

2027 Full Time Employee Benefit Guide

Oak Harbor Freight Lines

January 1, 2027 - December 31, 2027

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Welcome and Introduction

Oak Harbor values every Employee and believes in offering competitive compensation packages, which include wages and benefits. This guide outlines the benefits offered to Full-Time Employees. Benefits may change during the length of employment, and Employees will be notified of any change as it is known. **Frequently Asked Questions, plan specific details and informational flyers are accessible anytime at www.oakharborbenefits.com or the Dayforce Employee HUB. Employees can also contact the Oak Harbor Human Resources Department by emailing benefits@oakh.com or call 206-865-0167.** This guide is not a guarantee, and Oak Harbor holds the right to amend any benefit in part or, at any time deemed necessary for business purposes.

This benefit guide summarizes the benefit plans that are available to Oak Harbor Freight Lines' benefit eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. The information provided in this guide is not a guarantee of benefits.

Time Off Benefits

Paid Time Off (PTO)

PTO applies to Full-Time (FT), Non-Exempt (Hourly) Employees. It is the amount of time accrued by an Employee, by virtue of their employment. Oak Harbor uses an accrual system for earning PTO hours, meaning each pay period while employed, and in an Active status, a set number of hours are accrued in the Employees PTO bank. The amount of the accrual is based on the Employees' years of service at the rates listed below. PTO can be used for vacations, sickness and other absences. All PTO hours are paid at the Employees' regular hourly pay, at the time the PTO is used, paid down, or paid out due to resignation or termination. For new Employees, PTO begins to accrue at hire but cannot be used until a 3-month introductory period has been completed. As PTO hours are used, the bank declines and as hours are earned, the bank increases.

Years of Service	Driver Accrual (total per year)	Driver Accrual (per pay period)	Office, Dock, Shop Accrual (total per year)	Office, Dock, Shop Accrual (per pay period)
Year 1 (0-11 Months)	80 hours	3.33 hours	72 hours	3 hours
Year 2 (12-35 Months)	120 hours	5 hours	112 hours	4.66 hours
Year 4 (36-59 Months)	136 hours	5.67 hours	128 hours	5.33 hours
Year 6 (60-83 Months)	144 hours	6 hours	136 hours	5.67 hours
Year 8 (84-107 Months)	152 hours	6.33 hours	144 hours	6 hours
Year 10 (108-167 Months)	168 hours	7 hours	160 hours	6.66 hours
Year 15	224 hours	9.34 hours	200 hours	8.33 hours
For a hire date prior to September 22, 1996				
After 20th year	264 hours	11 hours	240 hours	10 hours

PTO "Pay Down": On the Employee's PTO anniversary date (hire date), a review of their current balance is conducted. The Employee is paid out for any hours over the allowed carryover, which is equal to the amount of 1 years' worth of accrual. For example, an Employee earns 160 hours of PTO per year, on their PTO anniversary they have 180 hours in their bank, they would receive a "pay down" of 20 hours on their next check. No Employee shall forfeit any PTO because they have failed to take time away from work.

PTO Pay at Separation: Employees that complete a 3-month introductory period will receive any accrued PTO upon separation of employment. All Employees receive PTO pay according to local laws whenever applicable.

PTO Pay & Position Changes: FT Employees that move to a Part-Time (PT) or Exempt position will be cashed out any accrued, unused PTO on their next paycheck. Employees that move from PT to FT Hourly, or from an Exempt (Salaried) to FT Hourly position, will accrue PTO at the level associated with their hire date, and as of the start of the current pay period.

PTO Hours Used: PTO may be used in any increment available in the Employee's bank. Employees may use up to 12 hours of PTO for full days (entire shift) absences, whether scheduled or unscheduled. Employees must specify the hours of PTO requesting, if more than their normal schedule.

Paid Time Off (PTO) Continued

PTO Absence: Employees and Managers can view current PTO balances in Dayforce.

- *Scheduled Absence:* Employees may schedule time away from work as shown in their PTO bank or will be in their PTO bank at the time of their absence. PTO banks are not allowed to go negative (less than zero).
- *Unscheduled Absence:* PTO will be applied for all hours missed, when absent for sickness or other unplanned reasons. Hours may be applied for a full shift, partial shift or any hours missed. The Company call in provisions must be complied with. All sick leave ordinance laws will be adhered to.
- *FMLA/Medical or Personal Leave:* An Employee on an approved FMLA continuous absence or Medical Leave has the option to use PTO. You must notify your Manager at the time of your leave if you wish to use PTO or not. Employees on Intermittent FMLA or a Personal Leave will have PTO hours applied to days they are absent due to Intermittent FMLA. PTO does not accrue while on a Personal or Medical Leave of Absence. State Leave Programs may or may not impact how your PTO is applied. OHFL abides by all State Paid Leave programs.
- *"No Work":* If an Employee's shift is cancelled due to lack of work, Employees can request PTO to be paid for hours missed.

Donation of PTO: Employees can donate a portion, or all their accrued PTO to another Employee. To receive a PTO donation, Employees must not have PTO to cover time that is needed to care for your own health condition, a family member with a serious health condition or a family emergency. Employees wishing to donate any accrued PTO to an Employee should contact their Manager for approval. All Employees, donating or receiving, must have completed their 90-day introductory period.

Exempt Salaried Employees: **Exempt** (Salaried) Employees do not have any PTO benefits as part of their benefit package. Salaried Employees should see their Manager regarding any time away from work.

Bereavement Leave and Pay

Full-Time, Non-Exempt Employees that have completed the 3-month introductory period are entitled to a maximum of 3 days off, with pay and per incident, to attend the funeral or other family gathering, subject to the following provisions:

- Designated relatives include father, mother, husband, wife, brother, sister, son, daughter, brothers, and sisters having one parent in common; and those relationships called 'step', providing people in such relationships have lived or have been raised in the family home and have continued an active family relationship.
- To be eligible for bereavement leave, Employees must attend or make a bona fide effort to attend the funeral or similar gathering.
- Pay for compensable bereavement leave is 8 hours at the straight-time hourly rate of pay, or 10 hours at the straight-time hourly rate of pay for Employees who work a 4-10 schedule.
- Bereavement leave is not paid while Employees are on a leave of absence, vacation, layoff, or for days falling outside of the regular work week.
- Employees may be asked to provide supporting documentation such as an obituary or funeral program.

In the event of the death of a grandparent, grandchild, aunt, uncle, niece, nephew, parent-in-law, sibling-in-law of the Employee, 1 day off with pay to attend the funeral or other family fathering will be offered.

Jury Duty Pay

Full-Time, Non-Exempt Employees that have completed the 3-month introductory period can be paid up to 10 days (8 hours per day or 10 hours on a 4-10 schedule) each calendar year. Employees must report for jury duty and turn in court documents confirming this. To receive this benefit, Employees must be called in, requiring the Employee to miss normal work shifts. See Management or contact payroll at payroll.dept@oakh.com with any questions.

Grandfathered Sick Pay

Some Employees may have a Grandfathered Sick Bank. These are hours that were rolled over from an old benefit prior to 2020. These hours can be used for Sick leave, which includes call offs when ill, medical appointments, surgery, and caring for family members that are sick. Grandfathered sick banks are not paid out upon time of separation and must be used prior to the use of PTO, if sick. If Employees have this sick bank, Employees have until 12/31/2030 to use it. After this date, the sick leave balance will move to zero.

Holiday Pay

Oak Harbor believes that Employees should have time away from work to spend with families. However, decisions are made based on business needs and Employees may be required to report to work. In general, when a holiday falls on a Saturday, it will be observed on a Friday and if it falls on a Sunday, it will be observed on a Monday. Major holidays falling on a weekend, where it is treated as an "observed" holiday, will be treated as a minor holiday, and will follow the pay outlined below.

