

	\$4,500 Traditional	\$5,500 HDHP	
IN-NETWORK			
ANNUAL DEDUCTIBLE			
Individual	\$4,500 Funded down to \$2,000	\$5,500 Funded down to \$3,500	
Family	\$9,000 Funded down to \$4,000	\$11,000 Funded down to \$7,000	
OUT-OF-POCKET (OOP) MAXIMUM			
Individual	\$9,000 Funded down to \$4,000	\$5,500 Funded down to \$3,500	
Family	\$18,000 Funded down to \$8,000	\$11,000 Funded down to \$7,000	
BENEFIT DETAILS			
Coinsurance Percentage	10%	0%	
Virtual Visits	\$0 copay	\$0 copay	
Preventive Care	Covered at 100%	Covered at 100%	
Primary Care Physician (PCP)	10% Coinsurance	Deductible, 0% Coinsurance	
Specialist	10% Coinsurance	Deductible, 0% Coinsurance	
Emergency Room	Deductible, 10% Coinsurance	Deductible, 0% Coinsurance	
Inpatient Hospital	Deductible, 10% Coinsurance	Deductible, 0% Coinsurance	
Outpatient Hospital	Deductible, 10% Coinsurance	Deductible, 0% Coinsurance	
Urgent Care	10% Coinsurance	Deductible, 0% Coinsurance	
Outpatient Surgery	Deductible, 10% Coinsurance	Deductible, 0% Coinsurance	
Lab/X-Ray (Outpatient)	10% Coinsurance	Deductible, 0% Coinsurance	
OUT-OF-NETWORK*			
Deductible (Individual / Family)	\$4,500 / \$9,000	\$5,500 / \$11,000	
Coinsurance	20%	50%	
Out-of-Pocket Maximum (OOP) (Individual/Family)	\$9,000 / \$18,000	\$11,000 / \$22,000	

<sup>\*</sup> When visiting out-of-network providers, costs may be higher, and providers may ask for full payment at time-of-service.



PHARMACY			
		\$4,500 Traditional	\$5,500 HDHP
	Retail Generic Formulary	\$10 Copayment	Deductible, 0% Coinsurance
Retail 31-day supply	Retail Brand Formulary	\$30 Copayment	Deductible, 0% Coinsurance
	Retail Generic Non-Formulary	\$60 Copayment	Deductible, 0% Coinsurance
	Retail Brand Non-Formulary	\$60 Copayment	Deductible, 0% Coinsurance
Specialty	Specialty Generic	\$125 Copayment	Deductible, 0% Coinsurance
	Specialty Brand	\$250 Copayment	Deductible, 0% Coinsurance
Mail order 93-day supply	All Tiers	3x Copayment	3x Copayment

# **Send Medications Right to Your Home**

Home delivery is a convenient, cost-effective and safe option for medications you take regularly. There are four ways to place a new home delivery order:

- 1. By ePrescribe: Your doctor can send an electronic prescription
- 2. Go online: Visit the website on your ID card
- 3. By phone: Call the toll-free number on your ID card

#### **Specialty Medications**

HealthPartners provides resources and personalized support to help you manage your condition.

## Search

HealthPartners provides the full list of covered drugs under the PreferredRx formulary, so you know what drugs are covered under your plan. To see this full list please visit the HealthPartners website by clicking <u>HERE</u>.



# Health Reimbursement Account (HRA)

## **EBS**

An HRA means that Lincoln Savings Bank is purchasing a higher deductible and out-of-pocket maximum plan from HealthPartners and funding the difference between the employee's portion and HealthPartners portion. We will partner with a third-party administrator, EBS, to help us process claims.

### **HRA Process**

The following process is for members who have met their responsibility



Member visits medical provider



- Provider notifies HealthPartners of claim
- At this time HealthPartners will also send an Explanation of Benefits (EOB) to the Member



- HealthPartners notifies EBS of a claim
- EBS will be tracking members claims to know when Member reaches their responsibility



HealthPartners confirms to Provider what insurance will cover



EBS will send member EOB with breakdown of what portion EBS have covered on behalf of the Member



EBS reimburses Provider on behalf of Member for remaining portion



Note: Even after Member responsibility has been met, prescription copays will continue to be the Members responsibility





With telehealth, you can schedule a virtual appointment with board-certified doctors and pediatricians who can diagnose, treat and prescribe most medications for minor medical conditions, such as:

- Acne
- Allergies
- Asthma
- Bronchitis
- Cold and flu
- Constipation
- Diarrhea
- Earaches

- Fever
- Headaches
- Infections
- Insect bites
- loint aches
- Nausea
- Pink eye
- Rashes

- Respiratory infections
- Shingles
- Sinus infections
- Skin infections
- Sore throats
- · Urinary tract infections

We've all been there—it's the middle of the night and you have a sick child or maybe you are trying to get an appointment with your primary care provider but the first appointment isn't for two weeks. Good news... there's an easier way! Telehealth is a convenient option for scheduling virtual doctor visits from your own home. With telehealth, you don't have to drive to the doctor's office or sit in a waiting room when you're sick—you can see your doctor from the comfort of your own bed or sofa

- See a board-certified, licensed, telehealth trained doctor on your schedule with on-demand virtual visits 24/7, including holidays.
- Get treated for more than 80 common conditions including colds, flu, allergies and more.
- Get a prescription or short-term refill of any existing prescription sent to a pharmacy nearby, in less time than your usual doctor visit.
- Avoid costly copays and deductibles of the ER and urgent care clinic.

