

THE NELSON TRUST

2027

EMPLOYEE BENEFITS GUIDE

ACTIVE EMPLOYEES & EARLY RETIREES



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Welcome to Your Benefits!

The Nelson Trust provides you and your family with support and resources to keep you healthy and secure. Working with both your union and employer, The Nelson Trust is committed to offering a competitive benefits package to meet your needs while keeping costs affordable. With benefits designed to help you improve and maintain good health and protect your income if you become disabled, The Nelson Trust is focused on providing coverage you and your family need most.

Take a few minutes to explore this guide and learn more about your benefits. It goes through the Plans you have access to through The Nelson Trust. The better you understand your options, the better you can plan for your family's needs.

Questions? We're here to help. You can locate carrier contact details on the last page of this guide or call the Trust Office toll-free at **800-811-8853**.

Note: This guide is an overview of The Nelson Trust's Active and Early Retiree Plans. It is not intended to be all-inclusive, nor is it to be used as a Summary Plan Description (SPD). In the event of a conflict between this guide and Plan documents, including the SPD, the Plan documents will govern.



Eligibility & Enrollment

Who Is Eligible?

You are eligible for Plan benefits if you meet the eligibility requirements outlined within the Summary Plan Description (SPD).

Note: An electronic copy of the SPD is located at nelsonbenefits.org or you can request a hard copy by contacting the Trust Office at 800-811-8853.

Dependent Eligibility

Your eligible dependents have access to many of the benefits offered. Eligible dependents include:

- Your legal spouse
- Your child(ren) who are:
 - Under age 26, whether married or unmarried, regardless of whether they are eligible to enroll in an employer-sponsored health plan. However, a child is not eligible for dependent coverage if the child is eligible to participate in a Plan sponsored by The Nelson Trust on their own.
 - Unmarried dependents of any age, provided they are incapacitated due to a mental or physical disability and incapable of self-support continuously since their 19th birthday.
 - Named in a Qualified Medical Child Support Order (QMCSO) as defined under federal law that requires you to provide medical coverage.

Eligible Children

An eligible child is a natural child, stepchild, adopted child, child placed for adoption, or other child dependent upon you for support.

Adding Dependents

If you want to add a dependent, please have their birthdate, Social Security number, and supporting documentation accessible. A completed enrollment form must be submitted to the Trust Office within 60 days of being eligible.





How to Enroll

Easily enroll in benefits through the Trust's website using your computer or smartphone. If you have eligible dependents, your enrollment information must be received within 60 days of your initial eligibility. Don't forget to name your beneficiary for Life and Accidental Death and Dismemberment (AD&D) benefits.

Steps to Access Your Account:

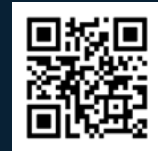
1. Go to ourbenefitoffice.com/nelson/benefits. If you have not yet set up your account, click "Create an Account."
2. Verify dependent eligibility and ensure your contact information is correct.
3. Answer the Working Spouse questions.
4. Confirm and submit the form.

Keep in mind, documentation is required to enroll dependents (e.g., marriage license or birth certificate). If you do not enroll eligible dependents during your initial enrollment, you can enroll them during the next annual open enrollment period, which occurs in November effective the following January 1st.

- If your address changes, you must report the change to the Trust Office.
- All enrollment forms and change of address forms are available online, or from your employer or local Lodge office.

READY TO ENROLL?

Scan to log in and complete your enrollment.



Making Changes During the Year

If you experience a qualified change in family status, notify the Trust Office. A completed enrollment form must be submitted to the Trust Office within 60 days of the family status change. Examples of a qualified change in family status include, but are not limited to:

- Marriage, divorce, or annulment
- Birth or adoption of a child
- Change in employment for you or your spouse that affects your benefit eligibility
- Loss of other health coverage

It is your responsibility to notify the Trust Office after a change in family status. You will need to provide documentation of the event, such as a marriage license or birth certificate. Upon receipt of the documentation, the Trust Office will review your dependent eligibility records and update coverage accordingly.