Full-Time, Non-Exempt Employees, who have completed the 3-month introductory period, are eligible for 8 hours of holiday pay on the designated holidays. Employees on a 4-10 shift will receive 8 hours of holiday pay if it falls on a non-scheduled day and 10 hours if the holiday is on a scheduled workday.

If required to work on a designated major holiday, Employees will receive holiday pay plus double time for hours worked. If required to work on a designated *minor holiday, Employees will receive holiday pay plus the regular hourly rate for hours worked. Linehaul Drivers, required to work into and out of a major holiday, will receive an additional 6 hours of pay at the regular hourly rate, on top of all other line pay earned. Holidays falling on a weekend will be "observed" on a weekday as designated by the Company. Oak Harbor reserves the right to modify "observed" dates as needed to meet customer expectations.

Oak Harbor may offer the opportunity for Employees, to voluntarily work on a holiday, in lieu of taking the day before or day after off work. These situations are offered to allow Employees the opportunity to spend time with their families. It will most often occur when holidays fall on Tuesday, Wednesday, or Thursday, when some Employees would prefer to take the day off, after the holiday. There will be no financial gain for the Employees or Oak Harbor. When it is appropriate to offer this change, any applicable Employees will receive timely and clear communication from local leadership. Swapping the holiday for another workday will be voluntary. If an Employee chooses to accept this shift change, the hours worked on the holiday will be paid at straight (REG) time. Overtime rules will apply as outlined in the current policy. Employees will continue to receive holiday pay for this day. Employees choosing to swap workdays, and work on a holiday, may request PTO for their original scheduled workday. *Minor Holidays are subject to change of dates depending on business needs.

2027 Holiday Schedule

New Year's Day	Friday, January 1st
Memorial Day	Monday, May 31st
Independence Day*	Monday, July 5th (Observed)
Labor Day	Monday, September 6th
Thanksgiving	Thursday, November 25th
Thanksgiving (Day After)*	Friday, November 26th (Minor)
Christmas Day*	Thursday, December 23rd (Observed)
Christmas Eve	Friday, December 24th
New Years Day 2028*	Friday, December 31st (Observed)

Military Leave Pay

Oak Harbor appreciates those that have volunteered to serve in our armed forces and thank all Employees for this service. Oak Harbor provides a job guarantee for active military duty, in a comparable position (location, duties, pay, etc.), for up to 5 years from the date of active-duty status, unless a greater period is required by state or federal law. Full-Time, Non-Exempt Employees that have completed the 3-month introductory period are eligible to receive military pay of up to 10 days per calendar year. Employees must notify Management as early as possible of the requirement to report for military duty. To receive military pay, Employees must provide a copy of the orders received to Management. Management will notify payroll to ensure proper compensation.

Cell Phone Stipend

All Employees required to use their cell phone for work purposes, are offered a semi-monthly cell stipend. This stipend is paid on each regular paycheck every month. Employees may opt out of receiving this stipend by emailing payroll.dept@oakh.com. The amount of the stipend may vary depending on the Employees' position, and Oak Harbor reserves the right to cancel or change the stipend at any time.

Profit Sharing: Quarterly Discretionary Bonus

Oak Harbor offers a discretionary bonus program to all eligible Employees. Oak Harbor believes that sharing profits when performance is good is a wonderful way to incentivize Employees. When Employees do their part, Oak Harbor is successful and wants to share those profits. The discretionary bonus amount are based on the Operating Ratio (OR) results for the reported quarter, and are paid the following month, once the results are available. Discretionary bonuses are considered earnings and will be subject to normal payroll taxes and 401k contributions. Oak Harbor will attempt to pay out discretionary bonuses separate from the normal payroll dates. Oak Harbor reserves the right to determine whether to pay discretionary quarterly bonuses based on other business factors.

Eligibility

Full-Time Employees (Employees on the Annual Company Profit Sharing Plan are not eligible) must have completed the 3-month introductory period, prior to the start of the designated quarter. For example: to be eligible for the 2nd quarter discretionary bonus (Apr – Jun), Employees must have completed 3-months prior to April 1st. Employees must be employed when the payment is made. Employees must have worked (actual on duty time) during the designated quarter (no minimum hours). If an Employee worked during the designated quarter, but is on leave when payment is made, the Employee is eligible.

Discretionary Bonus Amounts

Profit Sharing will be triggered if the Company Operating Ratio is below 95.99. Payouts as follows:

95.99 - 94.00 OR	$175.00
93.99 - 92.00 OR	$225.00
91.99 - 90.00 OR	$300.00
89.99 - 88.00 OR	$375.00
87.99 - 86.00 OR	$450.00

For every 2 points of improvement below 86, the bonus will increase by another $100.00.

Company Paid Life and AD&D Insurance: Mutual of Omaha

Oak Harbor provides Life and AD&D insurance to Employees at no cost. Employees must select a beneficiary and may update this information at any time through Dayforce. This plan offers the ability to continue coverage should the Employee no longer work with Oak Harbor.

Benefit Amount

Benefit Amount	$25,000
Accidental Death Benefit	In the event of an accidental death, the benefit may double. Please see the policy booklet for further details.
Dismemberment	In the event of accidental dismemberment, a benefit is provided up to a scheduled amount corresponding to the loss. Please see the policy booklet for further details.
Living Care/Accelerated Death Benefit	80% of the amount of the life insurance benefit is available if terminally ill, not to exceed $20,000

DESIGNATE A BENEFICIARY

In the event of your death, Mutual of Omaha will pay your Life and/or AD&D benefits to your designated beneficiaries. Be sure to designate a beneficiary for your Basic Life insurance and any Supplemental Life coverage. You may update your designation at any time. *For Spouse and Child Life policies, you are automatically listed as the beneficiary.

Employee Assistance Program: Canopy/Revive

All Employees, and eligible family members, may use the Employee Assistance Program (EAP) through Canopy/Revive. Services provided through the EAP are completely confidential. The names of individuals who seek services through the EAP will not be shared with Oak Harbor. Employees and family members are provided with 3 FREE sessions per incident, per year: face-to-face, on the phone or via text.

What does the EAP Offer?

When Employees need help with work, home, personal or family issues, the EAP is available at no charge. The purpose of the EAP is to talk with the Employee, or family members, to define the problem, suggest short-term problem-solving steps and refer to other community resources if necessary. Employees can select a professional based on a unique need such as language, ethnicity, LGBTQIA+, racial trauma, religion, veterans, accessibility and more. **The EAP can assist with the following types of inquiries:**

Counseling	Life Resources	Legal Consultations/Mediation
Financial Coaching	Identity Theft	Home Ownership/Housing Support
Pet Resources	Wellbeing Tools	Discounts on travel, self-care and more!

How to contact Canopy/Revive

Counselors and resources are available by phone 24/7/365

- Call: 800-433-2320 \ Text: 503-850-7721 \ Visit: my.canopywell.com with company name Oak Harbor Freight Lines
- Download the Canopy EAP app in the Apple or Google Play stores

Medicare Education and Support Services: SmartConnect

Medicare Support through SmartConnect

Employees or family members (parents, uncles/aunts, siblings, etc.) that are approaching Medicare eligibility, do not have to navigate the process alone. SmartConnect provides access to licensed advisors who can help Employees understand Medicare, compare available Medicare options with the OHFL employer-sponsored coverage, and make an informed decision based on individual needs.

This service is available at no cost to Employees. Participation is voluntary, and an advisor is available to answer questions throughout the process. To get started, use the contact or scheduling information provided below.

What can a SmartConnect Advisor Help With?