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**Telehealth appointments are \$0 for both plans.** To schedule an appointment, visit Virtuwell at www.virtuwell.com





With My Rewards, you can earn rewards for taking care of your health! Get support and motivation for you and your family to live healthier with My Rewards. As a HealthPartners member, you can earn rewards for completing simple activities. Activities with rewards available are:

#### Get to know your online account

Make sure your account information is up to date, go paperless, and visit our new medical cost estimator tool.

#### **Understand your plan**

See what your health plan has to offer by completing tasks designed to help you better manage costs and get the most out of your health insurance.

#### Take charge of your preventive care

Ensure you get essential screenings and care that puts your long-term health first when you take advantage of preventive care.

#### Manage your medications

Connect with a clinical pharmacist who will work closely with your doctors to make sure your prescriptions are working together as they should.

#### Support your mental health

Mental health is just as important as physical health. Review our mental health hub, find resources to support you and your family, and help us identify what's working and areas of improvement.

#### Live your best life with Living Well

Complete your health assessment and activities for better physical and mental well-being.

#### **Start earning today**

Healthy habits and getting the most out of your plan aren't the only perks that come with My Rewards. For completing activities, you can earn up to \$245 on a reloadable reward card to spend however you want. My Rewards is included in your health plan at no additional cost.

No more searching around for your plan incentives. My Rewards has everything in one easy-to-find place. Sign in to your account at <a href="healthpartners.com">healthpartners.com</a> and click on the trophy icon at the top of the page to access My Rewards. Check back regularly to see if new rewards are available!



# Tips on Getting the Most Out of Your Health Insurance

Understanding the ins and outs of health insurance can be confusing, but it's worth your time to check on benefits you could be losing out on or mistakes that could cost you money. Here are five ways to ensure you're getting the most out of your health insurance:



**Preventive Care** – Our plan covers several preventive services such as annual screenings, flu shots, etc. at no cost! Click <u>HERE</u> for a full list of covered preventive services.



**Virtual Visits** – HealthPartners works with <u>Virtuwell</u> so you can access a doctor 24/7, even from the comfort of your home! Save time by downloading the app today and entering your HealthPartners member information.



**Save on Prescription Drugs** – Shopping around for prescription drugs can save you money on copayments. Online apps such as <u>Good Rx</u> and <u>Cost-Plus Drugs</u> make it easy to review your options. Note: Expenses incurred through these plans will <u>not</u> apply to your out-of-pocket maximum.



**Tax Savings Accounts** – Contributing to an HSA or FSA is a great way to set aside pre-tax dollars for healthcare expenses. View eligible <u>FSA items</u> and <u>HSA items</u> for more information.



**Employee Assistance Program** – Employee & Family Resources provides access to 6 free counseling sessions for you and your household. This can help with things such as depression, stress management, relationships, grief, legal and financial issues, childcare and elder care among many other things.



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# Health Savings Account (HSA)

# What Is a Health Savings Account

A Health Savings Account (HSA) is a way for you to save pretax dollars that can be used to pay for qualified healthcare expenses like deductibles, copays, coinsurance, prescriptions, vision and dental expenses. High deductible health plans have lower premiums and may result in lower annual medical costs. These plans offer several advantages to reward you for taking an active role in your healthcare spending.

- Lower paycheck costs allowing you to keep control of more of your money
- Tax-advantaged savings account enrolling in and contributing to a Health Savings Account (HSA) helps you pay your deductible and out-of- pocket costs
- Comparable benefits these plans use the same networks that other plans offer, and in-network preventive care is still covered at 100%

# Who Is Eligible for an HSA?

- · Must be enrolled in a high deductible health plan
- Cannot be covered by any other medical plan that is not a qualified HDHP. This includes a spouse's medical coverage unless it's also a qualified HDHP
- Cannot be enrolled in a traditional health care FSA in the same calendar year
- Cannot be enrolled in Medicare, including Parts A or B, Medicaid or Tricare
- Cannot be claimed as a dependent on another person's tax return
- Cannot be a veteran who has received treatment, other than preventive care, through the Department of Veterans Affairs within the past three months



# Health Savings Account (HSA) (Cont.)

## **How Much Can I Contribute?**

- Employee only coverage: \$4,400 in 2026
- Employee plus dependents coverage: **\$8,750** in 2026
- If you are 55 or older, you can make an additional annual catch-up contribution of \$1,000

