2027
BENEFIT GUIDE

Jan 2027 – Dec 2027



QCR HOLDINGS, INC.



A NOTE FROM LEADERSHIP:

We strive to provide you and your family with a comprehensive and valuable benefits package that enables you to have a better life. We invite you to review the information in this booklet to gain a better understanding of how these benefits can support you and your family.

BENEFIT ELIGIBILITY & ENROLLMENT	PAGE(S)
Eligibility	3
Enrollment Blueprint	4
PHYSICAL HEALTH	
Medical & Prescription Drug	5
Teladoc	6
Orthopedic Surgery Alternative	7
Wellness Incentive Program	8
Health Savings Account	9
Flexible Spending Accounts	10
Dental	11
Vision	12
Life and AD&D	13
Disability	14
ADDITIONAL PROTECTION	
Accident	15
Critical Illness	15
Hospital Indemnity	15
Cancer	15
Legal Assistance & Identity Protection	16
Pet Insurance	16
Employee Assistance Program (EAP)	17
Retirement 401(k)	18
RESOURCES	
Contact Information	19
Added Benefits	20
Benefits Vocabulary	21
TrueAdvocate Team	22
Important Notices Regarding Your Medical Plan	23

Disclaimer

This Enrollment Guide is for general informational purposes only and is based on employer and carrier provided information summarized from plan materials. It does not constitute legal, tax, or benefits advice. While reasonable efforts have been made to ensure accuracy, errors or omissions may occur. In all cases, the applicable plan documents, insurance contracts, and policies control and will prevail over this Guide. This is a high level summary and does not include all terms, conditions, limitations, or exclusions. Benefits and claim determinations are subject to the governing plan documents and carrier decisions. For questions, contact Human Resources or the applicable carrier. This document is intended for internal use and may not be distributed outside the organization without permission.

Created by TrueNorth Companies, LC for QCR Holdings, Inc.



BENEFITS ELIGIBILITY

Who is eligible to participate?

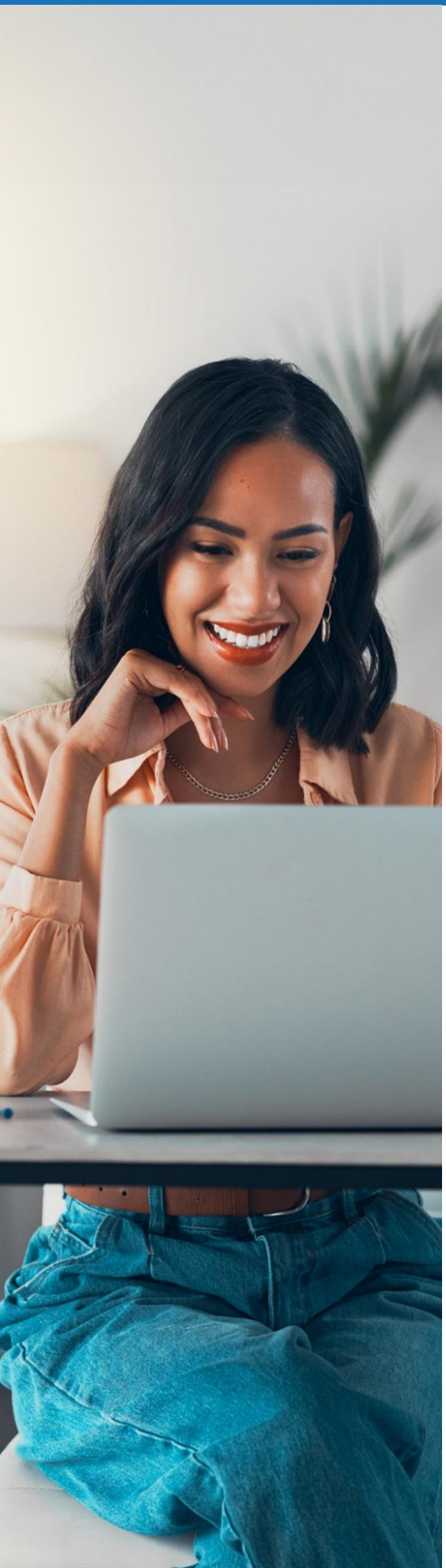
- Full-time employees working at least 24 hours per week
- Your legal spouse
- Your unmarried dependent child (natural, adopted or step) up to age 26

When does coverage start?

