

Benefits Summary

September 1, 2020—August 31, 2021

ALKUGovernment

Medical Insurance



Preferred Provider Organization (PPO)

A PPO plan offers the freedom to receive care from any in- or out-of-network doctor, specialist or hospital without a referral. You have a deductible to meet and once the deductible is met, coinsurance (or the cost share between you and the carrier) kicks in. The types of medical services that accumulate towards your deductible are inpatient hospital stays, outpatient surgeries, labs (blood work) and x-rays (MRIs, PET scans, CT scans, etc.). If you go to the doctor, see a specialist, utilize the ER or take a prescription drug, you'll pay a copay for those specific services. Copays do not accumulate towards your deductible but they do accumulate towards your overall out-of-pocket maximum.

High Deductible Health Plan (HDHP) PPO with Health Savings Account (HSA)

This medical plan option is comprised of two components (1) a High Deductible Health Plan (HDHP) and (2) a tax-exempt savings account called a Health Savings Account (HSA).

The HDHP is a high deductible PPO plan that provides health care benefits after the deductible has been met. All medical services, with the exception of preventive care, are paid for by you at 100%, less carrier discounts, prior to meeting your entire annual deductible. This includes routine office visits, procedures, lab work, prescription drugs, etc.

The HSA is a bank account paired with your HDHP allowing you to set aside money on a tax-free basis to pay your out-of-pocket qualified medical, dental, and vision expenses throughout the year or in the future. You own the money in your HSA account and it is yours to keep – even when you change plans or retire. The funds roll over from year to year to be used when you really need them.

Choice of plan options:	PPO	High Deductible PPO
Network	Preferred Blue PPO	Blue Care Elect HSA
Deductible Individual		
(In-Network / Out-of-Network) Family	\$2,000/ \$2,000	\$4,000 / \$4,000
(In-Network / Out-of-Network)	\$4,000 / \$4,000	\$8,000 / \$8,000
Coinsurance In-Network / Out-of-Network	100*% / 80% *80/60% DME	100*% / 80% *80/60% DME
Out-of-Pocket Max		
Individual (In-Network / Out-of-Network) Family	\$5,450 / \$5,450	\$6,450 / \$6,450
(In-Network / Out-of-Network)	\$10,900 / \$10,900 Includes Deductible	\$12,900/ \$12,900 Includes Deductible
Physician Services (In-Network) Well Adult / Well Child Physician Office / Specialist Visit X-Rays / Lab Diagnostics	100% \$15 after Deductible Deductible then 100%	100% \$0 after Deductible \$0 after Deductible
Emergency Room	\$150 copay after Deductible	\$150 copay after Deductible
Urgent Care (In-Network)	\$15 copay after Deductible	\$0 after Deductible
Prescription Drugs (In-Network) Generic/Formulary/Non-Formulary Prescription Out-of-Pocket Max	Copays: \$15 / \$30 / \$50	Deductible then Copays:
Individual / Family	\$1,000 / \$2,000	\$15 / \$30 / \$50



Dependent Care Account (DCA) | HRCTS

A DCA account enables you to deduct money out of your payroll on a pretax basis and directly deposit these funds into an account with HR concepts. These funds can later be withdrawn from this account on a tax free basis to pay for eligible Dependent Care Expenses. Dependent Care Expenses include Preschool, Day Care, Babysitting, After School Programs, and Adult Day Care.

The maximum reimbursement limit is \$5,000 per year or \$2,500 if married and filing separately. If a spouse is not working, but is a student, then the monthly maximum will be \$200 for one child and \$400 for 2 or more children. All of these limits apply to the date the eligible expense is incurred, not the date billed or paid. If you wish to participate in the DCA, you need to complete the HR Concepts DCA enrollment form.



Flexible Spending Account (FSA) | HRCTS

Flexible Spending Accounts (FSA) allow you to save money on a pre-tax basis to pay for qualified medical expenses and/or dependent care expenses you may incur throughout the year. The money you put into your FSA is done so on a pre-tax basis. This means you are lowering your taxable income and also not paying taxes when the money is used for qualified expenses.

Health Care FSA - You may contribute up to \$2,750 per plan year to pay for qualified medical, dental and vision expenses for yourself and eligible family members. Funds in this account can be used to cover all eligible expenses on your tax dependents even if they are not enrolled under your health care plan. Eligible reimbursable expenses include medical and dental plan deductibles and copays (if applicable), orthodontia expenses not covered by your dental plan, prescription drugs, prescription eye glasses and contact lenses, Lasik eye surgery and much more.