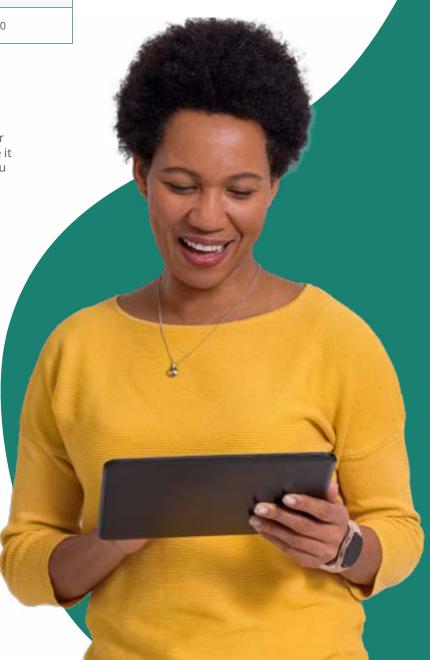
Coverage Level	Total HSA Contribution Allowed for 2026
Employee Only	\$4,400
All other levels of coverage	\$8,750

## **HSAs and Your Taxes**

All withdrawals from your HSA are tax-free, as long as you use the money to pay for eligible health care expenses. In addition, all the money in the account is yours and will never be forfeited. It rolls over from year to year, and you can take it with you if you leave the company or retire. After age 65, you can withdraw funds for any reason without a tax penalty — you pay ordinary income tax only if the withdrawal isn't for eligible health care expenses.

**Note:** You won't pay federal taxes on HSA contributions. However, you may pay state taxes depending on your residence. Consult your tax advisor to learn more.





# Flexible Spending Account (FSA)

Tax-advantaged FSAs are a great way to save money. The money you contribute to these accounts comes out of your paycheck without being taxed, and you withdraw it tax-free when you pay for eligible health care and dependent care expenses.

## **Health Care FSA**

#### Who can participate?

Employees who are not enrolled in the high deductible health plan through Lincoln Savings Bank, or in a high deductible health plan through their spouse's employer.

#### What are the contribution limits?

Employees can contribute up to \$3,400 in 2026.

#### What happens at the end of the year?

The Health Care FSA allows a 2½ month Grace Period. Expenses can be incurred through March 15, 2027.

# **Limited Purpose FSA**

#### Who can participate?

Employees enrolled in the high deductible health plan.

#### What are the contribution limits?

Employees can contribute up to \$3,400 for 2025. You can use the funds for any qualified dental or vision expenses. No medical plan copays, deductibles, prescription drugs or alternative healthcare are eligible expenses through a LP-HFSA.

#### What happens at the end of the year?

Both FSAs are "Use It or Lose It" meaning if you do not spend your funds by the expense deadline, your funds will be forfeited.

# **Dependent Care FSA**

#### Who can participate?

Any employee.

#### What are the contribution limits?

Employees can contribute up to \$7,500 annually per family or \$3,750 if filing separately.

#### What happens at the end of the year?

FSA funds expire at the end of each year. Use it or lose it. Unlike the healthcare FSA, your full election for the plan year is not available on the day your plan starts. For the dependent care FSA, you can only be reimbursed for qualified expenses up to the amount you have contributed to your FSA up to that point in time. As your contributions accrue, claims for reimbursement can be processed.



#### What's an Eligible Expense?

**Health Care FSA** – Plan deductibles, copays, coinsurance, and other health care expenses. To learn more, see IRS Publication 502 at <a href="https://www.irs.gov">www.irs.gov</a>.

**Dependent Care FSA** – Child day care, home care for dependent elders, and related expenses. To learn more, see IRS Publication 503 at www.irs.gov.



In addition to protecting your smile, dental insurance helps pay for dental care and includes regular checkups, cleanings and x-rays. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery. Dental coverage is offered for basic and major services. You and your eligible dependents may enroll in the dental coverage options administered by **Wellmark**.

To find an in-network provider visit Wellmark's website by clicking **HERE** 

In-Network (PPO) Plan Features	Dental Plan 1	Dental Plan 2	Dental Plan 3
Annual Calendar Year Deductible — Individual	\$15	\$15	\$15/Person
Annual Calendar Year Deductible — Family	\$45	\$45	N/A
Annual Maximum	\$1,500	\$1,500	\$1,000
Preventive Care	Covered at 100%	Covered at 100%	10% Coinsurance
Basic Services	10% after deductible	10% after deductible	20% after deductible
Major Services	20% after deductible	20% after deductible	20% after deductible
Orthodontia Services*	Covered at 50%	Not Covered	Not Covered
Orthodontia Lifetime Maximum	\$2,000	Not Covered	Not Covered

<sup>\*</sup>Orthodontia eligibility: Adults and children at least age eight.





Driving to work, reading a news article and watching TV are all activities you likely perform every day. Your ability to do these activities, however, depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

Your vision insurance is provided by **Avesis** and entitles you to specific eye care benefits. Our policy covers routine eye exams and other procedures, and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses.

To find an in-network provider please visit Avesis's website www.avesis.com.

