Full-time Employee Benefit Guide Effective January 1, 2018



FULL-TIME EMPLOYEE BENEFIT GUIDE

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"...and if you spend yourselves in behalf of the hungry and satisfy the needs of the oppressed, then your light will rise in the darkness, and your night will become like the noonday."



Mission, Vision & Commitment Statements

Mission

Feeding God's starving children hungry in body and spirit.

Vision

Through God, Feed My Starving Children (FMSC) will strive to eliminate malnutrition and starvation in children throughout the world by helping to instill compassion in a generation that hears and responds to the cries of those in need, until all are fed.

Our commitment to excellence

We will provide for our employees a satisfying work environment that is based on trust, mutual respect and doing the right thing.

Human Resources mission statement

Strategically partnering in building FMSC's global operations by recruiting, developing, rewarding and retaining our national workforce and aligning it with our Christian mission and values.



OUR EMPLOYEES ARE OUR MOST VALUABLE ASSET. THAT'S WHY FMSC IS COMMITTED TO PROVIDING EMPLOYEES WITH A COMPREHENSIVE BENEFIT PROGRAM THAT SUPPORTS HEALTH AND WELLNESS.

Stay healthy Maintain work / life balance **Feel secure** Medical Insurance Health and wellness discounts and resources • 401(k) Retirement Plan Dental Reimbursement Plan • Short-term and Long-term Disability Insurance (through HealthPartners and MetLife) Health Savings Account Basic Life and Accident Insurance • Paid Time Off and Holidays • Flexible Spending Accounts • FMSC gear Voluntary Life and Accident Insurance Vision Insurance Adoption & Infertility Treatment Assistance

Contact Information

Refer to this list when you need to contact one of your benefit vendors. For general information, contact Human Resources.

Retirement Plan – 401(k) Pentegra 866-633-4015 pentegra.com

Medical Insurance HealthPartners 952-883-5000 or 800-883-2177 healthpartners.com

Health Savings Account HR Simplified 888-318-7472 hrsimplified.com

Flexible Spending Account HR Simplified 888-318-7472 hrsimplified.com

Dental Reimbursement FMSC Human Resources 763-267-6325

Vision Insurance EyeMed 866-939-3633 eyemedvisioncare.com

Short-term and Long-term Disability

MetLife FMSC Human Resources 763-267-6325

Life and Accident Insurance MetLife

FMSC Human Resources 763-267-6325

Other Value-added Benefits

MetLife FMSC Human Resources 763-267-6325

Paid Time Off and Holidays FMSC Human Resources

763-404-7871

Adoption & Infertility Treatment

Assistance FMSC Human Resources 763-267-6325

FMSC Gear FMSC MarketPlace 763-267-6314



Retirement Plan - 401(k)

Who is eligible and when:

Effective January 1, 2018, all newly eligible employees (regular employees age 18 or older) will be automatically enrolled in the plan at 1% of pay on their plan entry date. Your plan entry date is the first day of the month following a one-month waiting period from your date of hire. For example, if you are hired on January 2, you'll be enrolled in the plan on March 1. You can change or cancel the deferral election at any time.

Benefits you receive:

FMSC provides this benefit to help you save a portion of your income for retirement. To encourage saving for retirement, FMSC will contribute up to 4% safe harbor matching contributions as shown below:

Contribution

Employee Deferral	Employer Match	Total
1%	1%	2%
2%	2%	4%
3%	3%	6%
4%	3.5%	7.5%
5%	4%	9%
>5%	4%	>9%

Plan features:

You may:

- 1. Roll over account balances from a prior employer's plan and/or IRA
- 2. Defer up to 90% of your eligible compensation
- 3. Elect to contribute pre-tax or post-tax (Roth) deferrals

Your:

- 1. Contributions are 100% vested
- 2. Employer match contributions are 100% vested



Medical Insurance

Who is eligible and when:

Full-time employees regularly scheduled at least 30 hours per week or expected to average at least 30 hours per week over a 12-month period are eligible to enroll in this plan effective the first day of the month following their full-time hire date . Coverage is also available to eligible spouses and dependents under age 26 regardless of student or marital status.

There are three medical plan options to choose from for the 2018 plan year. All three plan designs utilize the Open Access network with access to HealthPartners' largest PPO network. A high level overview of these plan options can be found below. Please refer to the Certificate of Coverage for specific coverage levels and/or benefit exclusions.