- Understanding Medicare eligibility, enrollment timing, and coverage types
- Comparing Medicare plans and your current group health plan
- Answering questions based on your personal circumstances
- Completing enrollment if you choose a Medicare option
- Providing continued support after you enroll

Turning Age 65 Soon?

Employees enrolled in Plan B: High Deductible Health Plan with HSA, and will turn age 65 soon, have important rules to understand.

Key Points

- Employees cannot contribute to the HSA once enrolled in any part of Medicare. Employees can still elect the high-deductible health plan but cannot contribute to an HSA.
- Medicare eligible employees who plan to continue working can delay their enrollment in Medicare Part A and continue to make and receive HSA contributions. This is a common misconception.

Medicare Education and Support Services Continued

Key Points Continued

- Employees that delay Medicare and keep working, that choose to enroll later can still impact the HSA due to the retroactive rule. This is a common and costly surprise if not planned properly. Medicare Part A may be applied retroactively up to 6 months. This "lookback" can make recent HSA contributions ineligible- planning is key!
- If that happens, Employees may need to:
  - Remove those contributions
  - Remove any earnings (interest)
  - Potentially pay taxes and penalties

What Employees Should Do Before Enrolling in Medicare:

Contact SmartConnect to speak with a qualified Medicare advisor. The Advisors support Employees through the Medicare enrollment process and help to navigate the options. Learn More: https://smartmatch.com/connect/oakharbor/ or call 844-772-2015.

401(k) Plan: RBC Wealth Management/NWPS

Save for retirement through the Oak Harbor 401(k) Plan. Employees, age 18 or older, are eligible to participate in Oak Harbor's 401(k) plan. All contribution amounts must be in whole number percentages. Employees can choose the Traditional (Pre-Tax), the Roth (Post Tax) contribution or both. If enrolled in both, the combined contribution cannot exceed the annual IRS limit.

Contribution Limits

The 2027 IRS contribution limit is $24,500. Employees aged 50 and older may contribute an additional $8,500 as a catch-up contribution. Super catch-up contributions for Employees ages 60–63 are automatically made as Roth contributions.

Matching Contributions

The Oak Harbor match will begin after Employees have been employed for 3-months. For a rehired Employee, that previously completed the 3-month introductory period, the match will apply as of the date of rehire. Oak Harbor will match 100% of Employee contributions up to a max of 5%. For example:

- If Employees contribute 2% of wages, Employees are matched 2%, providing a 4% contribution to the 401(k) account.
- If Employees contribute 10% of wages, Employees are matched 5%, providing a 15% contribution to the 401(k) account.

The Oak Harbor match will apply to both the Traditional and Roth contributions. For example, Employees contributing 3% Traditional and 3% Roth will receive the full 5% Oak Harbor match.

Vesting

Employees are always 100% vested in Employee contributions made to the plan. All Oak Harbor matching contributions will adhere to the following vesting schedule based on Years of Service:

Less than 2 years	0%	*For example: if Employees left Oak Harbor after 2 years, Employees would receive the full value of Employee contributions, plus 20% of the value of Oak Harbor matching account. *Employees must work 1,000 hours in a calendar year for that year to count towards vesting.
2 – 3 years	20%	
3 – 4 years	40%	
4 – 5 years	60%	
5 – 6 years	80%	
6 or more years	100%	

For questions or assistance with Employee 401(k) investment options, please reach out to RBC Wealth Management. They can be reached by calling 1-800-759-4029 or emailing retirementplanadvisors.info@rbc.com. For questions about your 401(k) account(s), or to discuss a 401(k) loan, please contact NWPS by calling 888-700-0808 or log into your account at www.yourplanaccess.net/nwps/

Staying Healthy at Oak Harbor

Wellness Program

Employees enrolled in an RGA medical plan, that complete their annual preventive care (annual physical and bloodwork), are enrolled into a twice a year drawing for some great prizes. Spouses enrolled that also complete this program will give the Employee an extra ticket to the drawing. To be eligible, Employees must upload the Wellness Completion Certification form Dayforce. This form can be downloaded from the Employee HUB page in Dayforce. Please see complete program details on the Dayforce HUB.

Reperio Health

Oak Harbor has partnered with Reperio Health to provide at-home preventive care (annual exam and bloodwork) in the comfort of your own home. Through a free mail order kit, Employees and Dependents 18 yrs of age and older can complete their annual checkup with a 30 minute test, guided through the Reperio Mobile App. Follow up with a Doctor via telemedicine to review your results. Billing goes straight to RGA, with no out-of-pocket for Employees. Find more information on the Dayforce HUB under Benefits.

How to Sign Up

1. Access the Reperio Health enrollment link https://reperio.me/OakHarbor or scan QR code.
2. Have your medical insurance ID card available during registration.
3. Complete the online sign-up process and verify your insurance coverage.
4. Select a convenient checkup window and shipping address for your screening kit.

Extended clinic hours are available upon request. During the scheduling process if you need a different time than what's presented online or in the app, contact support@reperiohealth.com.

Virtual Care through MD Live

Get the care you need, when and where you need it, with MD Live Virtual Care, offered through RGA. Through convenient phone or video visits, Employees can connect with board-certified doctors, licensed therapists, psychiatrists, and dermatologists from their home. MD Live offers 24/7 access for urgent care needs, as well as virtual primary care, behavioral health services, and dermatology consultations, helping Employees save time while avoiding unnecessary trips to urgent care or the emergency room. Call 877-596-0967 or Text 'RGA' to 635483 to register with Sophie; the Virtual Health Assistant.

Virtual Healthcare is a Great Option for Routine Issues Like:

Cold & Flu Symptoms	Allergies	Pink Eye
Urinary Tract Infections	Rash	Sinus Problems
Quick Assessment for Severity	Stomach Aches	Skin Issues

Health and Welfare Benefits

Understanding eligibility for benefits is the first step to investing in total well-being and unlocking the full potential of the total rewards package that Oak Harbor offers to Employees and families.

Eligibility and Coverage Start

Full-Time Employees are eligible for health and welfare benefits starting the 1st of the month following 2-months of employment*. Enrollment must be completed before coverage begins. Children are eligible for benefits up to age 26 regardless of dependent, student or marital status. Legal Spouses are also eligible for benefits.

Documentation is required to enroll dependents and must be uploaded to Dayforce within the time frame noted upon submitting your enrollment. Examples include Marriage Certificate or Birth Certificates. Failure to submit timely, may result in loss of coverage for the applicable dependents.

*Employees returning from a leave of absence, that were previously enrolled prior to leave, will have the same benefits reinstated as of the 1st of the month following the return-to-work date.

Dependent Coverage

Children are eligible for Medical, Dental, Vision and prescription benefits up to age 26 regardless of dependent, student or marital status.

Legal Spouses are also eligible for benefits. Documentation is required to enroll dependents. Examples include Marriage Certificate or Birth Certificates.

Dependents added to any health or welfare benefit must follow the same enrollment as the Employee. For example, the Employee cannot be enrolled in medical, dental, vision and the Spouse enrolled in only Dental or Vision.

When Can Employees Enroll?

Employees can sign up for Benefits at any of the following times:

- After completing initial eligibility period (when hired or rehired) within 2 months of Hire Date.
- During the annual open enrollment period.
- During a qualified Life Event (see below) within 2 months of the date of the event.
- After moving into a Full Time, or Part Time as defined by the ACA, status and within 30 days of the change.

Enrollment for all plans must be completed electronically through Dayforce. The Oak Harbor Benefit Website and Dayforce Employee HUB contains additional information, videos, and FAQs to assist. Please visit www.oakharborbenefits.com.