	In Network	Out Of Network Reimbursement	
Routine Exam			
Routine Exam	\$10 copayment	Up to \$35	
Eyeglass Lenses, Materials, and Frames			
Single Vision Lenses	\$10 copayment	Up to \$25	
Bifocal Lenses	\$10 copayment	Up to \$40	
Trifocal Lenses	\$10 copayment	Up to \$50	
Lenticular	\$10 copayment	Up to \$80	
Progressives	\$50 allowance	Up to \$40	
Frames	\$150 allowance, 20% off balance over allowance	Up to \$50	
Contact Lenses - Conventional (in lieu of glasses)	\$150 allowance	Up to \$128	
Contact Lenses - Medically Necessary	Covered in full	Up to \$250	
Laser Surgery	Lifetime \$150 allowance 25% provider discount	Lifetime \$150 allowance	
Frequency of Services			
Comprehensive Eye Exam	Once every 12 months		
Lenses	Once every 12 months		
Frames	Once every 24 months		
Contact Lenses	Once every 12 months		





# Basic Life and Accidental Death and Dismemberment (AD&D)

The Basic Life and AD&D plan provides a benefit in the event of your death, dismemberment or paralysis. This benefit is sponsored by Lincoln Savings Bank, so you will automatically be enrolled at no cost to you. Your coverage will be 2 x salary, to a maximum of \$500,000.

You can also buy additional coverage for your dependents for the following coverage amounts.

Spouse: \$35,000 Child(ren): \$10,000

# **Supplemental Life Insurance**

You may purchase additional life insurance at group rates:

- Available in increments of \$10,000 up to a max \$500,000
  - Not to exceed 5x annual salary
- You pay the full cost of this plan and the amount deducted depends on the age of the associate and the amount of coverage elected
- If you do not elect this coverage when first becoming eligible, or an election over 5 times annual salary up to \$150,000 is made, you are subject to medical underwriting by the carrier.



# Don't forget to designate a beneficiary!

**Note:** Upon loss of eligibility or termination of employment, you and/ or your dependents may elect to continue your employer sponsored Basic or Voluntary Term Life Insurance coverage by either porting or converting it. You will be responsible for premiums.

# Life Insurance for Spouses and Dependents

You may purchase additional dependent life insurance at group rates:

- Spousal life is available in increments of \$5,000 up to a max of \$250,000
  - Not to exceed 100% of employee amount
- Can elect up to 100% of employees benefit up to \$50,000 without medical underwriting as a new hire
- Child life amount is \$10,000
  - The cost remains the same regardless of the number of children you have

# Guaranteed Issue and Evidence of Insurability

Employees and spouses who elect Voluntary Life and AD&D coverage when they are first eligible can elect up to the Guaranteed Issue (GI) amount without Evidence of Insurability (EOI). If the amount requested is more than GI, you will need to provide EOI before the amount over GI becomes effective

#### **Imputed Income**

Under current tax laws, imputed income is the value of your Basic Life insurance that exceeds \$50,000 and is subject to federal income, Social Security and state income taxes, if applicable. This imputed income amount will be included in your paycheck and shown on yourW-2 statement.



At Lincoln Savings Bank, we want to do everything we can to protect you and your family. That's why Lincoln Savings Bank pays for the full cost of long-term disability insurance—meaning that you owe nothing out of pocket. Lincoln Savings Bank also pays for 50% of the cost of short-term disability insurance.

In the event that you become disabled from a non-work-related injury or sickness, disability income benefits will provide a partial replacement of lost income. Please note that you are not eligible to receive short-term disability benefits if you are receiving workers' compensation benefits.

# **Voluntary Short-Term Disability (STD)**

The Short-Term Disability (STD) plan provides full-time employees with income replacement while disabled and unable to work due to a non-occupational illness or injury, including pregnancy. The benefit payment is based on your employment status.

After exhausting your PTO, your STD benefits begin on the 1st consecutive day of your disability for accident, and on the 8th day for sickness. STD replaces up to 60% of your monthly income with a maximum benefit of \$3,000 per week for up to 26 weeks per claim.

received medical treatment consultation, care, or services, including diagnostic measures, or have taken prescribed drugs or medicines within three months prior to the effective date for any injury or sickness, a period of disability related to that diagnosis will not be covered for 12 months for LTD after your effective date. The same applies to STD except you will not be covered for 3 months after your effective date Pregnancy is not considered a pre-existing condition if you enroll when you are first eligible.

# Pre-existing condition limitation: If you've

You can contact **Mutual of Omaha** by phone at (800) 228-7104, on online at their website by clicking HERE

# Long-Term Disability (LTD)

Long-Term Disability (LTD) is available after your short-term disability benefits end or 180 days after the illness or injury whichever is greater.

If you elect LTD, the benefit is 66.67% of salary, up to a maximum of \$12,000 per month. Disability benefits last until you recover or reach your Social Security retirement age.

# Filing a Short-Term **Disability Claim**

In order to receive benefits, you must report your disability claim to Mutual of Omaha if you will be out of work for more than three days.

Visit www.mutualofomaha.com to learn more about STD henefits

# Accident, Critical Illness, and Hospital Indemnity Insurance

# **Mutual of Omaha**

These benefits offer an extra layer of protection for you and your family. The payment these benefits provide is in addition to any other insurance you may have and is yours to spend as you wish—to help cover bills or for everyday living expenses. These plans do not provide health insurance coverage and do not replace the medical plans. See the full plan summaries for more information.