FMSC's Medical Plan Options: Effective January 1-December 31, 2018

		PLAN OPTION #1 \$1,000 - \$40	PLAN OPTION #2 \$1,500 - 75% THREE FOR FREE	PLAN OPTION #3 \$4,000 - 100% EMBEDDED HSA
Deductible	Individual	\$1,000	\$1,500	\$4,000
	Family	\$3,000	\$4,500	\$8,000
Co-Insurance		25%	25%	0%
Medical Out-of-Pocket	Individual	\$4,250	\$4,500	\$4,000
	Family	\$8,500	\$9,000	\$8,000
Preventive Care		0%	0%	0%
Lab Services		0%	Deductible, then 25%	Deductible, then 0%
X-ray and Diagnostic Ima	ging	Deductible, then 25%	Deductible, then 25%	Deductible, then 0%
Office Visits (For Illness or	lnjury)	\$40 copay	First three visits free;	Deductible, then 0%
Urgent Care		\$40 copay	then deductible and 25%	Deductible, then 0%
Convenience Care/Retail H	lealth Clinic	\$20 copay	No charge	Deductible, then 0%
Virtuwell		No charge	No charge	Deductible, then 0%
Emergency Room		Deductible, then 25%	Deductible, then 25%	Deductible, then 0%
Ambulance Services		Deductible, then 25%	Deductible, then 25%	Deductible, then 0%
Outpatient Hospitalizatio	'n	Deductible, then 25%	Deductible, then 25	Deductible, then 0%
Inpatient Hospitalization		Deductible, then 25%	Deductible, then 25%	Deductible, then 0%
Prescription Drugs		\$15/\$50/\$100	Deductible, then 25%	Deductible, then 0%
		\$15/\$50/\$100 20%; up to \$200 per Rx	\$15/\$50/\$100 20%; up to \$200 per Rx	Deductible, then 0% Non-Formulary-Not Covered

Employee Medical Contributions:

Monthly employee contributions for each medical plan option are illustrated below. Medical plan premiums are deducted from your paycheck on a pre-tax basis. These rates are based on 26 per-pay-period deductions each year.

Plan Option #1: \$1,000 - \$40 copay

	EMPLOYER Monthly Premium	EMPLOYEE Monthly Premium	EMPLOYEE Per Pay Period Premium
Employee Only	\$380.02	\$126.66	\$58.46
Employee + Spouse	\$700.05	\$478.00	\$220.62
Employee + Child(ren)	\$615.04	\$319.80	\$147.60
Family	\$875.06	\$543.66	\$250.92

Plan Option #2: \$1,500 - Three for Free (The three visits apply to office visits and Urgent Care)

	EMPLOYER Monthly Premium	EMPLOYEE Monthly Premium	EMPLOYEE Per Pay Period Premium
Employee Only	\$395.30	\$84.56	\$39.03
Employee + Spouse	\$725.69	\$389.99	\$180.00
Employee + Child(ren)	\$635.54	\$249.80	\$115.29
Family	\$905.83	\$437.77	\$202.05

Plan Option #3: \$4,000 - 100% Embedded HSA

	EMPLOYER Monthly Premium	EMPLOYEE Monthly Premium	EMPLOYEE Per Pay Period Premium
Employee Only	\$384.71	\$33.78	\$15.59
Employee + Spouse	\$704.34	\$268.66	\$124.00
Employee + Child(ren)	\$619.47	\$152.65	\$70.45
Family	\$879.20	\$292.57	\$135.03

Find a HealthPartners Network Provider:

To find participating providers in the Open Access network:

- Log on to healthpartners.com
- To find participating pharmacies in the Open Access network:
 - Log on to healthpartners.com/pharmacy

Additional services offered by HealthPartners:

Member Services:

As a HealthPartners member, you have personal support when you need it. Contact Member Services when you have questions about your coverage or health. Member Services is able to assist with questions regarding your coverage, claims, account balances and finding a doctor or specialist, as well as additional health plan services. They can also connect you with the Nurse, Pharmacy or Behavioral Health Navigator programs to help you further understand your benefits and find the care that you need. They can be reached Monday-Friday, 7 a.m.-7 p.m. CST, by calling the number on the back of your ID card: 952-883-5000 or 800-883-2177.

CareLine Services:

Members are able to make a free call to a registered nurse who will help answer your questions about whether you should see a doctor, home remedies and medicines you are taking. They are available 24 hours a day and can be reached at 612-339-3663 or 800-551-0859.

