

ACTION REQUIRED

Must Enroll for 2025

BENEFITS OPEN ENROLLMENT 2025

NOVEMBER 1-22

Werner® is excited to expand its benefit offerings to Baylor associates for the 2025 plan year. Werner offers several benefits to provide health and financial security for you and your family, including medical, dental, vision and life insurance coverage. The open enrollment period is your annual opportunity to review current benefits and make changes to ensure they meet the needs of you and your family.

What's Changing in 2025?

Let's take a look at the differences for you and your family in the chart below:

EMPLOYEE BENEFIT PLAN CHANGES FOR 2025			
Benefit	2024 Insurance Carrier	2025 Insurance Carrier	What's New for 2025?
Medical	Anthem Blue Cross Blue Shield of Indiana	Highmark Blue Cross Blue Shield*	• 3 Deductible Options: one lower deductible, two high deductible (HDHP).
Prescription Drugs	Anthem Blue Cross Blue Shield of Indiana	Highmark Blue Cross Blue Shield*	• Changes to Copays and Deductibles.
Specialty Prescription Drugs	Anthem Blue Cross Blue Shield of Indiana	VIVIO Health	• Changes to Copays and Deductibles.
Flexible Spending Account (FSA)	N/A	WEX*	• With a PPO, use pretax dollars for Medical or Dependent care FSAs.
Health Savings Account (HSA)	N/A	WEX*	• With a HDHP, contribute to an HSA and receive additional Werner contribution.
Supplemental Benefits	N/A	Accident Hospital Indemnity Critical Illness Legal	• All Supplemental Benefits will be through AllState or MetLife.
Dental	Anthem Blue Cross Blue Shield of Indiana	United Concordia*	• 2 Plan Coverage Options: Enhanced and Basic Plus • Enhanced includes orthodontia for dependents up to age 19.
Vision	EyeMed	Davis Vision by MetLife	• 2 Plan Coverage Options: Enhanced and Standard.
Employer Paid Life	Anthem Blue Cross Blue Shield of Indiana	Lincoln Financial Group	• \$25,000 benefit for all Full-time Employees.
Voluntary Term Life**	Anthem Blue Cross Blue Shield of Indiana	Lincoln Financial Group	• Guaranteed Issue up to \$120,000 and current benefit amount; Evidence of Insurability up to \$500,000.
Short-term Disability**	N/A	Lincoln Financial Group	• Benefit based on percentage of earnings up to \$2,000 per week (40%, 50%, or 60%).
Long-term Disability**	N/A	Lincoln Financial Group	• Employer paid benefit based on percentage of earnings up to \$1,000 per month. Optional employee paid benefit is 60% of salary up to a max of \$5,000 per month.

* New member ID cards will be issued for insurance carrier, and new debit cards for FSA and HSA.

** Optional voluntary employee-paid benefit program.

Please refer to wernerbenefits.com or call the enrollment call center **1.877.626.6419** for additional information on benefits offered.



2025 Monthly Medical Rates

COVERAGE	\$1,250 PPO	\$2,000 HDHP	\$3,300 HDHP
Employee	\$ 182	\$ 141	\$ 101
Employee/Spouse	\$ 636	\$ 397	\$ 308
Employee/Child(ren)	\$ 564	\$ 357	\$ 277
Family	\$ 686	\$ 516	\$ 432

*Rates shown are standard monthly rates and do not consider differential for tobacco users.



2025 Monthly Dental Rates

COVERAGE	BASIC	ENHANCED
Employee	\$12.84	\$19.28
Employee/Spouse	\$19.28	\$31.12
Employee/Child(ren)	\$17.12	\$28.96
Family	\$26.84	\$42.84

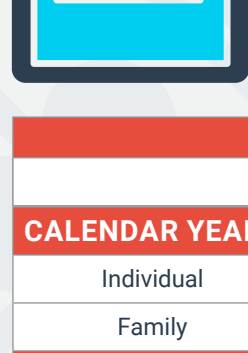


2025 Monthly Vision Rates

COVERAGE	STANDARD	ENHANCED
Employee	\$ 5.47	\$ 7.17
Employee/Spouse	\$ 8.26	\$10.83
Employee/Child(ren)	\$ 6.56	\$ 8.61
Family	\$14.22	\$18.65

ELIGIBILITY

» You are eligible for medical, dental and vision benefits if you work at least **30 hours per week**.