Enrollment Changes through Qualified Life Events

Employees may be able to change some benefit elections upon the occurrence of certain life events. Employees must notify the HR Department within 1 month of the event and complete the necessary steps within 2 months of the date of the event, through Dayforce. These changes in status may include, but are not limited to:

- Marriage or Divorce
- Birth or adoption of an eligible child.
- Change in Employee or Dependent work status that affects his or her benefits.
- Employee or Dependent becoming eligible for Medicare.
- Change in Spouse or Dependent Employment Status (obtaining insurance through his or her employer).

Benefit Termination and COBRA

When health benefits end due to a leave of absence (LOA), dependents aging out, termination or resignation from Oak Harbor, coverage will remain active until the last date of the month in which the event occurred.

Flexible Spending Account (FSA) benefits will not end unless employment ceases. If on a LOA, this will remain active, and arrears will be calculated. Upon return to work from an LOA, arrears will be deducted. Upon termination of employment, the FSA benefits are no longer accessible as of the date of termination.

Health Savings Account (HSA) benefits will not end unless employment ceases. If on an LOA, unless you are using PTO, your contributions will not be made. Employer contributions will cease while on an LOA and will start upon your return to work. Upon termination of employment, the HSA benefits are yours to keep.

Supplemental Benefits (Mutual of Omaha) will end as of your date of termination or leave of absence.

If the benefit termination reason for health benefits qualifies for continued coverage under COBRA, Regence Group Administrators (RGA) will process COBRA paperwork and mail direct to the Employee. Packets are mailed within a few weeks of benefit termination date, to the address on file with Oak Harbor. Employees will have 2 months to enroll in COBRA benefits to have no lapses in coverage.

Medical Plans: Regence Group Administrators (RGA)

Oak Harbor offers the choice between 2 medical plans provided by RGA. Employees can choose from a PPO Plan, a High Deductible PPO Plan, or a Qualified High Deductible Health Plan with a Health Savings Account. Each plan includes medical, dental and vision coverage. The level of benefits received is dependent upon the choice of an in-network or out-of-network provider. Significantly higher benefits will be received when care is obtained from an in-network provider in the RGA Preferred Provider Network. To locate a provider in the RGA network, visit www.accessrga.com.

Employee Contributions

Employee contributions are based on gross wages, and amounts depend on the plan selected. Contributions are paid semi-monthly on every regular check each month. Contributions for RGA plans are deducted from all earnings, including any PTO or bonuses paid out. **Note:** Family coverage is defined as Employee, Spouse and Child(ren). Contributions for the RGA plans are not required if an Employee is on protected leave, such as FMLA.

Employee Contribution Percentage of Gross Wages	Plan A PPO	Plan B HDHP Plan w/HSA
Employee Only	3.0%	0.5%
Employee + Child(ren)	3.5%	1.5%
Employee + Spouse	4.0%	2.0%
Employee + Family (Spouse + Child(ren))	5.5%	2.5%
Spousal Surcharge	$200.00	$200.00

Spousal Surcharge

Spouses that have medical group coverage available through their employer but choose to be on an Oak Harbor RGA plan, which includes medical coverage, will pay a $200/month spousal surcharge. This is paid semi-monthly and $100 is deducted on the 7th and 22nd checks each month. Employees can waive this surcharge if the Spouse is unemployed or does not have medical group coverage through their employer. Any surcharges paid before a waiver is submitted may not be reimbursed back to the Employee. Surcharges are not required if an Employee is on protected leave, such as FMLA. Surcharges are not required if Employees and Spouses are enrolled in Dental or Vision only plans. Surcharges are not required if both are Oak Harbor Employees.

Self – Submitting Claims

If, for any reason, Employees must pay any claim(s) out of pocket that should be paid by insurance…Employees can submit receipt(s) back to RGA for reimbursement. Employees will find the claim reimbursement form on the Oak Harbor Benefit website www.oakharborbenefits.com , the Dayforce Employee HUB or email benefits@oakh.com for more information.

RGA Member Portal & Mobile App

1. Visit www.accessrga.com (or scan the QR code to the right) and choose Washington.
2. Click on the myRGA Member Login button on the top of the page.
3. Employees will need to register and create an account, if this is the first time logging in.
4. Employees must enter name, date of birth, and member ID number EXACTLY as they appear on the member ID card.
5. Employees can download a digital version of their Member ID card as well.

RGA Mobile App:
Quickly and securely access RGA benefits and services while on the go. Employees that have the RGA portal account set up already, can download the free RGA Mobile App in the Apple or Google Play Stores, and use the same log in to access the portal account and the mobile app.

Medical Plans: (RGA) Continued

In-Network vs Out-of-Network

A network is a group of doctors, hospitals and healthcare providers. In-network refers to a health care provider that has a contract to provide RGA health plan services to OHFL Employees at a pre-negotiated rate. Out-of-network refers to a health care provider who does not have a contract.

In-Network Providers	Out-of-Network Providers
Will not bill Employees for charges over the contracted rate.	Can bill Employees however much they want for services
Usually, covered at a higher percentage	Usually, covered at a lower percentage by the plan
Applies to the standard deductible	May have a separate deductible
Applies to the standard out-of-pocket maximum	May have a separate out-of-pocket maximum
Files claims for you	May require Employee to file claims for reimbursement
Meets RGA quality standards	RGA has not reviewed their quality
	May require pre-payment for any services

How RGA Plans Pay Out-of-Network Services

Because out-of-network providers can bill Employees whatever price they want, the RGA plans look at the average regional price for the service provided, this called the **Maximum Allowable Amount**. RGA then pays a percentage of this amount based on the plan's benefit coverage details.

Employees may be billed for the remaining balance for anything over this Maximum Allowable Amount, even if the benefit shows out-of-network coverage at 100%. In this instance, RGA will pay 100% of the Maximum Allowable Amount, and not 100% of the charges billed by the provider.

Cost Example: In-Network vs Out-of-Network Surgery

In-Network Providers	Out-of-Network Providers
Provider charges $20,000 for a surgery	Provider charges $45,000 for a surgery
RGA plan covers $15,000 (the pre-negotiated rate amount)	RGA plan covers $10,000 which is $100% of the maximum allowed amount.
Provider is NOT allowed to bill the Employee for the difference.	Provider may bill the Employee for the $35,000 difference.

Nationwide Coverage with the RGA Network & BlueCard Program

Employees on the RGA Medical Plans can receive the In-Network level of benefits while traveling or living outside of the Pacific Northwest (Washington, Oregon, Idaho, and Utah) service area, through the BlueCard Program. No matter where Employees or Dependents may need services, RGA has you covered under the BlueCard Program. To utilize this benefit when outside the service area, and in need of health care, call 1-800-810-BLUE (2583) from within the United States. Employees can find providers and hospitals at www.accessrga.com.

The BlueCard Program recognizes Preferred (PPO) Providers within the Blue Cross Blue Shield networks nationwide. If care is obtained from a Non-PPO Provider, the claim will be processed at the out-of-network level, and Employees may be responsible for any charges above the UCR or allowable amounts, as well as the applicable coinsurance and deductible. **Note:** If Employees choose to use an out-of-network provider, Employees will be subject to Reference Based Pricing. This means Employees may have more out of pocket costs than seeing an in-network provider.