#### **ABOUT THE PLANS**

- You must be actively working a minimum of 30 hours per week to be eligible.
- To be eligible for coverage, your dependents must be able to perform normal activities, and not be confined (at home, in a hospital, or in any other care facility), and any child(ren) must be under age 26.
- The premiums for this insurance are paid in full by you.
- An open enrollment is available for a period of up to 90 days each policy year. During this time, you may elect critical illness insurance for the first time or request increased insurance up to the Guarantee Issue amount for yourself and any dependents without providing health information.

#### **ACCIDENT COVERAGE**

Accident insurance pays a cash benefit directly to you when you are injured and require medical services due to a covered off-the-job accident that occurs on or after your coverage date. The benefit amount depends on the type of injury and care received. If you elect coverage for yourself, you may also purchase coverage for your spouse and/or children.

#### **CRITICAL ILLNESS**

Critical illness insurance pays a lump-sum cash benefit directly to you if you are diagnosed with a covered illness or condition on or after your coverage effective date. You can choose the amounts of \$10,000 or \$20,000 for yourself. If you purchase coverage for yourself, you may purchase coverage for your spouse and/or children. Child insurance is automatic. Each covered person who completes a preventive care visit, health screening, or wellness treatment can receive a \$50 Wellness Incentive.

Coverage	Coverage Amount	Guaranteed Issue Amount
Employee	\$10,000 increments up to \$20,000	\$20,000
Spouse	100% of Employee's Principal Sum, up to \$20,000	\$20,000
Child(ren)	50% of employee's Principal Sum, up to \$10,000	All child amounts are guaranteed

#### HOSPITAL INDEMNITY INSURANCE

Hospital indemnity insurance pays a daily benefit if you have a covered stay in a hospital, critical care unit, or rehabilitation facility that occurs on or after your coverage date. The benefit amount is determined based on the type of facility and the number of days you stay. If you elect coverage for yourself, you may also purchase coverage for your spouse and/or children equal to your own coverage.

Type of Stay	Coverage
Hospital Admission	\$1,000 per admission
Daily Hospital Confinement	\$100 per day up to 30 days
ICU Admission	\$2,000 per admission
Daily ICU Confinement	\$200 per day
Daily Newborn Nursey Care Confinement	\$75 per day

<sup>\*</sup>Admission benefits are payable up to a combined total of 2 days per policy year and are not payable on the same day; Confinement benefits are payable up to a combined total of 30 days per policy year unless otherwise noted and are not payable on the same day as Hospital/ICU admission benefits.



# **Employee Assistance Program**

# **Employee & Family Resources**

We understand that we all face serious problems at some time in our lives and Lincoln Savings Bank is committed to providing help during those times.

The EAP is designed to assist staff members and families with personal challenges in many different areas including: depression, stress management, drug and alcohol abuse, relationships, grief, domestic violence, legal and financial issues, parenting, childcare and elder care. Participation in the EAP is voluntary, confidential and free of cost for the first **6** visits. For those who require referrals for long-term treatment, there may be fees for the services of outside providers.

However, EAP counselors will coordinate referrals, whenever possible, to take advantage of existing insurance coverage and community resources in order to minimize costs. We encourage you and your eligible family members to take advantage of our EAP benefit and to reach out to Employee & Family Resources



#### 24 Hours a Day 7 Days a Week

Professional counselors are available to provide you with support, guidance and resources. Spanish and TTY/TDD phone lines also available.

Learn more by visiting the website by clicking HERE

800.327.4692



# **Discount Program**

# **Avant PerkSpot**

Your Avant Perks Savings Program powered by PerkSpot is a one-stop-shop for thousands of exclusive discounts.

#### **PERKS NEAR YOU**

Located in the New & Featured section, Perks Near You allows you to use your location to see all of the discounts near you, wherever you are! Discounts can be filtered by category and distance.

#### **PERSONALIZED SAVINGS**

Let us know what you're interested in so we can ensure you're seeing the perks you'll most enjoy, front and center on your Discount Program Home Page.

#### **BRANDS FIT FOR EVERY LIFESTYLE**

Looking for something specific? The Brands page, found in the Popular Perks section, is an easy and quick way to search for all of the discounts available to you.

#### **SUGGEST A BUSINESS**

Don't see what you're looking for? Head to the Suggest a Business page, found in the upper right-hand corner of your Home Page under Account Options, to suggest your favorite brands and local spots be added to your Discount Program.

#### **DEDICATED SUPPORT**

PerkSpot's customer support team is here to help with any questions. We've included important information regarding our availability should you need assistance!



#### Save Money in 25+ Categories Including:

Automotive

Electronics

Travel

Health & Wellness

Apparel

Food

Education

Tickets & Attractions

## **How to Register**

Sign up at avantperks.perkspot.com

When you're on your the Avant Perks & PerkSpot site, click "Create Your Account" to get started.

# **Wellness Programs**

With your benefits from Lincoln Savings Bank, you have access to several programs designed to enhance your overall well-being. Take advantage of healthcare benefits through virtual visits and preventive care, enjoy discounted gym memberships, and participate in incentivized healthy activities. Your benefits provide the perfect opportunity to achieve a balanced and healthier lifestyle.



## **Preventive Care**

Our plan covers several preventive services such as annual screenings, flu shots, etc. at no cost! Click HERE for a full list of covered preventive services.



