Benefits Summary



Pinnacle www.pinnaclend.com Pinnacle employees are our most valuable resource. Our goal is to offer you the most comprehensive, cost-effective, and competitive benefits package possible. Pinnacle's benefit plans and programs are designed to furnish you and your family with access to quality health and welfare programs and provide protection against the hardship caused by catastrophic events.

Medical, Dental, and Vision

Available to full-time/part-time employees after

Must notify your plan administrator within 60 days of the QLE. Coverage can last for 18 - 36 months For more information visit or call: www.discoverybenefits.com/

Flexible Spending Account Dependent Care Discovery Benefits Group Life Insurance/

Long Term Disability

Critical Care Protection

Hospital Advantage

401 (k) Plan

expense per calendar year, Effective the 1st /16th of the month following waiting period. **GROUP LIFE:** Hourly Employees \$15,000 Salary Employees \$50,000 Pinnacle pays 100% of premium LONG TERM DISABILITY:

Critical Care: Pays out upon diagnosis of having a specified

Hospital Advantage: Pays for transportation, ambulance,

health event. Daily, transportation, lodging and daily

benefits payable for covered hospital ICU.

ER, doctors visits, hospital confinement

Available to full-time employees 1st of the month following 60 day waiting period to enroll. Pinnacle pays 100% of premiums Supplemental dependent available

Available to full-time employees 1st/ of the month

following 60 day waiting period to enroll.

For more information visit or call: www.unum.com 1-866-679-3054

For more information visit or call:

www.aflac.com

1-800-992-3522

GUARDIAN' LTD pays 60% of monthly earnings of up to \$6,000 **Short Term Disability** STD: 60% of weekly earnings up to \$750.00 per week. Available to full-time employees 1st of the month Coverage between 8-90 days do to medical. following 60 day waiting period to enroll. www.unum.com Whole Life Insurance: Builds cash value 1-866-679-3054 Whole Life Insurance Term Life, AD &D: May purchase up to 5 x's salary Term Life, Accidental Death & (maximum \$500,000) Guarantee Issue /Non-medical Employee pays premiums Dismemberment maximums are: Employee \$100,000. Spouse \$25,000, Child \$10,000 Cancer: Plan Benefit pays on a variety of cancer related Critical Illness treatments. Accident Insurance: Plan benefit covers on & off job GUARDIAN' Accident Insurance coverage.

For more information visit or call:

\$1.500 Per Member per benefit vear of North Dakota Consolidated Omnibus Budget Reconciliation Act of 1985 CLASSIC BLUE 100% Routine evaluation, twice per year. COBRA continuation of medica (2019) Amounts are per pay period X-ray once per benefit year (bitewing). Single: \$109.59 available to eligible employees 80% of Fillings, 50% Crowns, dentures, bridges group coverage or Qualifying Life Event (QLE). Amounts Single + Dep. \$200.91 50% of allowed charge for Orthodontic Service \$2000 lifetime include 2% admin fee. maximum per year Family \$ 283.90 Med-(\$)\$545.39/(\$+D)\$ 959.92(Fam) \$ 1417.49 Vision Single \$2.31 Family \$4.96 North Dakota Dental-(\$)\$46.10/(Fam)\$120.46 All costs above are per pay period based on 24 pay periods. Routine Vision Exam including refraction/glaucoma screen. Vision Services Inc. Vision-(S)\$12.75/(Fam)\$27.34 One Exam per benefit year. Lenses: Once per benefit year. Amounts are per pay period Frames: Allowance \$100 every other year. Contacts: Can be substituted in place of prescribed frames and/or lenses per allowance. Maximum Contribution Per Year: \$2,550 Available to full-time employees 1st/ 16th of the Dependent Maximum Per Year \$5,000 month following 60 day waiting period to enroll. Tax deferred treatment of money saved for medical/daycare 1-866-451-3399

Pinnacle MATCHES 6% contributions by up one year of employment (exclusions apply) to 2016 maximum contribution \$18,000. Milliman Pre-Tax contributions. 2016 maximum contribution for Catchup \$6,000 6 Years until employee is 100% vested in the plan. Blue Cross Single \$98.92 Single+Dep (s) \$174.10 Family \$ 257.09 Available to full-time employees 1st/16st of the For more information visit or call: Deductible Single \$1,000 (S), \$1,500 (SD), \$2000 (F) month following 60 day waiting period to enroll. www.bcbsnd.com/ Blue Shield Out-of-Pocket Max \$3,500(S), \$5250 (SD), \$7,000 (F) 1-800-342-4718 🕸 🗓 ND Single/Sing+Dep/Family coverage available for CLASSIC BLUE Office Visit \$25/Emergency \$75/Chiropractic \$25 medical, dental, and vision benefits. Amounts are per pay period Preventative Care & Contraceptive 100% Prescription Formulary\$15/Non-Formulary\$15 (80/20) Dental - Single \$8.36 Family \$21.85 Dental Services Corp COBRA

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www.pinnaclend.com Enroll online at: www.millimanbenefits.com