Medical Plan

You have a choice of three medical plan options. All pay 100% of the cost for preventive care and all include an annual deductible amount you must satisfy before the plan begins paying for a portion of your expenses (coinsurance):

	PLAN 1 - PPO		PLAN 2 - HDHP		PLAN 3 - HDHP	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
CALENDAR YEAR DEDUCTIBLE						
Individual	\$ 1,250	\$ 3,750	\$ 2,000	\$ 4,000	\$ 3,300	\$ 6,600
Family	\$ 2,500	\$ 7,500	\$ 4,000	\$ 8,000	\$ 6,600	\$13,200
CALENDAR YEAR OUT-OF-POCKET MAXIMUMS (including deductible)						
Individual	\$ 3,250	\$ 6,500	\$ 3,650	\$ 7,300	\$ 6,200	\$12,400
Family	\$ 6,500	\$13,000	\$ 6,800	\$13,600	\$12,400	\$24,800
MEDICAL BENEFIT COVERAGE						
Coinurance	80%	60%	80%	60%	70%	50%
Primary Care	\$40 copay	60%	80%	60%	70%	50%
Specialist	\$50 copay	60%	80%	60%	70%	50%
Emergency Room	\$250 copay then deductible & coinsurance	\$250 copay then deductible & coinsurance	80%	80%	70%	70%

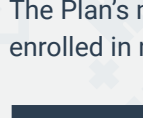
What you need to know about high deductible health plans:

High-deductible health plans involve greater out-of-pocket costs up front, as you are responsible for all medical expenses until the annual deductible is met. However, preventive care is covered at 100%. A high-deductible health plan may be right for you if:

- You're healthy and rarely get sick or injured.
- You can afford to pay your deductible upfront or within 30 days of receiving a bill for that amount if an unexpected medical expense comes up.
- You have the means to make contributions to an HSA each pay period to cover your future medical expenses.
- You are healthy and are interested in using an HSA as a way to save or invest money.

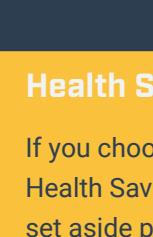
High-deductible plans were established to help consumers be more informed about healthcare costs and encourage them to shop around if they are having a planned medical procedure. Whether you choose a plan with a low or high deductible, don't do so at the expense of your health. Carefully consider your expected health care costs, premiums, deductibles and out-of-pocket maximums when choosing between PPO and High Deductible Health Plans.

PPO VERSUS HDHP		
	Traditional PPO \$1,250/\$2,500 Plan	High Deductible Health Plan \$2,000/\$4,000 & \$3,300/\$6,600 Plans
Office Visit Copays	Yes, \$40.	No, pay for cost of visit which is applied toward the deductible.
Prescription Drug Copays	Yes, varies by drug tier.	No, pay for cost of the drug which is applied toward the deductible.
Coinurance Once Deductible Met	Yes, 80%.	Yes, 80% in-network and 70% out-of-network.
Out of Pocket Maximums	Yes, \$3,250/\$6,500.	Yes, varies per plan.
Eligible for Health Care Flexible Spending Account (FSA)	Yes.	No.
Eligible for Health Savings Account (HSA)	No.	Yes.
Eligible for Dependent Care Flexible Spending Account (FSA)	Yes.	Yes.



Tobacco Rates

The Plan's medical coverage includes a premium differential for associates and their eligible spouse who (i) are enrolled in medical coverage and (ii) are regular tobacco users.



Spending Accounts

Use a Health Savings Account or Flexible Spending Account to maximize your savings.