- New Hire coverage starts the first (1st) day of the month following 30 days from your hire date

When can I enroll in or make changes to benefits?

- **New Hires:** Must submit your elections within 15 calendar days of hire date
- **Open Enrollment**: Occurs annually with an effective date of January 1
- **Qualified Life Events:** Must notify Human Resources within 30 days of the event. Coverage goes into effect on the date of event for Birth, Adoption and Death whereas everything else is the 1st of the next month. Some examples of qualified events include:
  - Gain or loss of eligibility for another employer's coverage
  - Marriage
  - Divorce or legal separation
  - Birth of your child, adoption or placement for adoption
  - Death
  - Change in employment status that impacts your eligibility for benefits
  - Child support order
  - New entitlement or loss of Medicare or Medicaid (60 days to notify HR)



YOUR ENROLLMENT BLUEPRINT

Steps to successfully enroll in your benefits:

STEP 01

VISIT YOUR BENEFITS PORTAL

Website: https://myqcrbenefits.com

STEP 02

EVALUATE YOUR OPTIONS

- Review available benefit options for the year.
- Use carrier resources and tools to make decisions.

STEP 03

ENROLL IN YOUR BENEFITS

- www.paylocity.com (HR & Payroll > Bswift)
- Click Visit the Enrollment Center, then Enroll Now and follow the steps.
- Be mindful of your enrollment deadline!

STEP 04

NEED HELP DECIDING?

Contact TrueNorth's TrueAdvocate Team

Phone: 888-655-9980

Email: trueadvocate@truenorthcompanies.com

MEDICAL & RX

Administered by Consociate Health & MedOne

The medical insurance benefit that uses a network of providers, hospitals, and pharmacies to provide employees and their families access to quality healthcare and protection against the cost of illness or injury.

Use In-Network Providers for the best value! Visit www.consociatehealth.com to search for providers.

Click on "Members" then click "PPO Networks Provider Search", select "Aetna Signature Administrators PPO", then you can find providers within your area.

IN-NETWORK BENEFITS	PPO PLAN	HDHP PLAN
Preventive Care	100% Covered	100% Covered
	*Preventive Care is defined by the Affordable Care Act (ACA) Visit **HealthCare.gov** to access a list of covered preventive services by gender and age	
Office Visit Copay	$30 Primary $50 Specialist $0 Teladoc	Subject to deductible $0 Teladoc
Emergency Room	$300 Copay + Coinsurance	Subject to deductible
Rx Copay	Generic $5 Preferred $50 Non-preferred $85 Specialty 30% Rx Ded $150 Single / $300 Family	Subject to deductible
Deductible	$1,500 Single $3,000 Family	$2,000 Single $4,000 Family
Coinsurance	You pay 30%, plan pays 70%	Does not apply
Out of Pocket Maximum	$5,500 Single $9,000 Family	$2,000 Single $4,000 Family

EMPLOYEE PER PAY PERIOD PREMIUMS						
COVERAGE TIER	PPO PLAN			HDHP PLAN		
	TIER 1	TIER 2	TIER 3	TIER 1	TIER 2	TIER 3
Employee	$84.25	N/A	$203.31	$41.30	N/A	$160.37
Employee + Child(ren)	$216.40	N/A	$335.47	$108.75	N/A	$216.46
Employee + Spouse	$240.21	$388.79	$478.33	$116.96	$258.73	$355.10
Employee + Family	$370.30	$534.78	$608.42	$173.92	$327.05	$412.04

For Employee + Spouse and Family coverage, there is a $25 surcharge per pay period added to the above premiums if your spouse has declined coverage under their employer offered plan and enrolled under the QCRH plan.

The benefits listed above are for In-Network services only. Please refer to your Summary of Benefits and Coverages for Out of Network costs.

VIRTUAL DOCTOR VISITS – Teladoc

Teladoc benefits apply only when services are accessed through the plan's designated Teladoc vendor; virtual visits with your own personal provider are processed as standard office visits and are not considered Teladoc.

HOW CAN I USE TELADOC?

- Reach out to your designated Teladoc vendor to register and schedule your virtual visit
- You can utilize your smartphone, tablet, or computer/laptop

WHEN CAN I USE TELADOC?