Limited Purpose FSA - If you enroll in the HDHP/HSA plan and open a health savings account, you are not able to enrolled in the Health Care FSA, since you're already putting tax-free dollars aside to pay for qualified expenses. You are, however, able to enroll in the Limited Purpose FSA, which allows you to pay for eligible out-of-pocket dental and vision expenses. You are able to put up to \$2,750 into your Limited Purpose FSA for 2020.

Dependent Care FSA - You may contribute up to \$5,000 per plan year to pay for qualified eligible dependent care expenses. Funds in this account are saved on a tax-free basis.

FSAs do have a use-it-or-lose-it provision, so be conservative when electing how much to contribute. You may be eligible to rollover up to \$500 to the next year.



Health Reimbursement Account (HRA) | HRCTS

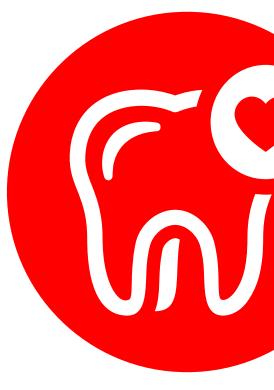
When you arrive at the doctor's office or hospital present your BCBS of MA card. You will not need to pay for procedures that are subject to the deductible at the time of service but you may be required to pay co pay. The doctor will then bill BCBS. This will ensure all network discounts are being applied and you get proper credit towards your deductible. BCBS will process the claim and send an Explanation of Benefits (EOB) to you, the doctor and to HR Concepts outlining your deductible responsibility.

HR Concepts will then process your claim according to ALKU's HRA plan design. They will send a check directly to the provider for ALKU's portion of your deductible. HR Concepts will send a notification to you via email indicating a check was issued and the amount of the check.

To check anytime if the claim has been paid you can log online into to your account with HR Concepts at www.hrconcepts.biz. HR Concepts is available for any questions pertaining to claims, bills or benefits.

ALKU, via HR Concepts, will pay the first \$1000 per individual / \$2,000 maximum per family plan deductible expenses. Employees will be responsible for the remaining deductible expenses.

Dental Insurance



Preferred Provider Organization (PPO)

These dental plans allow the flexibility to select any dentist in-network or out-of-network. By staying in-network, the contract between your dentist and insurance carrier will make your annual benefit period maximum last longer.

Dental coverage focuses on preventive and diagnostic procedures in an effort to avoid more expensive services associated with dental disease and surgery. The type of service or procedure received determines the amount of coverage for each visit. Each type of service fits into a class of services according to complexity and cost.

Preventive:

- Annual cleanings (2 per year)
- X-rays (1 per year)
- And more

Basic:

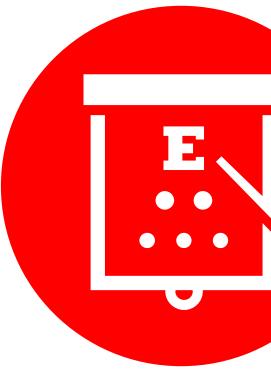
- Fillings
- Simple extractions
- Root canals
- And more

Major:

- Dentures/bridges/partials
- Crowns
- And more

Choice of plan options:	PPO In-Network / Out-of-Network	PPO (Buy-Up Plan) In-Network / Out-of-Network
Network Name	Dental Blue Select PPO \$1,000	Dental Blue Select PPO \$2,000
Individual Deductible (Family = 3x)	\$25 / \$25	\$25 / \$25
Office Visit Copay	None	None
Preventive Coinsurance	100% / 100%	100% / 100%
Basic Coinsurance	90% / 80%	90% / 80%
Major Coinsurance	60% / 50%	60% / 50%
Annual Plan Maximum	\$1,000 / \$1,000	\$2,000 / \$2,000
Orthodontia Coinsurance	N/A	N/A
Orthodontia Lifetime Maximum	\$500	\$2,000

Vision Insurance



Vision insurance helps offset the costs of routine eye exams and also helps pay for vision correction eye wear, like eyeglasses and contacts, that may be prescribed by an eye-care provider.

By accessing in-network vision providers, you're able to reap the benefit of true vision insurance coverage. You're eligible for an eye exam and lenses or contact lenses every 12 months and frames every 24 months. Out-of-network providers will merely offer you an allowance towards your vision services.