## **My Rewards**

Earn up to \$245 on a reloadable Mastercard by completing healthy activities like knowing your online account, understanding your plan and managing your medications! Sign in to your Health Partners online account and click on the trophy icon to get started.



## **Tobacco Cessation**

Get help support while quitting tobacco and vaping. With a health coach, medicine to support, and digital resources you don't have to quit alone. Call 800-311-1052 to sign up with a health coach.



# **Weight Management**

Talk with a health coach if you're an adult with a body mass index of 30 or greater. Get started by calling 952-883-7800.



### **Active&Fit**

Access to 12,200+ gyms, 9,700+ on-demand videos and 1:1 well-being coaching for \$28/month. You can switch gyms at anytime, and you can enroll your spouse for an additional fee. Click <u>HERE</u> to find a gym near you.



## **Virtual Visits**

HealthPartners works with <u>Virtuwell</u> so you can access a doctor 24/7, even from the comfort of your home! Save time by downloading the app today and entering your HealthPartners member information.



# **Employee Assistance Program**

Employee & Family Resources provides access to 3 free counseling sessions for you and your household. This can help with depression, stress management, relationships, grief, legal and financial issues, childcare and elder care among many other things.



# LivingWell

Understand your health by taking a health assessment to understand your current health and identify areas to focus on. Then, choose activities tailored to your goals, such as improving your diet, reducing stress, or increasing physical activity. Access this by going HERE.



# **Save Money**

Get discounts on exercise equipment, eyeglasses and more. Go to HealthPartners website by clicking <u>HERE</u> to get started.



## Wellbeats

Offers on-demand fitness classes anytime, anywhere. This activity will be available to you through your health and well-being experience. Access this by signing into your <u>HealthPartners</u> online account and selecting the Living Well tab.

# **CuroNow**

CuroNow is a free, caregiver-first app that helps families and care teams organize appointments, share tasks, and stay connected in one secure place. It's designed to reduce stress and make caregiving easier for everyone.

#### **Key Features**

- Organize appointments, notes, and documents in one secure place
- Share updates and delegate tasks with siblings, partners, or aides
- Set reminders and see everything in one clear view
- Keep everyone in sync—without the stress

#### **Download the CuroNow App Today:**

Create your care hub, invite a sibling or partner, and start sharing tasks—because when you share the load, you share the love.

Click **HERE** to learn more and download the app.





# **Financial**

Your well-being extends beyond the physical and emotional—it applies to your financial health too. Lincoln Savings Bank offers a variety of benefits designed to help you save and grow your money.



# 401(k) Plan

To help plan for your future, Lincoln Savings Bank self-sponsors a 401(k) plan. The 401(k) plan is a great way to plan for your future, as you control how much you save and how you invest your funds.

#### **Eligibility**

If you are an employee, you will be automatically enrolled after three months of employment.

#### **Enroll and Manage Your 401(k)**

Enrolling in the 401(k) is a separate process and is not part of the annual benefits enrollment. Enroll or make changes at any time by logging in to ADP.

#### **Your Contributions**

Newly hired employees will be automatically enrolled at a 3% salary deferral rate. You can change your deferral percentage at any time by logging in to ADP. There is a 90% deferral maximum per pay period.

IRS CONTRIBUTION LIMITS	
Salary Deferral	\$23,500
Catch-Up Contribution (age 50-59 or 64 and older)	\$7,500
Catch-Up Contribution (age 60-63)	\$11,250

You can make contributions in three ways:

- **Before-Tax:** Contributions are made on a before-tax basis. Withdrawals and earnings are taxable.
- **Roth:** Contributions are made on an after-tax basis. Withdrawals and earnings are tax-free.
- After-Tax: Contributions are made on an after-tax basis.
  Withdrawals are tax-free, but earnings are taxable.

#### **Company Match**

Lincoln Savings Bank matches your retirement savings dollarfor-dollar:

- 100% match on the first 3% of your pay that you contribute
- 50% match on the next 2% of your pay
- That means when you contribute 5%, you'll receive a 4% total company

The company match is contributed to your account each pay period, so the money is put to work right away.

You become eligible to receive the company match when you:

- · Complete three months of full-time service
- Work 1,000 hours or more during a 12-month period

#### **Investment Options**

To help you grow your savings, you have access to a wide range of investment options to fit many investment styles. These include:

- Target Date Fund: You can invest in a target date fund, based on the date you expect to retire. The mix automatically rebalances to become more conservative as your retirement date nears.
- Self-Directed Brokerage: The self-directed brokerage account lets you choose and manage your own investments.

#### Vesting

You are immediately vested (the money is yours to keep) in your own contributions as well as the company match contributions as soon as they are deposited.

# Time Off

### **Paid Time Off**

Lincoln Savings Bank provides Paid Time Off to be used for vacation, sick time, medical appointments and personal needs.

Full-time and part-time employees working more than 20 hours per week are eligible for paid time off (PTO). Commissioned employees are not eligible for PTO.

PTO may be taken in two-hour increments for non-exempt employees, and four-hour increments for exempt employees.

Full-time employees may carry over up to 40 hours of PTO into the next year.