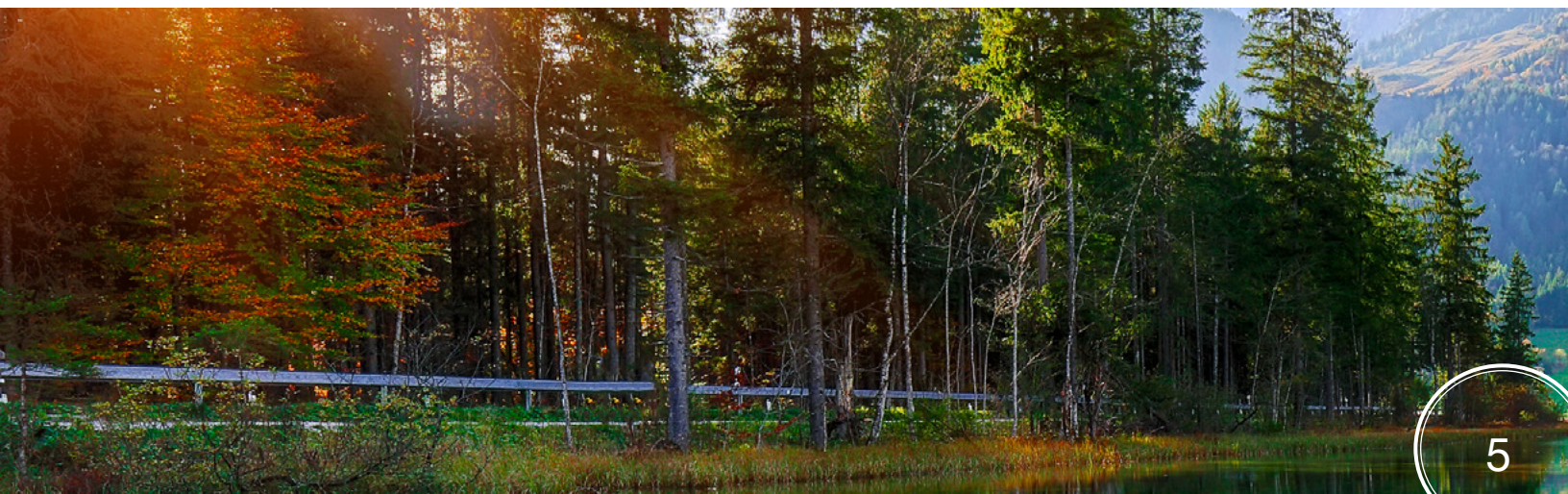
Remember, you must notify the Trust Office if you move or have an address change.

Medical Coverage

The Nelson Trust understands the importance of good health as the foundation for a productive life at home and at work. That is why The Nelson Trust sponsors a medical plan administered by Premera Blue Cross to help you and your family members live healthier lives.

Plan Features	Premera Blue Cross	
	In-Network	Out-of-Network*
Annual Deductible Individual/Family	\$900 / \$1,800	
Annual Out-of-Pocket Maximum Individual/Family	\$3,600 / \$7,200	\$4,500 / \$9,000
	You pay:	
Preventive Care Visit	Covered in full	40% after deductible
Virtual Visit with PCP	 Covered in full	Not applicable
Primary Care Visit	20% after deductible	40% after deductible
Specialist Visit	20% after deductible	40% after deductible
Lab & X-ray	20% after deductible	40% after deductible
Urgent Care	 \$75 copay/visit + 20% after deductible	40% after deductible
Emergency Room (copay waived if admitted)	\$150 copay, then 20% after deductible	\$150 copay, then 40% after deductible
Ambulatory Surgical Centers (ASCs)/Birth Centers	 10% after deductible	40% after deductible
Outpatient/Inpatient Hospital Services	20% after deductible	40% after deductible
Outpatient Mental Health Services	20% after deductible	40% after deductible
Massage Therapy, Acupuncture, Spinal & Other Manipulations (12 visits per year)	20% after deductible	40% after deductible

*Please note: Balance billing may apply if a provider is out-of-network. This means the provider is not contracted with Premera Blue Cross or is not part of the BlueCross BlueShield national network (BlueCard PPO). "Balance billing" means plan participants are responsible for amounts billed by out-of-network providers that are in excess of the allowable charge.