Employees will show the RGA Member ID Card when using the BlueCard Program, it's best to communicate that coverage is by the local Blue Cross Blue Shield in the Employees state. Example: if John Doe is an RGA member living in Miami, FL, he has access to Florida Blue since that is the local affiliate. **Employees are encouraged to contact RGA 1-866-738-3924 with any problems using the BlueCard Program.**

RGA Medical Plans: In-Network Coverage Details

	Plan A: PPO	Plan B: High Deductible Health Plan w/ Health Savings Account
Calendar Year Deductible		
Per Person	$1,000	$2,500
Maximum Per Family	$2,000	$5,000 Aggregate*
Calendar Year Out of Pocket Maximum (all plans include copays, deductible & coinsurance)		
Per Person	$4,000	$5,500
Maximum Per Family	$8,000	$11,000 Aggregate* $8,500 Ind. in a family
Preventive Care		
Office Visit, Well-Child Care, Immunizations, & Routine Screenings	100% (deductible waived)	100% (deductible waived)
Professional		
Office Visit including Telemedicine	Primary Care: $25 copay Specialist: $40 copay (deductible waived)	80%
Virtual Care – MDLive	$15 copay (deductible waived)	90%
Coinsurance	80%	80%
Inpatient Services	80%	80%
Hospital, Facility/Mental Health		
Inpatient, Outpatient Care and Facility Charges	80%	80%
Outpatient Mental Health	$25 copay (deductible waived)	80%
Rehabilitation (Outpatient)		
Physical, Speech Occupational Therapy	80%	80%
Massage Therapy – up to 24 visits per calendar year	80%	80%
Other Services		
Acupuncture	$25 copay (deductible waived)	80%
Diagnostic X-Ray & Lab Tests	100% (deductible waived)	80%
Imaging	80%	80%
Emergency Room	$150 copay (waived if admitted), then 80%	80%
Chiropractor - up to 30 visits per calendar year	80%	80%
Hearing Benefit 1 exam every calendar year Hearing aids every 2 years	80%	80%

RGA Medical Plans: Out-of-Network Coverage Details

	Plan A: PPO	Plan B: High Deductible Health Plan w/ Health Savings Account
Calendar Year Deductible		
Per Person	$1,000	$2,500
Maximum Per Family	$2,000	$5,000 Aggregate*
Coinsurance	60%	60%
Calendar Year Out of Pocket Maximum (all plans include copays, deductible & coinsurance)		
Per Person	$8,000	$5,500
Maximum Per Family	$16,000	$11,000 Aggregate* $8,500 Ind. in a family
Preventive Care		
Office Visit, Well-Child Care, Immunizations, & Routine Screenings	60%	60%
Professional		
Office Visit including Telemedicine	60%	60%
Other Services		
Inpatient Mental Health	80%	80%
Emergency Room	$150 copay, then 80%	80%
Hearing Benefit 1 exam every calendar year Hearing aids every 2 years	80%	80%

Aggregate: If enrolled in a family plan, each member of the family uses and pays for healthcare services. The amount paid is credited toward the family's aggregate deductible and out-of-pocket maximums. After one or several family members have paid deductible expenses, the combined total of those expenses reaches the $5,000 aggregate deductible. The health plan then begins to pay any expenses of the entire family, at the applicable coinsurance level.

If one family member has high healthcare expenses, and it is enough to meet the family's aggregate deductible of $5,000 then the health plan begins to pay expenses at the coinsurance level for the entire family. Also, the family out-of-pocket maximum will apply for the family before services are covered at 100%; however, no single individual in the family is responsible for more than $8,500 in a calendar year.

Health Savings Account (HSA): HSA Bank
Eligible on RGA Plan B: High Deductible Health Plan

Once the family deductible is met, the plan pays 80% or 60% (varies by network) of all eligible health expenses. Once the family out-of-pocket maximum is met, the plan will pay 100% of eligible health expenses.

Employees enrolled in the Plan B: High-Deductible Health Plan, which meet the eligibility requirements, can contribute to an HSA Account. The High Deductible Health Plan is administered by RGA, and the Health Savings Account is administered by HSA Bank.

Note: The HSA account is automatically opened for Employees upon enrolling in Plan B, so Oak Harbor may begin contributions. The Employee can add contributions on top of the Oak Harbor contributions if they choose, but this is not required. Employees can change contributions at any time during the year.

What is a Health Savings Account?

An HSA is a tax-sheltered bank account that Employees own for the purpose of paying eligible health care expenses for Employees and/or eligible dependents. The HSA is the Employees to keep, even if there is a job change. Employees that leave employment with Oak Harbor can take this HSA anywhere. There is no "use it or lose it" rule. The balance at the end of the year will carry over year-to-year. HSA contributions are pre-taxed and are contributed each pay period. Use the funds to help cover deductibles, out of pocket expenses, prescription costs, etc. Employees can change individual contribution limits at any time.

Oak Harbor Annual Contribution:	IRS 2027 Contribution Limits:
$800 for Employee only coverage	$4,500 for individual coverage, offset from OHFL contribution = $3,700
$1,600 for Employee and Dependent coverage	$9,000 for family coverage, offset from OHFL contribution = $7,400

Employees 55 and over, may contribute an extra $1,000 catch up contribution.

Employee Eligibility

To be an eligible individual and qualify for an HSA, Employees must meet the following requirements:

- Must be enrolled in the Plan B: High Deductible Health Plan.
- Must not be covered by another non-HDHP health plan, such as a spouse's PPO plan.
- Are not enrolled in Medicare, TRICARE, or TRICARE for Life military benefits program.
- Have not received Veterans Administration (VA) benefits within the past 3 months.
- Are not claimed as a dependent on another person's tax return.
- Are not covered by a traditional health care flexible spending account (FSA). This includes Employee spouse's FSA. (Enrollment in a limited purpose health care FSA is allowed)

Expense Reimbursement

The easiest way to use HSA funds is by using the HSA Debit Card at the time an eligible expense is incurred. This card will be issued once an Employee account is created. Employees can withdraw money from an ATM. Employees are encouraged to keep all receipts! Employees must be able to prove that the expense was the Employees, or dependents, in the event of an audit. Employees that use HSA funds for non-eligible expenses, will be charged a 20% penalty tax (if under age 65) as well as federal income taxes.

Dental Plan: Regence Group Administrators (RGA)

Employees and dependents enrolled in RGA Medical Plan A or Plan B as described above, are automatically enrolled in the Dental Plan through RGA. If Employees want to waive medical coverage and only enroll in Dental coverage through RGA then Plan C: Dental Only is an option. Covered Employees and dependents have the option to see any licensed provider and are payable at the preferred level if a Preferred or Participating Provider is seen. To find a provider visit www.accessrga.com.

Voluntary Pre-Authorization

In the event there is a need to have dental work estimated to cost $300 or more, it is recommended to have the dentist submit it to RGA for pre-authorization. RGA will review the intended treatment plan and let the dentist know how much of the bill will be covered. This is recommended to avoid any billing surprises.

Employee Contributions

To enroll in Dental only coverage, Employees must waive the RGA Medical Plan A or B. Dependents follow the same enrollment as the Employee. The cost for Dental only coverage is a flat fee, deducted each regular paycheck, as follows:

Employee Only Coverage	$20.00 per month / $10.00 per check
Employee + Dependent Coverage	$40.00 per month / $20.00 per check

Dental Plan: (RGA) Continued

Benefit	Cost
Calendar Year Benefit Maximum	$2,000
Individual Deductible	$25
Family Deductible	$75
Deductible Waived for Preventative?	Yes
Preventative Care	100%
Basic and Restorative Care	80%
Major and Prosthetics	50%
Orthodontia (Children up to Age 19)	
Braces / Hardware	50%
Lifetime Benefit Maximum	$1,000

Did You Know?
A visit to the dentist is more than just a teeth cleaning. By looking at your mouth, your dentist can tell a lot about your overall health. In fact, he or she may be able to identify early signs of disease, such as diabetes, heart disease, kidney disease, and even some forms of cancer, before you even notice symptoms.