Paid Time Off will be allocated according to the following schedules (exceptions may apply):

- Part-time Employees Working more than 20 Hours per Week:
  - 72 hours per year
- Full-time Employees:
  - Anniversary Year of Service 1-9 years: 22 PTO days per year
  - Anniversary Year of Service 10+ years: 27 PTO days per year

# **Holidays**

- New Year's Day
- Martin Luther King Jr Day
- President's Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- · Columbus Day
- Veterans Day
- Thanksgiving
- Christmas Day

## **Bereavement Leave**

Full-time employees requiring time off for the death, funeral or estate settlement of a member of their immediate family may be eligible for a paid bereavement leave of absence. Full-time employees may be granted time off up to a maximum of five (5) paid days in the event of a death of a spouse, domestic partner, parent, child, grandparent, spouse's grandparent, brother, sister, grandchild, spouse's parents, spouse's brother or sister. Part-time employees may be granted appropriate unpaid time off as determined by the supervisor, not to exceed three (3) days. You may extend your bereavement time with PTO.

## **Paid Parental Leave**

LSB is proud to support growing families. We offer 12 weeks of paid leave for birthing parents, and 4 weeks of paid leave for non-birthing parents. We believe full physical and emotional recovery from the birth of a child is critical for long-term health and reduced stress and anxiety help employees return to work more focused and engaged.

#### **Eligibility**

Employees must have at least 1,250 hours of service in the past 12 months, aligning with FMLA eligibility.

#### **Birthing Parents**

- 7 weeks of fully paid leave.
- Combined with short-term disability (STD), eligible employees will receive up to 12 weeks of paid time.
- If STD is not elected, 5 of the 12 weeks will be paid at 40%.

#### **Non-Birthing Parents**

- 4 weeks of fully paid leave.
- Leave can be used within 6 months of birth or adoption.

Additionally, new parents receive a \$500 baby gift (bonus) upon birth or adoption of a child.

Week	September 1= 12 weeks
1	STD Elimination Period = LSB Pays Parental Leave (1)
2	60% STD Pay/ LSB Pays 40%
3	60% STD Pay / LSB Pays 40%
4	60% STD Pay / LSB Pays 40%
5	60% STD Pay / LSB Pays 40%
6	60% STD Pay / LSB Pays 40%
7	LSB Pays Parental Leave (2)
8	LSB Pays Parental Leave (3)
9	LSB Pays Parental Leave (4)
10	LSB Pays Parental Leave (5)
11	LSB Pays Parental Leave (6)
12	LSB Pays Parental Leave (7)





#### **ESOP**

LSB offers an Employee Stock Ownership Plan (ESOP), a qualified retirement plan, which gives employees ownership interest in the Bank, in the form of shares of stock.

Each year, LSB will contribute ~3% of your salary to your ESOP. Employees do not have to contribute in order to receive a company contribution.

Eligibility requirements for the plan:

- Age of 21 or older
- Completed 1 year of service (1,000 hours)

# Vesting Schedule

- Year 1 0%
- Year 2 20%
- Year 3 40%
- Year 4 60%
- Year 5 80%
- Year 6 100%

## **Volunteer Time Off**

LSB's Volunteer Time Off program aligns with our core values of acting like owners and building strong communities and encourages all our employees to demonstrate these principles consistently throughout the year. All employees are eligible for this benefit on day one. Employees can choose a charity of their choice or work together with other company members on a team volunteer activity.

Full-time employees are eligible for 16 hours per calendar year

Part-time employees are eligible for 8 hours per calendar year.

Examples of use of VTO:

- · Donating time at a food bank
- Cleaning up a highway, park, or beach
- Planning an organization fundraiser or event





# **Employee Contributions**

Rates shown occur on a Monthly basis.

Medical	\$4,500 Traditional	\$5,500 HDHP
Employee	\$196.10	\$97.20
Employee & Spouse	\$518.84	\$308.26
Employee & Child(ren)	\$530.00	\$363.96
Family	\$821.50	\$496.80

Dental	Dental Plan 1	Dental Plan 2	Dental Plan 3
Employee	\$47.25	\$40.56	\$33.66
Employee & Spouse	\$89.80	\$77.19	\$60.36
Employee & Child(ren)	\$95.55	\$82.13	\$64.24
Family	\$147.85	\$144.88	\$105.44

Vision	
Employee	\$8.25
Employee & Spouse	\$16.24
Employee & Child(ren)	\$15.38
Family	\$20.00

Hospital Indemnity	
Employee	\$15.41
Employee & Spouse	\$34.37
Employee & Child(ren)	\$20.62
Family	\$41.24

Accident	
Employee	\$6.17
Employee & Spouse	\$10.35
Employee & Child(ren)	\$13.71
Family	\$18.59

# **Employee Contributions (Cont.)**

Rates shown occur on a Monthly basis.