Eye-care providers include many independent optical shops and national chains.

Vision Plan Details:	Frequency	In-Network	Out-of-Network
Network	Exam Plus Standard II Insight		
Eye Exam	Every 12 months	\$10 copayment	\$50 max allowance
Lenses - Single vision - Bifocal - Trifocal - Lenticular	Every 12 months*	\$25 copayment	Allowance varies
Frames	Every 24 months*	\$150 allowance	\$74 max allowance
Elective Contacts	Every 12 months**	\$150 allowance	\$104 max allowance

^{*}Vision benefit frequencies are based on the date of service within the policy year
** You cannot get contacts and glasses in the same calendar year

EyeMed has a series of perks to be aware of for being an enrolled member on the plan:

Contacts Direct.com - Order contacts and have them shipped directly to your door. Orders will be shipped for free once the prescription is verified. Visit contactsdirect.com/welcome for more information.

Glasses.com - Choose from a large selection of frames and lenses, including designer brands. To purchase glasses or lenses, you'll need a valid prescription written within the last 12 months.

Medical Insurance Rates

PPO (Preferred Blue PPO)

Weekly Contributions:	You Pay
Employee Only	\$0
Family	\$0

HDHP/HSA Network (Blue Care Elect HSA)

Weekly Contributions:	You Pay
Employee Only	\$0
Family	\$0

2020 HSA Contributions

IRS Max Contribution:	Employee Only	Family
Max HSA Contribution	\$3,550	\$7,100
Catch-up Contribution (Age 55 and Older)	\$1,000	

Dental Insurance Rates

PPO (Dental Blue Select \$1,000)

Weekly Contributions:	You Pay
Employee Only	\$0
Employee & Spouse	\$0
Employee & Child(ren)	\$0
Family	\$0

PPO (Dental Blue Select \$2,000)

Weekly Contributions:	You Pay
Employee Only	\$2.35
Employee & Spouse	\$5.39
Employee & Child(ren)	\$4.99
Family	\$7.02

Vision Insurance Rates

Vision Plan (Exam Plus Standard II Insight)

Weekly Contributions:	You Pay
Employee Only	\$0
Employee & Spouse	\$0
Employee & Child(ren)	\$0
Family	\$0

Accident Insurance Rates

Weekly Contributions:	You Pay
Employee Only	\$3.39
Spouse	\$1.83
Child(ren)	\$1.87

Additional Benefits





Basic Life and AD&D Insurance | Lincoln Financial

Basic Life Insurance helps ease your loved ones' financial burden. Your designated beneficiary will receive a benefit if you pass away from a covered accident or illness. In addition, Accidental Death and Dismemberment (AD&D) provides a benefit to your beneficiary if you pass on or become dismembered due to a specifically covered accident. Always make sure your beneficiaries are updated. The cost of the benefit is 100% paid for by the company.

Basic Life/Accidental Death & Dismemberme	
Benefit Amount	1x Basic Annual Earnings per employee - Life 1x Basic Annual Earnings per employee - AD&D



Voluntary Term Life and AD&D Insurance | Lincoln Financial

Voluntary Term Life/AD&D allows you to purchase additional coverage at your own financial expense to ease your loved ones' financial burden if something should happen to you. Costs are determined on group discounted rates. Always make sure your beneficiary information is updated.

An employee's maximum benefit election cannot exceed 6x their basic annual earnings. A spouse's maximum election cannot exceed 100% of what the employee takes out on themselves.

	Employee	Spouse	Child(ren)
Coverage Increments	\$10,000	\$5,000	\$1,000
Maximum Benefit Amount	\$500,000	\$100,000	N/A
Guaranteed Issue Amount	\$150,000 (Under age 70)	\$30,000 (Under age 70)	\$10,000

The cost of the benefit is 100% paid for by you. Your age and the amount of insurance you elect determines the premium you'll pay. Costs will go up as you age. See your plan documents for more detail.



Short & Long-Term Disability | Lincoln Financial

If you become ill or suffer an injury that prevents you from working, this form of disability insurance replaces a portion of your income for a defined maximum period of time.