- You don't have time to wait a week to see a doctor
- If you're considering the ER or urgent care center for a non-emergency issue
- You don't want to infect (or be infected by) another person
- On vacation, on a business trip, or away from home
- For short-term prescription refills
- You need a lower-cost option. **$0 copay on both medical plans!**

GET THE CARE YOU NEED

Request a medical consultation anytime and anywhere you need it for:

- Urgent care issues like colds, coughs, allergies, sore throat and stomach aches
- Recurring conditions like migraines or urinary tract infections
- Skin conditions
- Dermatology
- Prescription management
- Mental Health coaching

TELADOC.com
1-800-TELADOC
1-800-835-2362

Download the Teladoc app
- App Store
- Google Play

App Store

Google Play

GETTING STARTED IS EASY

1. To register, please call 1-800-835-2362
2. Scan the QR code to download the Teladoc app or visit teladoc.com
3. Create an account or sign in

MEDICAL – Orthopedic Surgery Alternative

Regenexx

Regenexx

Enhance your body's natural healing with Regenexx!

Regenexx offers a lower-risk, lower-cost, minimally invasive option for many orthopedic surgeries, avoiding up to 70 percent of elective procedures. Using your blood platelets and bone marrow aspirate, Regenexx will process and inject them precisely at the injury site with image guidance. With Regenexx, you can get back to doing what you love without invasive surgery and lengthy recovery.

Regenexx offers a nonsurgical outpatient procedure, done in a day or three treatments over two weeks. Many patients, even those with health concerns like heart issues, can safely return to activity within a week, making it a preferable alternative to surgery.

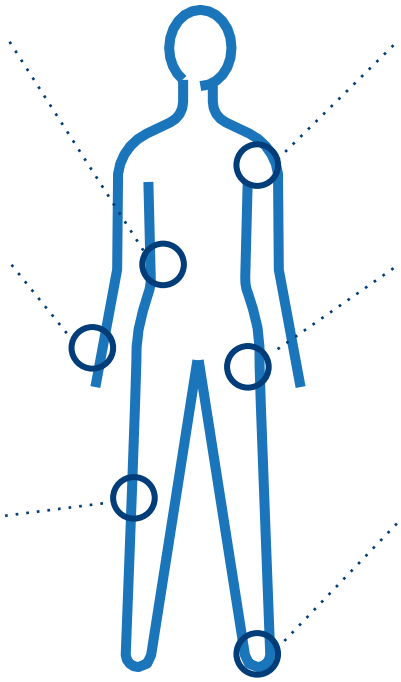
Avoid up to **70%** of elective procedures.

Conditions Treated

Spine
back or neck nerve pain
bulging, collapsed, or herniated disc
ruptured or torn disc
degenerative disc disease
disc extrusion or protrusion

Hand/Wrist/Elbow
arthritis
carpal tunnel
CMC joint arthritis (thumb)
tennis elbow
trigger finger
ulnar nerve entrapment

Knee
arthritis
joint-replacement alternative
meniscus tear
sprain or tear of ACL/PCL or MCL/LCL
tendinopathy



Shoulder
arthritis
joint replacement alternative
labral tear
rotator cuff tears or tendinosis

Hip
arthritis
bursitis labral/labrum tear
joint-replacement alternative
osteonecrosis
tendinopathy

Ankle/Foot
achilles tendinopathy
arthritis
bunions
instability
ligament sprain or tear
plantar fasciitis

Learn More

Consult with your health insurance to verify how Regenexx is covered.

For information on the Regenexx benefit and eligibility, contact the education center.

- Register for weekly webinars at www.regenexxbenefits.com/webinar?mailer
- Contact us at 866-261-6931 or visit regenexxbenefits.com

HEALTH AWARENESS INCENTIVE PROGRAM

QCRH's Health Awareness Incentive Program helps employees and their families adopt healthy lifestyle behaviors and earn discounts on their medical premiums. Participation is voluntary.

PROGRAM OFFERINGS	
Health Awareness Incentive Program:	Employees and spouses enrolled in the QCRH health plan who participate in the Health Awareness Incentive Program will receive a discounted health insurance premium.

Participation Requirements:
Step 1: Complete a biometric screening, onsite or off-site
*Off-site health forms may be completed by your primary care provider
Step 2: Complete the online health risk assessment questionnaire

Your biometric screening includes blood pressure, triglycerides, blood sugar, cholesterol, waist circumference and weight.