Supplemental Life (Includes AD&D rates)			
Age of Insured on 1st Day of the Month (Coinciding with or next following change in age)	Your Rate \$1,000 of Coverage	Your Spouse's Rate Per \$1,000 of Coverage	
Under 25	\$0.060	\$0.060	
Age 25-30	\$0.080	\$0.080	
Age 30-34	\$0.100	\$0.100	
Age 35-39	\$0.120	\$0.120	
Age 40-44	\$0.200	\$0.200	
Age 45-49	\$0.260	\$0.260	
Age 50-54	\$0.310	\$0.310	
Age 55-59	\$0.370	\$0.370	
Age 60-64	\$0.570	\$0.570	
Age 65-69	\$0.860	\$0.860	
Age 70-75	\$3.760	\$3.760	
Age 75-79	\$4.550	\$4.550	
Age80+	\$4.550	\$4.550	
All Child(ren) rate	\$0.120	\$0.120	

Supplemental Life and AD&D Insurance			
Coverage Level	Coverage Amount	Guaranteed Issue Amount	
Employee	5x Annual Salary, up to \$500,000	\$0.060	
Spouse	\$5,000 increments up to \$250,000, not to exceed 100% of Employee's Benefit	100% of Employees Benefit, up to \$50,000	
Child(ren)	\$10,000	\$10,000	

Dependent Basic Term Life Cost	
Dependent Rate per Unit	\$6.15

Short-Term Disability	
Rate per \$10 of weekly benefit	\$0.383

Critical Illness Insurance			
Age	\$10,000	\$20,000	
0-29	\$3.80 \$7.60		
30-39	\$5.60 \$11.20		
40-49	\$10.80 \$21.60		
50-59	\$22.70	\$45.40	
60-69	\$48.90 \$97.80		
70-79	\$93.60 \$187.20		
80+	\$142.90	90 \$285.80	

# **Additional Benefits**



Free small safe deposit box: up to \$15



Free checks on deposit accounts



Free Cashier Checks



# **How Do I Enroll?**

## 1. Log In

Log into Lincoln Savings Bank using the ADP enrollment portal.

## 2. Choose Your Plan

Utilize your benefit booklet to help choose the lowest-cost, best-value health plan based on your medical needs. If you don't take action, you will not have coverage for next year.



#### Reminder

Benefits enrollment must be completed within 30 days of your qualifying life event.

Make sure you hit 'submit' to save your elections.

# **Benefits Definitions**

## **Deductible**

An amount you could owe during a coverage period (usually one year) for covered health care services before your plan begins to pay. An overall deductible applies to all or almost all covered items and services. A plan with an overall deductible may also have separate deductibles that apply to specific services or groups of services. A plan may also have only separate deductibles. (For example, if your deductible is \$1000, your plan won't pay anything until you've met vour \$1000 deductible for covered health care services subject to the deductible.)

### Coinsurance

Your share of the costs of a covered health care service, calculated as a percentage (for example, 20%) of the allowed amount for the service. You generally pay coinsurance plus any deductibles you owe. (For example, if the health insurance or plan's allowed amount for an office visit is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health insurance or plan pays the rest of the allowed amount.)

## **Out-of-Pocket Maximum**

The most you could pay during a coverage period (usually one year) for your share of the costs of covered services. After you meet this limit, the plan will usually pay 100% of the allowed amount. This limit helps you plan for health care costs. This limit never includes your premium, balance-billed charges or health care your plan doesn't cover.

# Copayment

A fixed amount (for example, \$15) you pay for a covered health care service, usually when you receive the service (sometimes called "copay"). The amount can vary by the type of covered health care service.

#### Network

The facilities, providers and suppliers your health insurer or plan has contracted with to provide health care services.

## **Network Provider**

A provider who has a contract with your health insurer or plan who has agreed to provide services to members of a plan. You will pay less if you see a provider in the network. Also called "preferred provider" or "participating provider." There is no first dollar coverage with the exception of preventative services.

## **Provider**

An individual or facility that provides health care services. Some examples of a provider include a doctor, nurse, chiropractor, physician assistant, hospital, surgical center, skilled nursing facility, and rehabilitation center. The plan may require the provider to be licensed, certified, or accredited as required by state law.

## **Out-of-Network Provider**

A provider who doesn't have a contract with your plan to provide services. If your plan covers out-ofnetwork services, you'll usually pay more to see an out-of-network provider than a preferred provider. Your policy will explain what those costs may be. May also be called "non-preferred" or "nonparticipating" instead of "out-of-network provider."



# **Important Contacts**

Coverage	Contact	Phone	Website
Medical	HealthPartners	800-883-2177	<u>HealthPartners Medical</u>
Dental	Wellmark	800-524-9242	Wellmark Dental
Vision	Avesis	855-214-6777	<u>Avesis</u>
Health Reimbursement Accounts	EBS	800-373-1327	mybenefits@ebs-tpa.com
Flexible Spending Accounts	EBS	800-373-1327	mybenefits@ebs-tpa.com
Health Spending Accounts	EBS	800-373-1327	mybenefits@ebs-tpa.com
Life and AD&D	Mutual of Omaha	800-655-5142	Mutual of Omaha
Disability	Mutual of Omaha	800-655-5142	Mutual of Omaha
Hospital Indemnity	Mutual of Omaha	800-655-5142	<u>Mutual of Omaha</u>
Critical Illness	Mutual of Omaha	800-655-5142	<u>Mutual of Omaha</u>
Accident Insurance	Mutual of Omaha	800-655-5142	Mutual of Omaha
Employee Assistance Program	Employee & Family Resources	800-327-4692	Employee & Family Resources