Disability Coverage	Short -Term	Long -Term
Waiting Period	Begins on the 8th day of continuous injury or illness	Begins on the 91st day of continuous injury or illness
Benefit Amount	60% of weekly earnings	60% of monthly earnings
Maximum Benefit	\$2,000 per week	\$5,000 per month
Length of Payment Period	12 weeks	SSNRA/To age 65
Premium Contribution	Company paid	Company paid

Accident Insurance

Accident insurance can provide benefits of set dollar amounts for covered accidents that occur on and off the job. Accident insurance is offered to all eligible full-time employees. The benefits vary based on type and severity of the accident.

Accident Coverage	Employee	Spouse	Child(ren)
Benefit Amount	\$25,000	\$12,500	\$5,000
Accident Coverage Type	On and Off Job		



Tips to Save Money

Preventive/Wellness Exams Covered at 100%

- Preventive care is equal to one physical exam per year per enrolled member
- Females get an annual well-woman exam covered at 100% in addition to their annual physical exam
- No out-of-pocket costs apply these exams are fully covered as long as your physician codes them as preventive

Prescription Drugs

- Ask your doctor if there's a generic version of any medication you're currently taking or being prescribed
- Take advantage of the Prescription Savings Programs at major retailers
- Ask about free samples from your doctor and/or manufacturer rebates

High Cost Scans, X-Rays & Tests

- MRI, PET scans, CT scans, etc. are nearly 2/3 less costly at free-standing, in-network imaging centers than at hospitals
- Whenever possible, compare cost options prior to scheduling your necessary services

Accessing Medical Care

The ER is a costly experience for issues that aren't true emergencies. There are alternatives that can offer quick care at a much more affordable cost. The key is finding these alternatives today when you're happy and healthy.

- Doctor's office: for symptoms that aren't life threatening, call and let them know your symptoms require immediate attention
- Convenient Care Clinics: use when you don't have a primary doctor or can't get an appointment. Good for fever, sore throat/strep, coughs/congestion, sports physicals, UTIs, etc. Visit cvs.com or walgreens.com to find a clinic near vou*
- Urgent Care (UC): less costly than the ER; can treat sprains/strains, minor breaks, mild asthma, minor infections, rashes, small cuts, burns, etc.

Medical PPO	
Carrier	Blue Cross Blue Shield of MA
Website	www.home.bluecrossma.com
Phone Number	800-262-2583
Network	Preferred Blue PPO
Policy Number	686567
Medical HDHP/HSA	

Preferred Blue PPO		
686567		
Medical HDHP/HSA		
Blue Cross Blue Shield of MA		
www.home.bluecrossma.com		
800-262-2583		
Blue Care Elect HSA		
2364557		

Vision		
Carrier	Blue Cross Blue Shield of MA	
Website	www.home.bluecrossma.com	
Phone Number	800-262-2583	
Network	Exam Plus Standard II Insight	
Policy Number	19109	
Basic Life and AD&D Insurance		
Carrier	Lincoln Financial	
Website	www.lfg.com/public/individual	
Phone Number	877-275-5462	

	Dental PPO Plan's
Carrier	Blue Cross Blue Shield of MA
Website	www.home.bluecrossma.com
Phone Number	800-262-2583
Network	Dental Blue Select PPO
Policy Number	\$1,000 Plan: 002354809 \$2,000 Plan: 002365424

Voluntary Term Life and AD&D Insurance		
Carrier	Lincoln Financial	
Website	www.lfg.com/public/individual	
Phone Number	877-275-5462	

Accident Insurance	
Carrier	Guardian
Website	www.guardianlife.com
Phone Number	888-482-7342

Short & Long-Term Disability Insurance		
Carrier	Lincoln Financial	
Website	www.lfg.com/public/individual	
Phone Number	877-275-5462	

Flexible Spending Account	
Carrier	HRC Total Solutions
Website	www.hrcts.com
Email	customerservice@hrcts.com
Phone Number	603-647-1147

Human Resources Contact Information	
Contact	Danielle Ledoux
Email Address	dledoux@alku.com
Phone Number	978-289-5776

Brought to you by:



NOTE: This Benefits Summary is merely intended to provide a brief overview of the Company's employee benefit programs. Employees should review the Company's employee handbook and actual plan documents for the precise terms of such programs. In the event of any inconsistency between this Benefits Summary and such governing documents, the governing documents will control. The Company reserves the sole and absolute discretion and right to interpret, apply, amend, discontinue or terminate, without prior notice, any and all of the benefit programs referenced herein. Voluntary plans are individual policies and are not considered sponsored or endorsed plans by your employer. See a benefit counselor for your customized quote for any additional benefit programs.