Medical Premium Tiers

Tier	You and your spouse (if covered)
Tier 1	Complete Steps 1 and 2.
Tier 2	Both you and your spouse are covered, one completes Steps 1 and 2 and the other does not.
Tier 3	Nobody Participates.

Your Benefits Team will **email eligible participants** detailed instructions for signing up and completing the **annual health screening, typically in July**.

Screenings take place around August/September. **Off-site forms available** on the portal or by contacting the QCRH Benefits Team.

Disclosure: Rewards for participating in this wellness program are available to all employees. If you are unable to meet a standard for a reward, you may qualify to earn the same reward by different means. Contact us and we will work with you (and, if you wish, your doctor).

Questions? Contact Human Resources at 309-743-7721 or QCRH-Benefits@QCRH.com

HEALTH SAVINGS ACCOUNT

Administered by Inspira Financial

AN HSA CAN HELP YOU

Lower your taxes, cover some expenses your plan doesn't, and even help save for retirement.

HEALTH SAVINGS ACCOUNT (HSA)

To be eligible you must: ***Note:** If your eligible dependent is covered under Medicare, you can continue contributing to the HSA. Contribution eligibility is based on **your** Medicare status, not the dependents.	• Be covered under a High-Deductible Health Plan (HDHP) • Not be claimed as a dependent on someone else's tax return • Not maintain a Healthcare FSA • Not be enrolled in Medicare* • Not have received VA benefits within the past three months • Not have a spouse with an FSA plan through their employer		
Maximum contributions	2026 Single: $4,400 2026 Family: $8,750 2027 Single: $4,500 2027 Family: $9,000 Catch-up: $1,000 (those 55+)		
Pre-tax contributions?	Yes		
QCRH Employer contributions?	QCRH will match $1:$1 up to $500 per year. (via payroll deductions)		
Eligible Expenses Beyond your plan coverage	More common examples: • Medical • Dental • Vision • Prescription	Less common examples: • Special education • Seeing eye dog • Braille literature • Hair loss pieces	Download a full list from the IRS - Publication 502.
Availability of funds	Funds must accumulate before using		
Use it or lose it?	No, unused funds roll over from year to year		
Can take it with you if you leave the company?	Yes		

FLEXIBLE SPENDING ACCOUNTS

Administered by Inspira Financial

MEDICAL FLEXIBLE SPENDING ACCOUNT (FSA)

Maximum Contribution	$3,500 (2027 limit; prorated by enrollment effective date)	
Eligible Expenses Beyond your plan coverage	PPO enrollees: full FSA for medical, dental and vision. HDHP enrollees: limited FSA for dental and vision only.	For **Health Care FSAs** download a full list from the IRS - Publication 502.
Funding	Your pre-tax contributions	
Availability of funds	Entire election is available January 1 (pre-funded)	
Use it or lose it?	Yes, however, any unused funds will be forfeited by the end of the plan year. The Healthcare FSA allows you to rollover up to $700 of unused money into the next plan year.	

DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT

Maximum Contribution	$7,500 ($3,750 if married filing separately)	
Eligible Expenses Beyond your plan coverage	Work-related care for a qualifying child under age 13, or a disabled spouse, child or parent living with you	For information on **Child and Dependent Day Care Expenses** download the IRS Publication 503
Funding	Your pre-tax contributions	
QCRH Employer contributions?	QCRH will match $1:$1 up to $500 per year.	
Availability of funds	Funds become available as they are deducted from your paycheck	
Use it or lose it?	Yes, you must use your funds by the end of the calendar year or they are forfeited. There is a grace period to incur 2027 claims from January 1, 2027 - April 30, 2028	

DENTAL

Administered by Delta Dental

Dental care is an important part of your overall health. This plan provides you with no-cost, in-network preventive care, as well as coverage for basic care and major procedures.

Dental Network: Delta Dental PPO or Premier
Use In-Network Providers for the best value! Visit deltadental.com and click "Find a dentist" to search for providers.

