



Employee Benefits Guide



PLAN YEAR | **August 2013 – July 2014**



Who is Eligible?

If you are employed by BWC and are a full-time employee you are eligible for BWC's employee benefits program.

BWC has an open enrollment plan for our employee benefits insurance. If you do not elect as a new hire or at open enrollment you will be required to have a qualifying event in order to come on to the plan.



How to Enroll/Re-Enroll

This is your opportunity to elect medical, dental or vision benefits for 2013.

Once you have made your elections, you will not be able to change them until the 2014 open enrollment, unless you have a qualified life event change in status. (see below)



Changes Available in 2013

Unless you have a qualified change in status, you cannot make changes to the benefit plan you elect until re-enrollment for 2014 or a life event change occurs. Qualified changes in status include: marriage, divorce, legal separation, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, change in residence due to an employment transfer for you, or termination of adoption proceedings, or change in spouse's benefits or employment status. You cannot terminate your elected coverage in 2014 without a qualifying life event change.

When you decide to enroll on the plan with a life event change, you will be required to do so within 30 calendar days of the event.

Medical & Prescription Drugs



Benefit	Plan A – \$2,000 Blue Advantage	Plan B – \$2,000 Alliance Select	Plan C – \$1,500 Alliance Select
Deductible	\$2,000 Single \$4,000 Family	\$2,000 Single \$4,000 Family	\$1,500 Single \$3,000 Family
Coinsurance	70/30%	70/30%	70/30%
Out of Pocket Maximum	\$4,000 Single \$8,000 Family	\$4,000 Single \$8,000 Family	\$3,000 Single \$6,000 Family
Office Visit - Primary Care Physician (PCP)	\$30 copay	\$30 copay	\$25 copay
Office Visit – Specialist/Urgent Care	\$30 copay	\$60 copay	\$50 copay
Preventive Office Copay	\$0 copay	\$0 copay	\$0 copay
Emergency Room Copay	\$200 copay	\$200 copay	\$150 copay
Vision Exam	\$30 copay	Not covered	Not covered
Prescription Drug	\$8/\$50/\$75/\$100 with \$100 Single / \$200 Family Deductible (waived for Tier 1 drugs)	\$8/\$50/\$75/\$100 with \$100 Single / \$200 Family Deductible (waived for Tier 1 drugs)	\$8/\$50/\$75/\$100 with \$100 Single / \$200 Family Deductible (waived for Tier 1 drugs)

How to Find an In-Network Provider



Wellmark BlueCross BlueShield generates a large network of providers in Iowa across the United States. To verify if your provider is in-network, call (800) 524-9242 or log on to www.wellmark.com.

MEDICAL – EMPLOYEE WEEKLY PREMIUMS								
Plan	Employee Only		Employee & Spouse		Employee & Child(ren)		Family	
	Weekly Rate	With Annual Physical Credit	Weekly Rate	With Annual Physical Credit	Weekly Rate	With Annual Physical Credit	Weekly Rate	With Annual Physical Credit
Plan A – \$2,000 Blue Advantage	\$39.03	\$34.42	\$104.03	\$99.42	\$96.74	\$92.12	\$169.42	\$164.81
Plan B – \$2,000 Alliance Select	\$45.46	\$40.84	\$117.19	\$112.57	\$108.90	\$104.28	\$189.14	\$184.53
Plan C - \$1,500 Alliance Select	\$49.63	\$45.02	\$125.73	\$121.12	\$116.79	\$112.18	\$201.95	\$197.33



Have you used Mail Order for your Prescriptions?

The Mail Service Pharmacy through Immediate Pharmaceutical Services, Inc. (IPS) is convenient and reliable delivery of your prescriptions. Choosing mail service allows you to enjoy delivery of your medications to the location of your choice.

Benefits of Mail Service

- ✓ Easy registration and ordering
- ✓ Quick delivery of medications in confidential, tamper-evident packaging; free standard shipping
- ✓ Important medication information included with every order
- ✓ Access to a pharmacist 24/7
- ✓ Auto Refill option

Getting Started

Select one of the following options to register with IPS Mail Service. The information you provide is kept confidential and private in accordance with HIPAA and other applicable state privacy laws.

- ✓ Online – visit www.wellmark.com >Health & Wellness>Drug information for registration information and prescription order forms.
 - Select Register now option to setup your account, fill in the required information, include your email address and submit
 - Your account will be activated within 48 hours
 - After activating your account, you can order refills, check order status, view and print prescription history, view your account balance, make payments, and receive secure information about your prescription order.
- ✓ Phone – call the customer care center at 1-866-611-5961(Monday – Friday 7am – 9pm CST and Saturday – Sunday 7am – 4pm CST)

Submit your First Prescription Order

If you need to start taking a prescription right away, request two prescriptions from your provider:

- 1) For an initial short term supply of your medication that you can fill at your local pharmacy
- 2) For a 90 day supply including three refills. To maximize your pharmacy benefit and save money ask your provider to write your prescription to allow for generic substitution.

Please allow 10 business days from the time that you place your order to receive your prescription(s).