Premera Blue Cross Resources

Get Coverage Information On-the-Go

Premera's mobile app gives you convenient access to your health coverage from anywhere. With the app, you can:

- **Find Care:** Search for in-network doctors, hospitals, urgent care, and more.
- **Access Your ID Card:** Use your digital ID card to show proof of coverage.
- **Check Claims:** View detailed claims information, including when the claim is received, when it is processed, and what the provider may bill you.
- **Track Your Spending:** Know how close you are to meeting your deductible and out-of-pocket maximum.

Download the Premera mobile app at premera.com/visitor/go-mobile today so it's ready when you need it.

24-Hour NurseLine

Premera's 24-Hour NurseLine provides you with advice from a trusted medical professional—at any time of the day or night. Registered nurses are available 24/7 and can advise you as to whether your condition is something to treat at home or if you should be seen by a doctor. The call is free and confidential. Call **800-809-9250**.

How to Find a Provider

Using an in-network provider is the best way to reduce your out-of-pocket costs and make the most of your benefits. Here's how to find an in-network provider:

Online:

- Log in to nelsonbenefits.org.
- Click on the "Premera" logo.
- Select "Search as a Visitor".
- Select "Find a Doctor".
- Select "BlueCard PPO" in the third menu option to produce your search results.

Over the phone:

- Call Premera Customer Service at **800-809-9250**.
- Call your physician's office and ask if they are an in-network provider with Premera Blue Cross.

ID Cards

A Premera ID card is provided to you and your covered dependents. Show your card whenever you go to the doctor or use other health care services. To request additional cards, contact the Trust Office or Premera Customer Service.

Blue365 Health and Wellness Discount Program

Blue365 offers year-round discounts on gym memberships, fitness gear, hearing aids, prescription glasses, healthy eating options, and more. To access and use the Blue365 program:

- **Enroll:** Available to all members with a Premera Blue Cross ID card.
- **Register:** Create a free account on the Blue365 website at blue365deals.com.
- **Browse deals:** Explore the discounts available on the website.
- **Redeem offers:** Follow the instructions provided for each deal, which may include using a promo code or visiting a partner website.

BlueCard Worldwide®

If you are traveling outside the United States, you have access to a worldwide Blue Cross/Blue Shield network of medical providers.

New for 2027: Premera Health Hub

Premera Health Hub offers coaching, support groups, tracking tools, and more to help you reach your health goals. Ready to get started? Here's how to use your benefit:

1. Visit gosolera.com/premera. Have your member ID card handy to verify your health plan.
2. Choose your health goals. Select a health goal and complete a brief assessment.
3. Enroll in a program. Choose the program that's right for you and get started on your health journey.

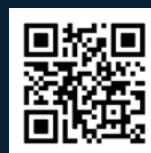
REACH OUT TO LEARN MORE

gosolera.com/premera

888-902-1410 | TTY: 711

Monday through Friday

6 a.m. to 6 p.m. PT



Prescription Drug Coverage

The Nelson Trust provides prescription drug coverage through MedImpact. Use an in-network pharmacy for the highest level of coverage.

Plan Features	Retail Pharmacy (30-day supply)	Retail & Home Delivery (90-day supply)
	You pay:	
Prescription Out-of-Pocket Maximum Individual/Family	\$2,600 / \$5,200	
Tier 1 - Generic	\$10	\$20
Tier 2 - Formulary Brand Name	30% (\$30 minimum, \$60 maximum)	30% (\$75 minimum, \$150 maximum)
Tier 3 - Non-Formulary Brand Name	50% (\$50 minimum, \$100 maximum)	50% (\$125 minimum, \$250 maximum)
Diabetic Supplies	10%	10%

Maintenance Medications

A maintenance medication is a medication taken for an extended period of time, consistently for more than 30 days, to treat conditions such as diabetes, high blood pressure, or high cholesterol. Members can receive a 90-day supply at a retail pharmacy (e.g., Walgreens) or through MedImpact Direct® Mail Delivery at **855-873-8739**.