Vision Plan: Regence Group Administrators (RGA)

Employees and dependents enrolled in RGA Medical Plan A or Plan B as described above, are automatically enrolled in the Vision Plan through RGA. If Employees want to waive medical coverage and only enroll in Vision coverage through RGA then Plan D: Vision Only is an option. Covered Employees and dependents have the option to see any licensed provider and are payable at the preferred level if a Preferred or Participating Provider is seen. To find a provider visit www.accessrga.com.

Employee Contributions

To enroll in Vision only coverage, Employees must waive the RGA Medical Plan A or B. Dependents follow the same enrollment as the Employee. The cost for Vision only coverage is a flat fee, deducted each regular paycheck, as follows:

Employee Only Coverage	$5.00 per month / $2.50 per check
Employee + Dependent Coverage	$10.00 per month / $5.00 per check

Benefit	Cost
Routine Eye Examination	Plan Pays 100% up to $60
Lenses and Frames	Plan Pays 100% up to $150
Contact Lenses (in lieu of lenses/frame)	Plan Pays 100% up to $150

Did You Know?
Just by looking in your eyes, a doctor can find warning signs of serious diseases and conditions like high blood pressure, high cholesterol, thyroid diseases, and certain types of cancer. In fact, eye doctors are frequently the first to detect signs of abnormal health conditions.

Pharmacy Coverage: Optum Rx (through RGA)

Below is a brief overview of what Employees can expect to pay for a prescription drug, depending on which category it falls under. To find out what category a specific medication falls under, please go to www.optumrx.com and register. Employees may be able to save money at the pharmacy by using the generic discount programs or taking an over-the-counter alternative. Employees can also click on the QR Code to the right or download the Optum Rx app (for Apple or Google Play) to get started.

Mandatory Home Delivery

Maintenance medications (taken daily, monthly, etc.) will only be filled 3 times at a retail pharmacy. After the 3rd refill, the prescription must be filled via the Home Delivery Program, or the prescription will not be covered by the Plan. Employees and dependents must sign up for this Home Delivery program and can do so at www.optumrx.com.

Optum Rx Home Delivery offers flexible payment options as well. Employees can make a onetime payment upfront, or split payments into 3 equal monthly payments if needed. Skip the trips, save money and stay on track with Home Delivery.

Medications shipped through Home Delivery generally arrive within 5 business days after the order is processed.

Coverage Details

	Plan A: PPO	**Plan B: High Deductible Health Plan w/ Health Savings Account**
Generic Drugs		
Retail Pharmacy	$10 (deductible waived)	100% then 20% (after deductible)
Home Delivery	$20 (deductible waived)	100% then 20% (after deductible)
Maximum Supply	Up to 30 days retail 90 days mail order	Up to 30 days retail 90 days mail order
Preferred Brand Drugs		
Retail Pharmacy	$35 (deductible waived)	100% then 20% (after deductible)
Home Delivery	$70 (deductible waived)	100% then 20% (after deductible)
Maximum Supply	Up to 30 days retail 90 days mail order	Up to 30 days retail 90 days mail order
Non-Preferred Brand Drugs		
Retail & /Home Delivery	30% (deductible waived)	100% then 20% (after deductible)
Maximum Supply	Up to 30 days retail 90 days mail order	Up to 30 days retail 90 days mail order
Specialty Drugs		
Home Delivery	20% (deductible waived)	100% then 20% (after deductible)
Maximum Supply	Up to 30 days mail order	Up to 30 days mail order

IMA Rx: Pharmacy Advocates Program

Cost Saving Pharmacy Program

IMA Rx is a free voluntary program that helps eligible Employees and Family Members access specialty medications at $0.00 copay. The program offers support with complex and chronic health conditions by assisting with medication therapy management. Eligible Employees or covered family members can call 866-530-9989 or email imarx@imacorp.com to enroll.

Flexible Spending Account (FSA): Navia

Healthcare Expense Account (HCFSA)

The FSA healthcare account allows Employees to fund out-of-pocket medical, dental and vision expenses, such as copays, deductibles, and many over-the-counter medical expenses with pre-tax dollars. By paying for out-of-pocket eligible expenses with pre-tax dollars, Employees are not paying Federal Income Tax or FICA tax on the contributions. Employee contributions are made via payroll deductions, semi-monthly on every regular check each month.

2027 Limits: Voluntary contribution of minimum $240 up to $3,500 per plan year into the healthcare expense account.

Employees are encouraged to use the Navia calculation tool for assistance in determining how much to sign up for. This tool can be found at www.naviabenefits.com.

Through Navia's partnership with FSA Store, Employees enrolled in an HCFSA can use their funds to buy eligible over-the-counter items from the site.

Dependent Care Account (DCFSA)

The FSA dependent care account allows Employees to fund the costs of dependent care on a pre-tax basis. The care must be provided by a dependent care center or by an individual who can provide a name, address, and taxpayer identification number. Expenses can include daycare, before/after school care, day camp and elderly care. Dependents must live in the Employees' homes and be under 13 yrs. of age; or if over 13 yrs of age, they must be physically or mentally unable to care for themselves.

Employee contributions are made via payroll deductions, semi-monthly on every regular check each month.

2027 Limits: Voluntary contribution of minimum of $240 up to $7,500 each tax year, combined per household.

Limited Healthcare Account (LHFSA)

Employees enrolled in RGA Medical Plan B: High Deductible Health Plan with an HSA, can participate in an additional. "Limited Healthcare" FSA. Employees can use this Limited Purpose FSA account for eligible out-of-pocket dental & vision expenses only. Employee contributions are made via payroll deductions, semi-monthly on every regular check each month.

2027 Limits: Voluntary contribution of minimum $240 up to $3,500 per plan year into the limited healthcare account.

Important Rules to Keep in Mind

- FSA Healthcare and Limited Healthcare funds are front loaded each January, and Employees are deducted each paycheck throughout the year.
- FSA Dependent Care funds are only available to use as they are deducted per paycheck.
- Employees on leave, and are enrolled in FSA, will generate arrears for missed deductions. Once returned from leave, OHFL will recoup those arrears from future paychecks. You can submit claims for reimbursement.
- If the full amount in the Employees FSA account is not used by 12/31/27, the Employee will lose any remaining funds in the account. You have until 3/31/2028 to submit claims for reimbursement.
- Once enrolled, Employees can create an account to monitor claims. Keep your receipts, in the event of an audit. Employees can submit receipt requests at www.naviabenefits.com.

How Employees Access these Funds

Employees will receive a Debit Card with a Mastercard logo, with their name on the card. Use the card to pay for eligible expenses based on the plan enrolled in. Some plans are not issued a card, and if so, Employees can submit for reimbursement of eligible expenses through the Navia portal at www.naviabenefits.com or by using the MyNavia App available on Apple or Google Play stores. Employees issued a Debit Card can also take advantage of Mobile Pay by using the digital wallet (Apple Pay, Google Pay or Samsung Pay) on the mobile phone.

Voluntary Supplemental Life and AD&D Insurance: Mutual of Omaha

Oak Harbor offers Voluntary Supplemental Life and Accidental Death & Dismemberment (AD&D) Insurance to all eligible Employees and their Dependents. This is paid by Employees via semi-monthly payroll deductions on a post-tax basis. This plan offers the ability to continue coverage should the Employee no longer work with Oak Harbor. Employees must select a beneficiary, which may be updated at any time.

Cost

Life and AD&D rates are based on the Employee, or Spouse age as of the plan effective date of 1/1/2027. If enrolling for the first time as a new Employee, the rates are based on the Employee or Spouse age at the time of enrollment.