SERVICES	IN-NETWORK
Preventive Services	Covered at 100%; 2 per calendar year
Deductible	$25 Single / $50 Family (applies to Basic & Major services)
Annual Benefit Maximum	$1,500
Basic Services	You pay 20% coinsurance (after deductible)
Major Services	You pay 50% coinsurance (after deductible)
Orthodontic No age limit applies	You pay 50% coinsurance, up to a lifetime maximum of $1,500; no age limit applies

PER PAY PERIOD PREMIUMS	DENTAL PLAN
Employee	$9.23
Employee + Child(ren)	$20.30
Employee + Spouse	$17.26
Employee + Family	$27.94

Refer to the plan certificate to determine if a procedure is considered Basic or Major

VISION

Administered by EyeMed

Enroll in vision coverage to save money on eligible vision care expenses, such as eye exams, glasses and contact lenses.

Vision Network: EyeMed Select Network
Use In-Network Providers for the best value!
Visit www.eyemed.com, click Find an eye doctor, choose "Select Network," enter your zip code.

SERVICES	IN-NETWORK
Exam 1 every 12 months	$10 copay
Eyeglasses	
Frames 1 every 24 months	$120 allowance and 20% discount off the balance
Lenses 1 every 12 months	Single Vision $25 copay Bifocal $25 copay Trifocal $25 copay 20% off balance over $120
Contacts	**Please note:** Contact lenses are in place of lenses and frame.
Elective Contacts 1 every 12 months	$0 copay, $135 allowance, 15% off balance over $135
Medically Necessary 1 every 12 months	100% Covered
Contact Lens Fitting & Evaluation 1 every 12 months	Up to $40 copay

PER PAY PERIOD PREMIUMS	VISION PLAN
Employee	$3.36
Employee + Child(ren)	$6.72
Employee + Spouse	$6.39
Employee + Family	$9.87

LIFE / AD&D

Administered by Mutual of Omaha

Life insurance provides your named beneficiary(ies) with a benefit in the event of your death. Accidental Death and Dismemberment (AD&D) insurance provides specified benefits to you in the event of a covered accidental bodily injury that directly causes death or dismemberment (i.e., the loss of a hand, foot or eye).



Designate Your Beneficiary(ies)

Designate your beneficiary(ies) and review them annually to ensure they are up to date.

BASIC LIFE / AD&D (EMPLOYER-PAID)

This benefit is provided at NO COST to you.

	BENEFIT
Basic Life	2 times Annual Earnings up to $500,000
Accidental Death & Dismemberment	2 times Annual Earnings up to $500,000

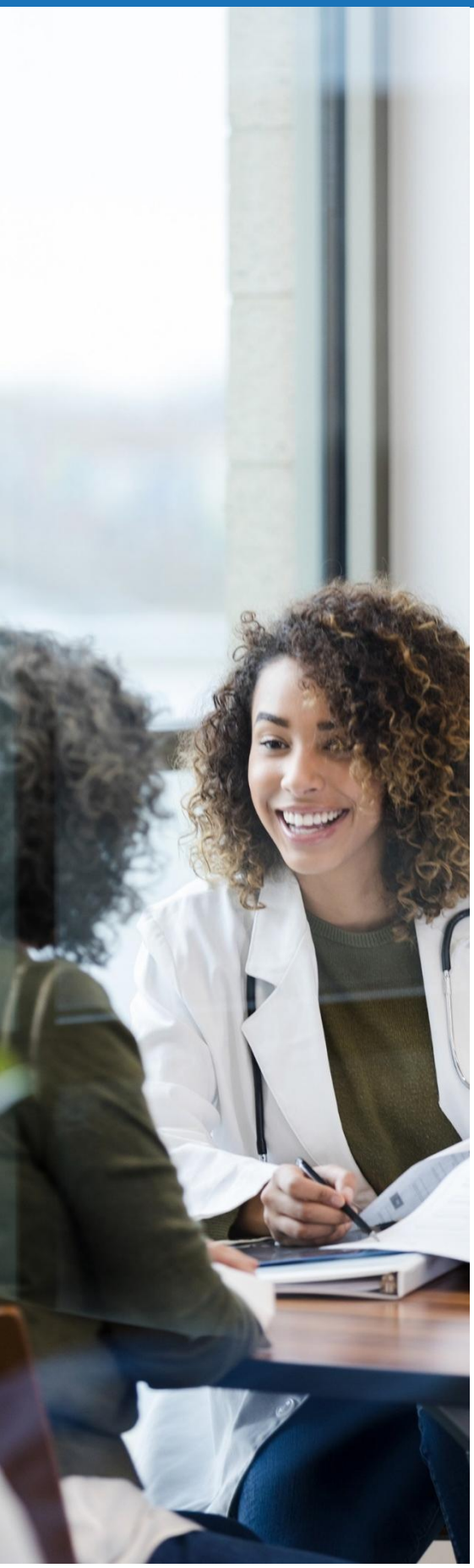
SUPPLEMENTAL BASIC LIFE / AD&D (EMPLOYEE-PAID)

You may enhance your life benefit by purchasing supplemental insurance. Cost is based on your age and coverage amount elected.