Specialty Medications

Specialty medications are limited to a 30-day supply. For more information on obtaining specialty medications, please contact MedImpact Direct Specialty® Pharmacy (the only provider for the Plan's specialty medications) at **877-391-1103**.

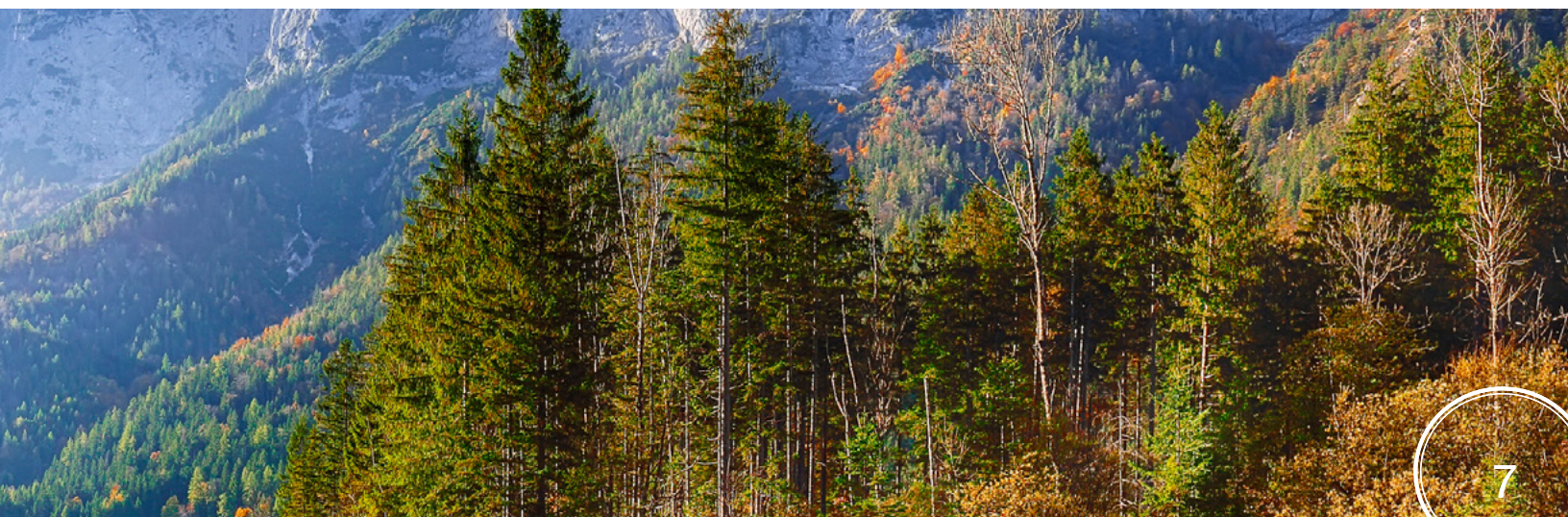
Vaccination & Immunization Coverage

Your Plan fully covers the following vaccinations for you and your eligible dependents at participating in-network pharmacies:

- Influenza
- Measles
- Pneumonia
- COVID-19
- Shingles/Herpes Zoster
- Hepatitis
- Human Papillomavirus (HPV)
- Meningococcal

This coverage is in addition to vaccines covered under the Plan's medical benefits.

Note: Check with your pharmacy in advance since not all in-network pharmacies administer all shots.



Dental Coverage (Active Only)

The Plan offers dental coverage through Delta Dental to help you maintain a healthy smile through regular preventive dental care and to fix any problems as soon as they occur. You may visit dentists who belong to the Delta Dental network, as well as dentists who are not part of the network. When visiting a non-network provider, you are responsible for billed amounts that exceed what the Plan pays for in-network coverage.