Policy Details

	Employee	Spouse	Child
Benefit Amount	Up to $500,000	Up to $500,000 Not to Exceed 100% of the Employee Amount	• Birth to 6 months: $1,000 • 6 months to age 26: Up to $10,000 in $2,000 increments. • Employees are responsible for dropping dependent at 26 yrs. of age.
Benefit Increments	$10,000	$5,000	
Guarantee Amount	$250,000	$25,000	$10,000

Age Reduction

Employee and Spouse Life Insurance coverage is reduced based on each person's attained age. Coverage decreases to 65% at age 70 and to 50% at age 75.

Guarantee Issue

All Employees have a one-time opportunity (when hired) to enroll up to certain limits without providing health information. These limits, as listed in the chart above, are the "Guarantee Amount" (GA). If Employees and/or Dependents want coverage over the guaranteed amount, an Evidence of Insurability form may be required (see below). Employees and Dependents enrolled previously, can increase their amount during a qualified life event or during annual open enrollment, up to the GA amount without providing evidence of insurability. If Employees and dependents do not enroll when first eligible, an Evidence of Insurability form may be required when enrolling or if currently enrolled and increase the coverage amount later.

An Evidence of Insurability form is not required for AD&D enrollments.

Evidence of Insurability (EOI)

The EOI is needed when an Employee requests a coverage amount greater than the guaranteed amount (GA), enrolls outside of their initial enrollment window or if coverage was previously declined. Example: John Doe enrolls for $300,000 coverage for himself. The GA for Employees is $250,000. John will be enrolled in $250,000 automatically but the remaining amount of $50,000 must go to underwriting. So, this can be reviewed, John must fill out and submit the EOI. If John was also enrolling his Spouse in coverage over the $25,000 GA, the Spouse is also required to fill out the EOI. Until the EOI is submitted and approved, Employees will continue paying premiums off the GA amounts. Once Mutual of Omaha has reviewed and approved or declined the request, Employees will be informed through the OHFL Benefits Department. If approved, premium(s) will increase as of the first of the following month, reflecting the approved amount.

How to complete the Evidence of Insurability Form:

1. After submitting the enrollment in Dayforce, if an EOI is needed it will reflect on the enrollment.
2. Employees and appliable Spouses visit www.mutualofomaha.com/eoi through any internet-connected device.
3. Enter Access Code: **D2VD**
4. Complete the form within 30 days of date of enrollment.

Voluntary Supplemental Short-Term Disability Insurance: Mutual of Omaha

Oak Harbor offers Voluntary Supplemental Short Term Disability (STD) Insurance to all eligible Employees on a post-tax basis. This is paid by Employees via semi-monthly payroll deductions on a post-tax basis. This plan offers the ability to continue coverage should the Employee no longer work with Oak Harbor.

STD Insurance allows Employees to continue earning a portion of their salary if unable to work due to an off the job illness or injury.

Cost

The cost of coverage is based on the Employees age and eligible salary-based benefit. Rates are based on the Employees age as of the plan effective date of 1/1/2027. If enrolling for the first time as a new Employee, the rates are based on the Employees age at the time of enrollment.

Policy Details

Benefits Begin	On the 15th day of the disabling injury or illness.
Benefit Duration	Up to 24 weeks
Benefit Amount	60% of basic weekly earnings with a minimum of $25 up to a maximum of $2,000 per week
Pre-Existing Limitations	No pre-existing condition limitations.

For Washington, California & Oregon Employees

Short Term Disability rates are lower in these states like WA, CA and OR offer disability and paid leave benefits. Any benefit allowed under the STD plan will work together with any applicable state benefits. The plans will offset each other; the Employee will not receive 100% of both benefits.

Example: If Jane Doe is off work in Washington and approved for STD benefits, her STD claim will be reduced by the amount she is eligible to receive from Washington Paid Leave. This offset applies even if Jane does not apply for Washington Paid Leave; if she is eligible, STD will not pay the full 60% of her wages.

Important! Employees are strongly encouraged to file a claim for any eligible state leave benefits. Mutual of Omaha or Oak Harbor Freight Lines will not file on the Employees behalf. When an STD claim is filed, Mutual of Omaha will request documentation to appropriately determine eligibility under any state leave program.

Guarantee Issue

All Employees have a one-time opportunity (when hired) to enroll without providing health information. If Employees do not enroll during the eligibility enrollment period, Employees may have to wait for a future annual or life event enrollment period to apply. At that time, Employees may be required to answer health questions on an Evidence of Insurability form.

Evidence of Insurability (EOI)

The EOI is needed when an Employee enrolls outside of their initial enrollment window or if coverage was previously declined. Until the EOI is submitted and approved, Employees will continue paying premiums off the GA amounts.

How to complete the Evidence of Insurability Form:

1. After submitting the enrollment in Dayforce, if an EOI is needed it will reflect on the enrollment.
2. Employees and appliable Spouses visit www.mutualofomaha.com/eoi through any internet-connected device.
3. Enter Access Code: **D2VD**
4. Complete the form within 30 days of date of enrollment.

Once Mutual of Omaha has reviewed and approved or declined the request, Employees will be informed through the OHFL Benefits Department. If approved, premium(s) will increase as of the first of the following month, reflecting the approved amount.

Voluntary Supplemental Long-Term Disability Insurance: Mutual of Omaha

Oak Harbor offers Voluntary Supplemental Long Term Disability (LTD) Insurance to all eligible Employees on a post-tax basis. This is paid by Employees via semi-monthly payroll deductions on a post-tax basis. This plan offers the ability to continue coverage should the Employee no longer work with Oak Harbor.

LTD Insurance provides a monthly income benefit for a covered illness or injury that prevents Employees from working for an extended period. LTD Insurance kicks in after Short Term Disability Insurance has expired.

Cost

The cost of coverage is based on the Employees age and eligible salary-based benefit. Rates are based on the Employees age as of the plan effective date of 1/1/2027. If enrolling for the first time as a new Employee, the rates are based on the Employees age at the time of enrollment.

Policy Details

Benefits Begin	On the later of 180 calendar days after the onset of the disabling injury or illness, or the date short-term disability ends.
Benefit Duration	• Disabled prior to age 65, benefits are payable for 5 years. • Age 65-68, benefits are payable to age 70. • Age 69 or older, benefits are payable for 1 year.
Partial Benefits	If disabled and can work part time, Employees may be eligible for partial disability benefits.
Benefit Amount	• 60% of basic monthly earnings with a minimum of $100 and a maximum of $6,000 per month. • Benefits may be reduced by other sources of income such as retirement/government plans, other group disability plans, salary continuance/sick leave, settlements on payments received and no-fault benefits.
Pre-Existing Limitations	12 months

Guarantee Issue

All Employees have a one-time opportunity (when hired) to enroll without providing health information. If Employees do not enroll during the eligibility enrollment period, Employees may have to wait for a future annual or life event enrollment period to apply. At that time, Employees may be required to answer health questions on an Evidence of Insurability form.

Evidence of Insurability (EOI)

The EOI is needed when an Employee enrolls outside of their initial enrollment window or if coverage was previously declined. Until the EOI is submitted and approved, Employees will continue paying premiums off the GA amounts.

How to complete the Evidence of Insurability Form:

1. After submitting the enrollment in Dayforce, if an EOI is needed it will reflect on the enrollment.
2. Employees and appliable Spouses visit www.mutualofomaha.com/eoi through any internet-connected device.
3. Enter Access Code: **D2VD**
4. Complete the form within 30 days of date of enrollment.

Once Mutual of Omaha has reviewed and approved or declined the request, Employees will be informed through the OHFL Benefits Department. If approved, premium(s) will increase as of the first of the following month, reflecting the approved amount.

