



High-Level Summary of 2023 Benefits

The company offers 100% paid employee health insurance for medical, dental and vision. Buy-up plan options, supplemental insurance options and ability to add spouse and/or dependent coverage are available; enrolling in these may result in an out-of-pocket monthly premium.

Plan options are “un-bundled” which allows for employees to pick and choose coverage as needed. Please note, the employee must be enrolled in a plan option in order to enroll a dependent/spouse.

Choose Between Three Medical Plans (Blue Cross of Idaho):		
HSA Qualifying Plan (with Health Savings Account)	\$4,000 Deductible PPO Plan (Standard)	\$1,500 Deductible PPO Plan (Buy-Up)
In-network deductible: \$4,000 ind. / \$8,000 family	<ul style="list-style-type: none"> In-network deductible: \$4,000 ind. / \$8,000 family 	<ul style="list-style-type: none"> In-network deductible: \$1,500 ind. / \$3,000 family
Medical total out-of-pocket in-network: \$5,500 ind. / \$11,000 family	<ul style="list-style-type: none"> Medical total out-of-pocket in-network: \$6,850 ind. / \$13,700 family 	<ul style="list-style-type: none"> Medical total out-of-pocket in-network: \$4,500 ind. / \$9,000 family
In-network Physician co-pay: deductible/co-insurance	<ul style="list-style-type: none"> In-network provider co-pay (same for both): <ul style="list-style-type: none"> ○ Tier 1: \$0 / Tier 2: \$20 	
In-network Specialist co-pay: deductible/co-insurance	<ul style="list-style-type: none"> In-network provider co-pay (same for both): <ul style="list-style-type: none"> ○ Tier 1: \$20 / Tier 2: \$40 	
Prescription drugs: deductible/co-insurance	<ul style="list-style-type: none"> Prescription drugs (same for both): \$15 co-pay for generic drugs, \$35 co-pay for brand drugs 	
<ul style="list-style-type: none"> All medical plan options cover eligible preventative care services 100%. Blue Cross of Idaho coverage extends to any providers within the Blue Cross Network. 		

Choose Between Two Dental Plans (Delta Dental):	
Dental Option 1 (Standard)	Dental Option 2 (Buy-Up)
<ul style="list-style-type: none"> In-network deductible: \$50 Annual maximum: \$1,250 	<ul style="list-style-type: none"> In-network deductible: \$50 Annual maximum: \$1,750 Annual rollover amount: \$300 Child orthodontia: 50%; \$1,500 lifetime max.
*Details based on per insured	

One Plan for Vision Coverage (Blue Cross of Idaho):
<ul style="list-style-type: none"> Free annual vision exam Prescription glasses - frames/lenses: Annual \$130 allowance with a co-pay of \$25 Contacts (instead of glasses): Annual \$130 allowance with no co-pay
*Details based on per insured

Supplemental Insurances (Aflac):
<ul style="list-style-type: none"> Voluntary Life Short-Term Disability Accident Critical Illness Hospital Indemnity Pet (Nationwide)