Nurse Navigators:

The Nurse Navigators assist you in understanding your health care benefits, as well as how to choose the appropriate treatment option. They can be reached Monday-Friday, 7 am to 7 pm CST, by calling the number on the back of your ID card: 952-883-5000 or 800-883-2177.

BabyLine:

The BabyLine is a great resource for your questions about your pregnancy or new baby. This line is available 24 hours a day at 612-333-2229 or 800-845-9297.

Frequent Fitness Program:

HealthPartners provides covered members up to a \$20 credit toward their health club membership dues when they work out 12 times or more per month at a participating health club. The household savings maximum is \$40. Participating health clubs include Anytime Fitness, Curves, LA Fitness, Life Time Fitness, Snap Fitness, YMCA, YWCA, local community centers and many more!

Healthy Discounts:

Being a HealthPartners member has benefits. Simply show your HealthPartners Member ID card to participating retailers to receive Healthy Discounts on exercise equipment, classes, diapers, child care and kid items, healthy eating discounts, eyewear, braces, spa treatments and more! Additional discounts can be located at <u>healthpartners.com/discounts</u>.

Health Savings Account (HSA)

Who is eligible and when:

Employees who enroll in the \$4,000 High Deductible Health Plans (HDHP) can set up a Health Savings Account (HSA) if they:

- Are not covered under another medical plan that is not a HDHP, including a Flexible Spending Account, unless it is a Limited Purpose account which can only be used for dental and vision expenses
- Are not enrolled in Medicare
- · Cannot be claimed as a dependent on someone else's tax return

An HSA can be effective as early as the HDHP's effective date if the employee enrolls within that month. If the employee doesn't enroll in the HSA within the month that the HDHP is first effective, then the HSA would be effective as soon as the employee's HSA enrollment form has been processed and the account opened.

Benefits you receive:

The HSA is a tax-favored account that can be set up to pay for current and future medical expenses. The benefits of an HSA include:

- Tax-Deductible Money contributed to the account is tax deductible
- Tax-Free Money and interest in the account is tax-free for qualified expenses
- Tax-Deferred Leftover accumulated money can grow tax deferred to help fund retirement
- Yours to Keep Contributions to your account are yours to keep forever, until you choose to use them

Employee's contributions to their account can be changed at any time. The annual contribution maximums are \$3,450 for individuals or \$6,900 for a family. Employees 55 or older may make an additional \$1,000 catch-up contribution.

The money in the account can be used to pay for any "qualified medical expense" permitted under federal tax law for you, your spouse and/or dependent(s), even if your spouse and/or dependent(s) are not covered by the HDHP. Qualified expenses include most medical care and services, dental care and vision care. For a complete list of eligible expenses, please visit irs.gov.



Flexible Spending Account (FSA)

Who is eligible and when:

Full-time employees regularly scheduled at least 30 hours per week or expected to average at least 30 hours per week over a 12-month period are eligible to enroll in this plan effective the first day of the month following their date of hire.

Benefits you receive:

A Flexible Spending Account provides you with an important tax advantage that can help you pay for eligible health care and dependent care expenses on a pre-tax basis. By paying for certain expenses on a pre-tax basis, you lower your taxable income and increase your take-home pay.

Health Care Reimbursement FSA

This allows you to pay with pre-tax dollars for certain IRS-approved medical care expenses not covered by your insurance. The annual maximum amount you can elect to contribute to the plan is \$2,650 (minimum contribution is \$100). Expenses can be incurred by you, your spouse or eligible dependents. Examples include:

- The medical plan's co-pays, deductible and coinsurance
- Medical supplies such as hearing aids, crutches and orthopedic shoes
- Vision services, including contact lenses, contact lens solution, eye examinations, eyeglasses and laser eye surgery
- Dental services and orthodontia (contact Human Resources if you use the plan for orthodontia)
- Chiropractic services
- Acupuncture
- Please note: Over-the-counter drugs are not eligible unless prescribed by a doctor

Dependent Care FSA

The Dependent Care FSA allows you to use pre-tax dollars to pay for qualified dependent care expenses such as caring for children under 13 years old or caring for elders. The annual maximum amount you may contribute to the Dependent Care FSA is \$5,000 (or \$2,500 if married and filing separately) per plan year (minimum contribution is \$100).

Examples include:

- The cost of child or adult dependent care
- The cost for an individual to provide care either in or out of your house
- Nursery schools and preschools



Dental Reimbursement

Who is eligible and when:

Full-time employees regularly scheduled at least 30 hours per week or expected to average at least 30 hours per week over a 12-month period are enrolled in this plan effective the first day of the month following their date of hire.