Save with \$4 Generic Drugs

Prescription Drugs - \$4 Generics available at Hy-Vee, Target, Walmart, Walgreens, CVS Pharmacy. Utilizing these stores could help you save money on your prescription drugs. Contact the pharmacies to see if they offer your prescription on their list of \$4 generics. If your drug is available you will not need to show your prescription drug card. If your drug is not available on this list, you can talk to your doctor/pharmacist to see if there is a similar drug that you could be taking that is on the list.



Delta Dental will continue to administer the dental benefits for BWC. The summary of the plan is listed below. BWC's plan allows you to seek treatment from any in-network dentist of your choice.

Visit www.deltadentalia.com to locate an in-network provider or call 1-800-544-0718. The network you will use is Delta Dental Premier.



Services	Amount You Pay
Preventive Services	0% coinsurance; plan pays 100% for preventive services
Deductible	Applies to basic and major services only – \$25 Single / \$75 Family
Basic Services	Routine & Restorative - 20% coinsurance
Major Services	Endodontics/Periodontics; gum and bone diseases, high cost restorations – cast restorations, crowns, onlays, posts and cores – 50% coinsurance
Annual Maximum	\$1,000
Orthodontic	Services for proper alignment of teeth, only available to dependent children under age 19 covered by a family contract – 50% coinsurance to a lifetime maximum of \$1,000

DENTAL - EMPLOYEE WEEKLY PREMIUMS				
	Employee Only	Employee & Spouse	Employee & Child(ren)	Employee & Family
	\$5.80	\$11.68	\$11.37	\$18.88



Vision coverage will continue to be administered through Avesis. To find an in-network provider, please visit www.avesis.com

We offer two vision plans for you to choose from.



- Materials & Exam Plan
- Materials Only Plan

Services	Amount You Pay
Exam	\$10.00 copay (1 covered exam subject to copay every 12 months) <i>Covered under the Materials & Exam plan only. No coverage for exam under Materials Only plan.</i>
Contacts	When you choose contacts instead of glasses, you will have a \$130 allowance applied to the cost of your contacts and the contact lens exam (fitting and evaluation). You will be eligible for a frame 12 months from the date the contact lenses were obtained. No copay applies.
Frames	Members receive any frame every 24 months (if frames are purchased, there will be no contact lenses benefit). – There is a \$15 copay that applies to materials
Lenses	Lenses covered in full every 12 months after \$15 materials copay.

VISION - EMPLOYEE WEEKLY PREMIUMS				
	Employee Only	Employee & Spouse	Employee & Child(ren)	Employee & Family
Materials & Exam Plan	\$2.16	\$4.14	\$4.52	\$5.81
Materials Only Plan	\$1.48	\$2.97	\$2.80	\$3.83

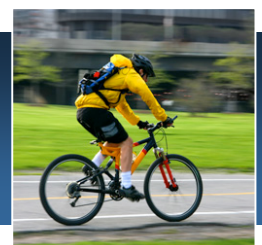
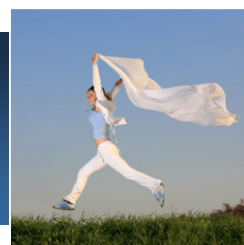
Note: If you elect the Blue Advantage medical plan (Plan 1) you have coverage for a vision exam if you see an in-network provider. You will be responsible for paying the \$30 copayment. You may want to elect the Materials Only vision plan if you elect the medical plan that covers a vision exam already.

Additional Questions



Basic Life Insurance

BWC provides full-time employees with \$25,000 of life and accidental death and dismemberment (AD&D) insurance, and BWC pays the full cost of this benefit. This benefit is through Lincoln Financial. Contact Human Resources to update your beneficiary.

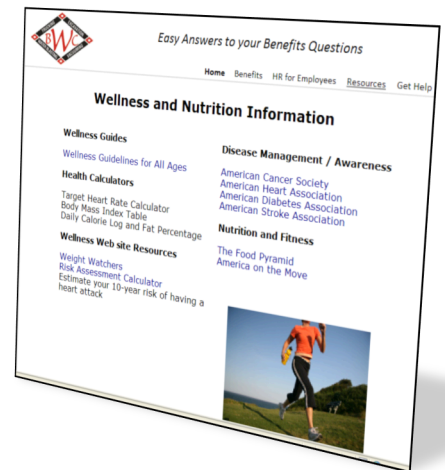
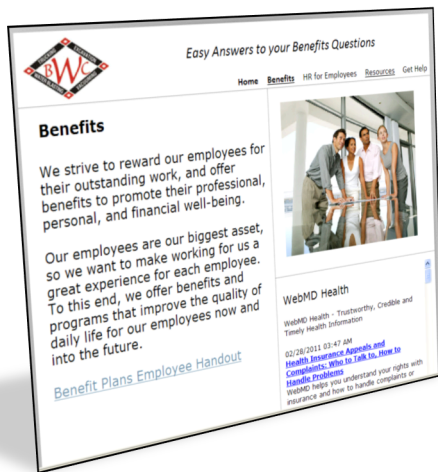


Visit your Benefits Portal

www.bwcbenefits.com

Username: bwc

Password: benefits



BWC works with TrueNorth on our benefit program. If you have any questions, please feel free to contact them.

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The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this Guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies, or errors are always possible. In case of discrepancy between the Guide and the actual plan documents the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about your Guide, contact Human Resources.