Health Savings Account [HSA]

If you choose a High Deductible Health Plan (HDHP) you also have the opportunity to participate in a Health Savings Account (HSA). An HSA is an account funded by both you and Werner that lets you set aside pretax money to pay for qualified out-of-pocket medical, dental and vision expenses — now or in the future. Once you're enrolled in the HSA you'll receive a debit card to help manage your HSA claims. Your HSA can be used for your expenses as well as those of your spouse and dependents, even if they are not covered by the HDHP.

Werner will also contribute to your HSA.

The annual Werner contribution will equal:

» **\$2,000/\$4,000 Plan:** \$300 for individual | \$600 for all other tiers

» **\$3,300/\$6,600 Plan:** \$500 for individual | \$1,000 for all other tiers

Maximum Contributions

The total annual HSA contributions may not exceed the annual maximum amount established by the IRS. The annual contribution maximum is based on the coverage you elect.

» **Individual:** \$4,300

» **Family (Filing Jointly):** \$8,550

Employees age **55 and older** can make an additional annual "catch-up" contribution of up to **\$1,000**

Flexible Spending Accounts [FSA]

HEALTH CARE FSA

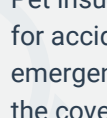
Set aside pretax FSA for eligible expenses such as medical copays, coinsurance, deductibles, eyeglasses or over-the-counter medications prescribed by your doctor. This plan can only be used with the PPO. When deciding if you would like to set aside pretax dollars for this benefit, make sure to consider what you believe your expenses will be for the year. **If you do not use the funds in your health care FSA, those funds are not able to be rolled over to another calendar year.**

DEPENDENT CARE FSA

Contribute up to \$5,000 per year, pretax or \$2,500 if married and filing separate tax returns. The funds can only be used to pay for eligible dependent care expenses including daycare, after-school programs and elder care programs.

Let's take a closer look and compare Flexible Spending Accounts and Health Savings Accounts.

FSA VERSUS HSA		
	Health Care Flexible Spending Account (FSA)	Health Savings Account (HSA)
Available with PPO (\$1,250/\$2,500 plan)?	Yes	No
Available with High Deductible Health Plan (\$2,000/\$4,000 & \$3,300/\$6,600)?	No	Yes
Unused Funds Carry Forward?	No	Yes
Goes with you if you leave the Company?	No	Yes
Can you change the contribution amount during the year?	No	Yes



Pet Insurance

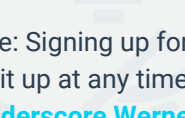
Interested in insurance for your furry family members? Werner is now partnering with Spot Pet Insurance.

Pet insurance is a financial safety net for your furry family. It allows you to get reimbursed for accidents or illnesses so you don't have to worry about cost and can focus on care. Spot plans can cover emergency visits, lab fees, behavioral problems, x-rays and tests, surgeries, cancer and more. You get to choose the coverage you want for your pet(s).

Werner associates can get pet insurance at any time and save money through a discount. Note: Signing up for pet insurance is **NOT** done through Workday. Scan the QR code, use the link below or call to set it up at any time.

<https://spotpet.link/werner> | 800.905.1595 | Use priority code **EB_WERNER**. (Or, if calling, **EB Underscore Werner**).

Scan here to learn more and enroll today!



Werner offers many additional benefits such as life, disability and supplemental insurance.

As a new Werner associate, you are eligible to purchase voluntary disability and life insurance without submitting proof of health or evidence of insurability (EOI). Full-time associates may purchase additional disability insurance, up to \$120,000 in optional life insurance and \$25,000 in optional spousal life insurance without EOI. If you opt out of these voluntary benefits now, in the future EOI may be required.

Visit wernerbenefits.com to get more details on all of our benefit offerings.

READY TO ENROLL?

Login to Workday and click on the "Open Enrollment Change" on the main page under "Awaiting Your Action." Or, contact our Benefits Hotline at **877.626.6419**.



Note: This Open Enrollment newsletter also serves as a Summary of Material Modifications and/or Summary of Material Reduction.