	BENEFIT
Employee	Increments of $10,000 up to $500,000 **Guarantee Issue:** up to $200,000 – new hires Open Enrollment increase: $10,000/year with no EOI up to GI
Spouse*	Increments of $5,000 up to $250,000 or 100% of employee benefit **Guarantee Issue:** up to $50,000
Children*	Increments of $10,000 up to $20,000 (minimum $10,000) not to exceed 100% of the employee's coverage amount; live birth through age 25 Guarantee Issue up to $20,000

Age reductions may apply. Refer to the benefit plan document.
**Employee coverage must be purchased in order to elect Spouse or Child Coverage.*

Evidence of Insurability (EOI): If you elect coverage after your new hire election period or request coverage over the Guaranteed Issue amount, your coverage will require an additional approval from the insurance company. Coverage will not take effect until approved by the carrier.



DISABILITY

Administered by Mutual of Omaha

Short-term and long-term disability insurance provides you benefits to replace part of your lost income when you become unable to work due to a covered injury or illness.

BENEFITS*	SHORT-TERM (Employer Paid)	LONG-TERM (Employee Paid)
Coverage amount	60% of average weekly earnings, up to $2,000/week	60% of average monthly earnings, up to $6,000/month
Accident benefits begin	Day 8 (7-day elimination period)	Day 91 (90-day elimination period)
Illness benefits begin	Day 8 (7-day elimination period)	Day 91 (90-day elimination period)
Maximum payment period	12 weeks	Social Security Normal Retirement Age (SSNRA)



ADDITIONAL PROTECTION

Accident – Assurity

Stay ahead of the medical and out-of-pocket expenses that add up so quickly after an accident. When you have a covered accident, you can receive cash benefits to use however you see fit. Coverage typically includes ambulance services, emergency room visits, intensive care unit confinement, etc.

Critical Illness – Assurity

Typically pays a lump-sum benefit directly to you at the time a covered illness (such as a stroke, heart attack or stroke) occurs or is diagnosed. When you are sick, the last thing you want to think about is your finances. You can typically use the money for everyday expenses like mortgage payments, utility bills or childcare.

Hospital Indemnity – MetLife

Similar to Accident and Critical Illness Plans, Hospital Indemnity provides a lump-sum benefit to use for expenses related to a hospital stay. Expenses covered include: hospital admission, hospital confinement, lodging, transportation and more.

Cancer – Prosperity

This coverage can provide a cash benefit once you are diagnosed. Depending on the covered disease, you can access transportation benefits, hospice and nursing services, and more. Carefully read the policy before you purchase something to be sure the things that are covered meet your expectations.

For claims and questions on Assurity and Prosperity plans, contact Supplemental Insurance Services: 563-652-6813, supins@supinsurance.com. Plan details are on the benefits portal.



ADDITIONAL PROTECTION

Identity Protection – Allstate

Monitors your credit reports, financial accounts and online activity, with U.S.-based restoration specialists and up to $1 million reimbursement for qualified identity-restoration expenses.

Phone: 855-821-2331
Website: www.allstate.com

Legal Assistance – ARAG

Protect yourself and your family by taking advantage of the legal assistance coverage. This plan covers: telephone consultations, will prep, document reviews and more.

Phone: 800-247-4184
Website: www.araglegal.com/myinfo **(Code: 19525qcr)**

Pet Insurance – MetLife

Coverage that helps with unexpected accident and illness expenses for your pets.

Phone: 855-270-7387
Website: www.metlifepetinsurance.com



ADDITIONAL PROTECTION

EMPLOYEE ASSISTANCE PROGRAM (EAP) – Mutual of Omaha

You have access to easy, **convenient and confidential** experienced clinicians and professional staff **24 hours a day**.