Benefits you receive:

FMSC will reimburse each benefit-eligible employee up to \$1,200 per year for dental expenses, orthodontia expenses or premiums paid to obtain individual dental insurance for the employee, spouse, and/or dependents. Employees hired after January 1 are eligible for a pro-rated amount. To receive this reimbursement, the employee must complete a reimbursement form, attach the receipt and submit the form to Human Resources for processing.

Vision Plan

Who is eligible and when:

Regular employees are eligible to enroll in this plan effective the first day of the month following their date of hire.

Benefits you receive:

Reduce your out of pocket expenses for eye care by enrolling in this plan. Receive \$130 allowance toward contacts or frames per covered member, plus discounts on anything over the \$130 allowance, additional lens options and even Lasik. Note that this plan does not include an annual eye exam. If you are enrolled in FMSC's HealthPartners medical insurance, an annual eye exam is covered under those plans.

Employee Vision contributions:

	EyeMed Vision Plan	
Tier of Coverage	Employee Per Pay Period Premium	Employee Annual Premium
Employee only	\$2.09	\$54.36
Employee + Spouse	\$3.97	\$103.32
Employee + Child(ren)	\$4.18	\$108.72
Family	\$6.15	\$159.84

Disability Insurance

Who is eligible and when:

Full-time employees regularly scheduled at least 30 hours per week or expected to average at least 30 hours per week over a 12-month period are enrolled in these plans effective the first day of the month following their date of hire.





Benefits you receive:

Employees who become disabled will be provided with short-term and long-term disability income benefits. FMSC pays the entire cost of coverage. Any disability benefit received will be taxable to the employee.

	Short-Term Disability	Long-Term Disability
Income replacement	60% of your pre-disability earnings	60% of your pre-disability earnings
Maximum benefit	\$1,200 per week	\$5,000 per month
Benefits begin	Accident - First day of disability Illness or Childbirth - Eighth day of disability	91st day of disability
Maximum benefit duration	Accident - 13 weeks Illness - 12 weeks	To Social Security Normal Retirement Age (SSNRA)

Basic Life and Accident Insurance

Who is eligible and when:

Full-time employees regularly scheduled at least 30 hours per week or expected to average at least 30 hours per week over a 12-month period are enrolled in these plans effective the first day of the month following their date of hire.

Benefits you receive:

FMSC provides \$25,000 of basic life insurance and \$25,000 of basic accident insurance for benefit-eligible employees. FMSC pays 100% of the cost of this coverage.

The basic life and accident benefits reduce according to the following schedule:

Employee Age	Benefit Reduction
Age 65	Reduces to 65% of original face amount
Age 70	Reduces to 45% of original face amount
Age 75	Reduces to 30% of original face amount
Age 80	Reduces to 20% of original face amount

Voluntary Life and Accident Insurance

Who is eligible and when:

Full-time employees regularly scheduled at least 30 hours per week or expected to average at least 30 hours per week over a 12-month period are enrolled in these plans effective the first day of the month following their date of hire. Coverage is also available to eligible spouses and dependents.

Benefits you receive:

Employees who want to supplement their basic group life and accident insurance benefits have the opportunity to purchase additional coverage for themselves and/or their eligible dependents. Voluntary life and accident insurance are grouped together under our plan, meaning you must elect the same coverage amounts for both.

Voluntary Life Options	Benefit Amount	Guarantee Issue Level*
Employee	The lesser of 5x your basic annual earnings or \$500,000; available in increments of \$10,000	\$100,000 for newly- eligible employees
Spouse**	Increments of \$5,000 up to \$100,000; not to exceed 50% of employee amount	\$25,000 for newly- eligible spouses

Voluntary Life Options	Benefit Amount	Guarantee Issue Level*
Child(ren)** < 19 years old < 26 years old (if a full-time student)	Available in \$1,000, \$2,000, \$4,000, \$5,000 or \$10,000 of coverage. Maximum benefit for children 15 days to 6 months of age is \$500.	\$10,000

*New hires qualify for the guaranteed issue level; to take advantage of this, the application for coverage must be received by Human Resources within 31 days of being eligible for the benefit (your new hire eligibility period) or by the end of the calendar year. If you elect up to the guaranteed issue amount after your new hire eligibility period (and before the end of the calendar year) and do not want to go through the medical review process, you will pay premiums back to your benefit eligibility date.

**In order to elect voluntary life insurance coverage for your spouse and/or your children, you must elect coverage for yourself.