Plan Features	Delta Dental Plan	
	In-Network	
	You pay:	
Calendar Year Deductible Individual/Family	\$50 / \$150	
Diagnostic & Preventive Services* Exams, x-rays, cleanings	Covered in full Cleanings: Once every 6 months (one additional cleaning during pregnancy) Bitewing x-rays: Once every 12 months	
Basic & Restorative Services Fillings, extractions, root canals	20% after deductible	
Major Services Crowns, bridges, dentures	40% after deductible Crowns: Once every 7 years; crown over implant once per lifetime Bridges & Dentures: Replacement once every 7 years	
Annual Maximum Dental Benefit	Plan pays up to \$1,500 per person	
Orthodontia Adults & children	 50%. Plan pays up to \$2,000 lifetime maximum benefit	

*Does not apply to Annual Maximum Dental Benefit

Note: For out-of-network coverage, the Plan pays a percentage of the reasonable and customary charges. Contact Delta Dental of Oregon for claims information.

Vision Coverage (Active Only)

The Plan's vision coverage is provided through Vision Service Plan (VSP). Choose an in-network doctor to receive a higher level of benefits. If you visit an out-of-network provider, you will receive a lower level of benefits and will have to file your own claims to VSP. Download the VSP app to access your coverage from anywhere.

Plan Features	VSP Vision Plan	
	In-Network	Out-of-Network Reimbursement
Eye Exams once every 12 months	Covered in full	Up to \$45
Lenses once every 12 months Single Vision Lined Bifocal Lined Trifocal	\$25 copay	Up to \$45 Up to \$65 Up to \$85
Frames once every 24 months	\$25 copay, \$150 allowance + 20% off remaining balance Costco frames: \$65	Up to \$47
Contacts & Exam in lieu of glasses	\$150 allowance	Up to \$105

Enjoy Vision Discounts

VSP provides discounts for add-ons, such as scratch-resistant and antireflective coatings, progressives, additional glasses, sunglasses, and contact lens exams (fitting and evaluation), with VSP doctors. VSP also provides a discount for laser vision correction. The Nelson Trust does not endorse, recommend, or warranty laser vision correction.

Know Before You Go

The Plan includes participating chains like Costco Optical, Shopko Optical, and Visionworks. Coverage with these chains may be different. Visit vsp.com or contact VSP Customer Service at 800-877-7195 for details.

Life and AD&D Insurance (Active Only)

Employee Basic Life and AD&D Insurance

The Active Plan provides employee Basic Life and Accidental Death and Dismemberment (AD&D) insurance coverage at no cost. When you work with a participating employer, you will receive \$20,000 of Basic Life insurance and \$20,000 of AD&D coverage.

Dependent Life Insurance

The Plan provides Life insurance for your enrolled spouse equal to \$2,000 and for your eligible children at no cost.

Age of Child	Amount of Coverage
14 days but less than 6 months	\$200
6 months but less than 26 years	\$2,000

Additional Services

Included in your Life and AD&D coverage are additional services provided through MetLife at no cost to you. Learn more at [metlife.com](https://www.metlife.com). The Nelson Trust does not endorse, recommend, or warranty any of these services. The Trustees recommend that you carefully compare these services with others offered in the marketplace before using them.

Are Your Beneficiaries up to Date?

Make sure your beneficiary designation form is updated and correct. Beneficiary designation forms can be found on The Nelson Trust's **Benefit Portal**. You can also call the Trust Office to request a form.

Accident & Sickness (Active Only)

Accident & Sickness Weekly Indemnity

The Plan provides Accident and Sickness (A&S) Weekly Indemnity coverage. These benefits continue paying a portion of your income if you become disabled and are unable to work due to a non-work-related illness or injury.

The Plan pays a weekly benefit equal to 60% of your current straight time hourly rate times your normally scheduled hours, up to a maximum of \$350. You must have hourly/flat rate eligibility when the disability or illness begins.

A&S benefits begin on the first day of disability due to an accident, or on the fourth day of disability due to illness. Benefits continue up to a maximum of 26 weeks as long as you remain disabled or ill. The Nelson Trust may recover A&S benefits paid to you if a third party is responsible for the accident that caused your injuries.

California State Disability Insurance (SDI) Benefits

California employees are eligible for State Disability Insurance in the event of an illness or injury. Refer to the SPD or contact the Trust Office with any questions.





Tools to Help You Manage Your Health & Your Benefits

The Nelson Trust Benefits Portal

The Nelson Trust benefits portal at nelsonbenefits.org provides easy online access to your claims administrators, insurance carrier websites, and other resources and planning tools. When you visit the portal, tabbed sections will help you understand and use your benefits.