The Employee Assistance Program (EAP) is **available to employees, spouses and dependents through age 26**, whether you are enrolled in a medical plan or not.

The EAP can help with challenges like:

- mental wellness
- financial planning
- retirement planning
- stress & anxiety
- substance abuse
- and more

100% CONFIDENTIAL SUPPORT:

- Addictive Behaviors
- Alcohol Abuse
- Anger Management
- Anxiety
- Caregiver Support
- Dependent Care Issues
- Depression
- Drug Use and Abuse
- Family/Marital Problems
- Financial Issues
- Grief and Loss
- Legal Problems
- Organization Change
- Relationship Concerns
- Stress-Related Concerns
- Work-Life Balance

CONTACT THE EMPLOYEE ASSISTANCE PROGRAM:

Phone: 800-316-2796
Website: www.mutualofomaha.com/eap
Group number: C9FZ

SAVING FOR THE FUTURE

401(k): QCRH offers employees a 401(k) retirement plan administered through Principal. Employees age 18 and older are eligible beginning on their date of hire. Projected 2027 annual maximum contributions:

- Under age 50: $25,500
- Age 50–59 and 64+ during the calendar year: $34,000
- Age 60–63 during the calendar year: $37,250

QCRH Employer Match*

100% match of the first 3% of salary deferred / 50% match of the next 3% deferred (up to 4.5% of compensation)

**Matching contributions are provided for employees actively employed at the end of each pay period. Future employer contributions are at the discretion of QCR Holdings, Inc.*

Vesting Schedule for Matching Contributions					
<1 Year	1 Year	2 Years	3 Years	4 Years	5 Years
0%	20%	40%	60%	80%	100%

Automatic Deferral Percentage

Thirty days after your hire date, 6% of your compensation is automatically withheld as a pre-tax 401(k) deferral unless you elect otherwise. To change it, log into your Principal account using the instructions below.

Automatic Increase Plan

Each January 1st your deferral percentage automatically increases by 1% unless you elect otherwise, stopping once it reaches 15%.

To elect otherwise, log into your account and update the deferral percentage and automatic increase contribution.

Accessing Your Principal Account

First-time users

- Go to principal.com/Welcome and select Get Started
- Enter your name, date of birth, mobile number and ID number (SSN) or ZIP code
- Agree to do business electronically and click Continue
- Without a mobile number, answer a few personal questions instead
- Create a unique username and secure password, and add your email address
- Select and answer three security questions
- You'll receive a confirmation email within a few minutes
- At first log in, choose where Principal sends your verification codes

Plan Options

- Traditional---Pre-tax, Roth---Post-tax
- Many Investment options to choose from
- Can contribute 0% to 100%

Ongoing account access

- Go to principal.com and click Log In
- Enter your username and password (click Forgot Username or Forgot Password to reset)
- From a new device, or after a password reset, you'll receive a security code by text, voice call or authentication app
- Enter the security code and click Verify

Having trouble setting up your login?
*Contact Principal at **800-986-3343***

Investment Help is Available

Investment Center Representatives can provide help on a variety of products and services and are familiar with the 401(k) investment choices. Contact any representative below with questions — this service is free to all employees. Your individual broker can also provide guidance.

Blake Schaeffer, Brady St bschaeffer@qcbt.com 563-468-6272	Amber Brummit, Moline abrummit@qcbt.com 309-743-7783	Joana Karl, Cedar Rapids jkarl@crbt.com 319-743-7175	Matt Carlisle MCarlisle@CRBT.com 319-743-6871
Laurel Thompson, Waterloo lthompson@communitybt.com 319-433-6121	Darcy Stroinski, Ankeny dstroinski@bankcsb.com 515-252-1277	Dave Howell, Utica dhowell@qcbt.com 563-468-4407	QCR HOLDINGS, INC. a relationship driven organization®