Voluntary Supplemental Accident Insurance: Mutual of Omaha

Oak Harbor offers Voluntary Supplemental Accident Insurance to all eligible Employees on a post-tax basis. This is paid by Employees via semi-monthly payroll deductions on a post-tax basis. This plan offers the ability to continue coverage should the Employee no longer work with Oak Harbor. This policy can pay a set benefit amount based on the type of injury the Employee has, and the type of treatment needed. It covers accidents that occur on and off the job and includes a range of incidents. It can help with out-of-pocket costs such as co-pays and deductibles. There are no pre-existing clauses or waiting periods with this plan.

Employees can select plans that include Dependent coverage as well. Dependent children up to age 26 are eligible.

This plan offers a Health Screening Benefit and can pay the Employee $50 per calendar year per insured individual for health

All Employees have a one-time opportunity (when hired) to enroll in this benefit. If Employees do not enroll during the eligibility enrollment period, Employees will have to wait for a future enrollment period to apply.

Cost	
Employee Only	$5.55 per regular check
Employee + Spouse	$8.95 per regular check
Employee + Child(ren)	$10.32 per regular check
Employee + Family	$13.90 per regular check

Benefits Include (but are not limited to):
Emergency Room - $500 per accident/per person
Urgent Care Center - $425 per accident/per person
Hospital Admission - $1,500 per accident/per person
Ambulance - $2,000 per accident/per person

Additional details of what the plan covers and how amounts are paid out can be found in Dayforce under the Employee HUB Benefit pages.

Voluntary Hospital Indemnity Insurance: Mutual of Omaha

Oak Harbor offers Voluntary Supplemental Hospital Indemnity Insurance to all eligible Employees on a post-tax basis. This is paid by Employees via semi-monthly payroll deductions on a post-tax basis. This plan offers the ability to continue coverage should the Employee no longer work with Oak Harbor. This policy helps Employees cope with the financial impacts of a hospitalization. Employees can receive benefits when admitted to the hospital for a covered accident, illness, or childbirth. The money is paid directly to the Employee – not to a hospital or care provider. The money can also help pay the out-of-pocket expenses the medical plan may not cover, such as co-insurance, co-pays, and deductibles.

Employees can select plans that include Dependent coverage as well. Dependent children up to age 26 are eligible.

This plan offers a Health Screening Benefit and can pay the Employee $50 per calendar year per insured individual for health screening tests.

All Employees have a one-time opportunity (when hired) to enroll in this benefit. If Employees do not enroll during the eligibility enrollment period, Employees will have to wait for a future enrollment period to apply.

Cost	
Employee Only	$11.18 per regular check
Employee + Spouse	$21.45 per regular check
Employee + Child(ren)	$14.85 per regular check
Employee + Family	$24.89 per regular check

Coverage Includes (but is not limited to):
$2,500 for each covered hospital admission – payable up to 3x per policy year.
$200 per day for a covered hospital stay – up to 60 days combined total per policy year.
$400 for each day spent in intensive care – up to 60 days combined total per policy year.
$75 per day, up to 2 days per year for Newborn Nursery Care

Additional details of what the plan covers and how amounts are paid out can be found in Dayforce under the Employee HUB Benefit pages.

Voluntary Supplemental Critical Illness Insurance: Mutual of Omaha

Oak Harbor offers Voluntary Supplemental Critical Illness Insurance to all eligible Employees on a post-tax basis. This is paid by Employees via semi-monthly payroll deductions on a post-tax basis. This plan offers the ability to continue coverage should the Employee no longer work with Oak Harbor. This policy can pay Employees a lumpsum benefit at the first diagnosis of a covered illness. It can be used for expenses, co-pays, mortgage, rent or childcare.

Employee plans automatically include child(ren). Employee can elect additional Spouse coverage, if the Employee is also enrolled.

All Employees have a one-time opportunity (when hired) to enroll in this benefit. If Employees do not enroll during the eligibility enrollment period, Employees will have to wait for a future enrollment period to apply.

Cost

The cost of coverage is based on the Employees age and tier selected. Rates are based on the Employees age as of the plan effective date of 1/1/2027. If enrolling for the first time as a new Employee, the rates are based on the Employees age at the time of enrollment.

Benefit Amount

Employee	Choose $10,000, $20,000 or $30,000 of coverage.
Spouse	If the Employee is enrolled, Spouses can enroll for the same coverage…not to exceed what the Employee is enrolled in.
Child(ren)	Birth to age 26 are automatically covered at no extra cost. The coverage amount is 50% of what the Employee is enrolled in.

Covered Illnesses Include (but are not limited to):

Heart Attack	Stroke
Major Organ Failure	Dementia, including Alzheimer's Disease
Multiple Sclerosis (MS)	Parkinson's Disease
Amyotrophic Lateral Sclerosis (ALS)	End-Stage Renal (kidney) Failure
Coronary Artery Bypass Surgery	Genetic Disorders

Illness Covered by the Additional Cancer Benefit Include

Invasive and Non-Invasive Cancer	Skin Cancer - $500

Additional details of what the plan covers and how amounts are paid out can be found in Dayforce under the Employee HUB Benefit pages.

Additional Benefits Provided by Mutual Of Omaha

Employees have access to various benefits offered by Mutual of Omaha. Such as; Hearing Discount Program, Worldwide Travel Assistance, Employee Assistance Programs and Will Preparation Assistance. Employees can refer to the Dayforce Employee HUB Benefit pages for additional information on these extra benefits.

Benefits Advocacy Support

The Benefit Advocacy Support team is designed to provide Employees with a responsive, consistent, hands-on approach to benefit inquiries. Benefit Advocates are available to assist with elevated claims, unresolved eligibility issues, and any other benefit-related questions for Employees and their Dependents.

The Benefit Advocates are available Monday through Friday 8:00 AM to 5:00 PM (Pacific Time). Please email OHFL-BenefitsAdvocacy@imacorp.com and one of the Benefit Specialists will promptly return the call or e-mail message by the end of the following business day.



Miranda Mitchell
Senior Client Manager
Direct: 425-709-3646



Laura McAtee
Client Executive
Direct: 425-709-3720

Carrier Contact Information

Plan	Carrier	Website or Email	Phone Number
Medical, Dental & Vision	Regence Group Administrators *Group # 020189*	www.accessrga.com	866-738-3924
Virtual Healthcare	MD Live (through RGA)	Call: 877-596-0967 or Text 'RGA' to 635483	
Preventative Screenings at Home	Reperio Health	support@reperiohealth.com	800-425-4657
Prescription Drug & Home Delivery	Optum Rx Pharmacy	Home Delivery: www.optumrx.com Specialty Drug: www.specialty.optumrx.com	Home Delivery: 888-543-1369 Specialty Drug: 855-427-4682
Pharmacy Advocates Program	IMARx Pharmacy	imarx@imacorp.com	866-530-9989
Health Savings Account	HSA Bank	www.hsabank.com	800-357-6246
Flexible Spending Account	Navia Benefit Solutions *Group # OHF*	www.naviabenefits.com	800-669-3539
Voluntary Supplemental Benefits	Mutual of Omaha	www.mutualofomaha.com	800-655-5142
24/7/365 Employee Assistance Program	Canopy/Revive	www.my.canopywell.com Company Name: oak harbor freight lines	Call: 800-433-2320 Text: 503-850-7721
Medicare Education & Support Services	SmartConnect	Smartmatch.com/connect/oakharbor	844-772-2015
401(k) Financial Advisors	RBC Wealth Management	retirementplanadvisors.info@rbc.com	800-759-4029
401(k) Investment Options	NWPS	www.yourplanaccess.net/nwps	888-700-0808
Human Resources	Oak Harbor Freight Lines	www.oakharborbenefits.com or benefits@oakh.com	206-865-0167