You can access information about:

- Eligibility for you and your dependents
- Employer contribution history
- Plan documents and booklets
- Details of Plan coverage
- Links to carrier websites
- “How to” instructions and Frequently Asked Questions
- Downloadable/printable forms, including Beneficiary Designation and Working Spouse forms

More Ways to Access Your Benefits

MedImpact

Visit medimpact.com to understand your prescription drug benefits, find ways to save on medications, and arrange for home delivery.

Premera Online

Log on at premera.com to access personalized information about your benefits, health care, and health.

Premera Health Hub

Go to gosolera.com/premera for personalized resources and programs to help you reach your health goals.

Your Benefits

The “Member Services” section can help you find out more about your medical plan benefits and spending:

- View your claims.
- Check the amount of your deductible and how much you’ve satisfied.
- Review your benefit limits and how much of the limits you have used.
- See what your Plan covers and what services it offers.

Your Health Plan

Resources in the “My Premera Plan” section under “Understanding My Health Plan” can help you take charge of your health care:

- Find doctors, specialists, or hospitals that meet your requirements.
- Find out what benefits and services are covered.

Your Health

Maintain and improve your health with the help of Premera’s “Preventive Health” resources:

- Review preventive health benefits.
- Take a free health assessment to get a fresh look at your health.

Quick Reference Guide

This handy reference provides a snapshot of services available to you. Carrier contact information is available on the next page.

Service	Trust Benefits Portal	Trust Office	Local Lodge	Trust Carriers
Access and print forms	✓	✓	✓	✓
Review your benefit plans and dependent information	✓	✓	—	✓
Check the status of a claim	✓	—	—	✓
Request replacement ID cards	✓	✓	—	✓
Search for in-network medical, dental, vision providers, and pharmacies	✓	—	—	✓
Review Plan documents and booklets	✓	✓	—	—
Change your address	✓	✓	✓	—
Update your dependent information	—	✓	—	—
Report life events or change coverage (e.g., birth of a child, marriage, divorce)	—	✓	—	—
Report a disability claim	—	✓	—	—



Your Benefit Contacts

For Questions About...	Contact	Phone	Website
Trust Office Life and Accidental Death & Dismemberment (AD&D) Accident & Sickness (A&S) Weekly Indemnity	BeneSys, Inc. PMB #116 5331 S Macadam Ave. Suite 258 Portland, OR 97239	503-222-7696 800-811-8853 8:30am - 5pm PT, M-F	nelsonbenefits.org
Medical	Premera Blue Cross Group #1035171	800-809-9250 6am - 6pm PT, M-F TDD: 800-842-5357	premera.com Mobile app: premera.com/visitor/go-mobile
24-Hour NurseLine	Premera Blue Cross	800-809-9250	-
Prescription Drugs	MedImpact	877-606-0728	medimpact.com
Maintenance Medications	MedImpact Direct® Mail	855-873-8739 5am - 5pm PT, M-F	Register: medimpact.com
Specialty Care Pharmacy	MedImpact Direct Specialty® Pharmacy	877-391-1103	medimpact.com
Dental	Delta Dental Group #10004450	877-277-7280 TDD/TTY: 800-433-6313	deltadentalor.com Web app: deltadentalor.com/memberdashboard
Vision	Vision Service Plan (VSP)	800-877-7195	vsp.com Mobile app: Visit the App Store or Google Play
California State Disability Insurance (SDI) Benefits (for CA employees)	EDD, Disability Insurance P.O. Box 13140 Sacramento, CA 95813-3140	800-480-3287 (English) 866-658-8846 (Spanish) TTY: 800-563-2441	edd.ca.gov/claims.htm

Note: No participating employer, employer association or labor organization, or any of their employees, are authorized to answer questions about The Nelson Trust and Plan benefits and/or coverages. Please direct all inquiries to the Trust Office and insert the employee's identification number on all correspondence, if available.

Your receipt of this Benefit Guide does not make you eligible for Plan benefits. The Trust Office makes all Plan eligibility decisions. Contact the Trust Office if you have a question about your eligibility.

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