Employee Voluntary Life and Voluntary Accident Insurance Monthly Contributions:

Voluntary life and voluntary accident insurance is paid for by the employee via payroll deduction. For voluntary life insurance, employee and spouse premiums are calculated based on the age of the employee. The monthly costs are as follows:

Voluntary Life	Employee/Spouse Monthly Cost per \$1,000	
Age <35	\$0.086	
35-39	\$.106	
40-44	\$.152	
45-49	\$.229	
50-54	\$.363	
55-59	\$.584	
60-64	\$.896	
65-69	\$1.642	
70+	\$3.349	
70+	\$3.349	
Voluntary Life		
Child(ren)	\$0.24 per \$1,000 (one premium will insure all covered children)	

Voluntary Accident	Monthly Cost
Employee	\$.017/\$1,000
Spouse	\$.017/\$1,000
Child(ren)	\$.051/\$1,000



Other Value-added Benefits

Who is eligible and when:

Full-time employees regularly scheduled at least 30 hours per week or expected to average at least 30 hours per week over a 12-month period are enrolled in these benefits effective the first day of the month following their date of hire.

Will Preparation:

If enrolled in supplemental life insurance, you may receive face-to-face meetings with an attorney to assist with will preparation. Online forms, tools and advice to build state-specific customized wills, powers of attorney and other legal documents are also available. Call 800-821-6400.

Grief Counseling:

Access to up to five face-to-face grief counseling sessions and related services to help cope with the loss of a loved one, divorce, losing a pet or receiving a serious medical diagnosis or critical illness. Call 888-319-7819 or visit metlifegc.lifeworks.com.

Username: metlifeassist Pas

Password: support

Estate Resolution Services:

If enrolled in supplemental life insurance through MetLife, you also have access to real estate attorneys either in face-to-face sessions or through telephone consultation at no cost to you. Call 800-821-6400.

Travel Assistance with Identity Theft Solutions:

Service provides certain types of travel, financial and medical solutions 24/7 when you are more than 100 miles from home, as well as identity theft solutions for you and your dependents. Call 800-454-3679 or visit **webcorp.axa-assistance.com**.

Paid Time Off (PTO)

Who is eligible and when:

Full-time employees regularly scheduled at least 30 hours per week or expected to average at least 30 hours per week over a 12-month period are immediately eligible upon date of hire.

Benefits you receive:

FMSC provides a flexible PTO program that combines vacation, sick and personal time into one bank of time.

A new full-time employee expected to work on average 40 hours per week over a 12-month period accrues 16 days of PTO during the first 12 months of employment. The employee's PTO accrual increases by one day each year for the first ten years of employment, to a maximum of 26 days per year.

A new full-time employee expected to work on average less than 40 hours per week over a 12-month period accrues 12 days of PTO during the first 12 months of employment. The employee's PTO accrual increases by ³/₄ of a day each year for the first ten years of employment, to a maximum of 19.5 days per year.

PTO does not expire, but there is a cap on the amount of accrued unused PTO an employee may have in his/ her bank.

Floating and Paid Holidays

Who is eligible and when:

Full-time employees regularly scheduled at least 30 hours per week or expected to average at least 30 hours per week over a 12-month period are immediately eligible upon date of hire.

Benefits you receive:

Floating holidays – On an employee's full-time hire date and then on each subsequent anniversary, they receive three floating holidays to be used on days of their choosing within the next 12 months.



Paid Holidays

FMSC recognizes the following paid holidays:

- New Year's Day
- Good Friday
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving
- Day after Thanksgiving
- Christmas Eve
- Christmas Day



Adoption & Infertility Treatment Assistance Who is eligible and when:

Regular full-time employees with at least one year of continuous service in a regular full-time position at FMSC are eligible for this benefit.

Benefits you receive:

FMSC will reimburse you up to \$2,500 per calendar year, with a lifetime maximum of \$5,000, for expenses incurred towards adoption and/or infertility treatment.

FMSC Gear

Who is eligible and when:

All employees are immediately eligible upon date of hire.

Benefits you receive:

Employees receive 50% off FMSC T-shirts and \$15 off FMSC sweatshirts sold in our MarketPlace.* *The Donation T-shirt and online purchases are not included.

This document is a brief summary and is not intended as policy or a complete description of benefits. This document is not a guarantee of benefits and is subject to change at any time. Details of each plan are contained in the plan documents which legally govern the operation of the programs. If there is any conflict between this document and any of the plan documents, the plan documents will always govern.