RESOURCES

Coverage	Carrier/Plan Sponsor	Phone & Website
Physical & Mental Health		
Medical	Consociate Health	800-798-2422 www.consociatehealth.com
Prescription Drugs	MedOne	888-884-6331 www.medone-rx.com
Telemedicine	Teladoc	800-835-2362 www.teladoc.com
Spending Accounts	Inspira Financial (HSA & FSA)	844-204-9252 www.inspirafinancial.com
Dental	Delta Dental	800-323-1743 www.deltadentalil.com
Vision	EyeMed	866-939-3633 www.eyemed.com
Life Insurance	Mutual of Omaha	800-228-7104 www.mutualofomaha.com
Disability Insurance	Mutual of Omaha	800-228-7104 www.mutualofomaha.com
Employee Assistance Program	Mutual of Omaha	800-316-2796 mutualofomaha.com/eap
Additional Protection		
Accident Insurance	Assurity	800-869-0355 x4484 www.assurity.com
Critical Illness Insurance	Assurity	800-869-0355 x4484 www.assurity.com
Cancer	Prosperity	563-652-6813 www.prosperitylife.com
Hospital Indemnity Insurance	MetLife	800-438-6388 mybenefits.metlife.com
Legal Assistance	ARAG	800-247-4184 araglegal.com/myinfo (Code 19525qcr)
Identity Protection	Allstate	855-821-2331 www.allstate.com
Pet Insurance	MetLife	855-270-7387 www.metlifepetinsurance.com
Retirement 401(k)	Principal	800-547-7754 www.principal.com

ADDED BENEFITS

Beyond core insurance, QCRH offers stock purchase, PTO buy-up, sabbaticals, education assistance, clothing advance and adoption assistance.

Added Benefits	
EMPLOYEE STOCK PURCHASE PLAN	Contribute up to 15% of bi-weekly pay (max $21,250/year) to purchase QCR Holdings, Inc. common stock at a 15% discount. Offering periods: Jan 1–Jun 30 and Jul 1–Dec 31.
PERSONAL DAY BUY-UP	Purchase up to four additional personal days per year. The cost of additional personal days will be calculated using the rate of pay at the time of the request and payroll deducted over the remaining pay periods of the calendar year. The Personal Day Buy-Up form can be located on QNews.
SABBATICAL	All eligible employees (scheduled 32-40 hours per week) with 10, 18, 25, 30 and 35 years of service and have satisfactory performance are eligible for 4 consecutive weeks paid time off in addition to personal time.
EDUCATION ASSISTANCE	Tuition assistance for accredited coursework for employees working at least 24 hours per week (tuition only).
CLOTHING ADVANCE	Clothing advance up to $300, requested quarterly. Requests will be taken at the start of each new quarter – January, April, July and October. New hires may also apply outside of the quarterly schedule. The funds must be used for business attire. Please see QNews for the full policy and procedure. *Executive Officers are excluded from this program
ADOPTION ASSISTANCE	Up to $5,000 per adoption with a $10,000 lifetime maximum. See QNews and the employee handbook for full policies.
ADDITIONAL DAYS OFF	Your Birthday, Family Matters Day (hourly employees), Wedding Day Jitters, New Parent's Day, QCR Holidays, among others. Please refer to the employee handbook for additional information.

BENEFITS VOCABULARY

WELCOME TO YOUR BENEFITS!

To better understand your coverage, it's helpful to be familiar with **benefits vocabulary**. Take a moment to review these terms, which may be referenced throughout this guide.

Balance Bill – When a health care provider bills a patient for the difference between what the patient's health insurance chooses to reimburse and what the provider chooses to charge.

Copay – A fixed dollar amount you pay the provider at the time of service; for example, a $25 copay for an office visit or a $10 copay for a generic prescription.

Coinsurance – The percentage paid for a covered service, shared by you and the plan. Coinsurance can vary by plan and provider network. Review the plans carefully to understand your responsibility. You are responsible for coinsurance until you reach your plan's out-of-pocket maximum.

Deductible – The amount you pay each calendar year before the plan begins paying benefits. Not all covered services are subject to the deductible; for example, the deductible does not apply to preventive care services.

Emergency Room Care – Care received at a hospital emergency room for life- threatening conditions.

In-Network Care – Care provided by contracted doctors within the plan's network of providers. This enables participants to receive care at a reduced rate compared to care received by out-of-network providers.

Out-of-Network Care – Care provided by a doctor or at a facility outside of the plan's network. Your out-of-pocket costs may increase and services may be subject to balance billing.

Out-of-Pocket Maximum – The maximum amount you pay per year before the plan begins paying for covered expenses at 100%. This limit helps protect you from unexpected catastrophic expenses.

Premium – The complete cost of your plans. You share this cost with your employer and pay your portion through regular paycheck deductions.

Preventive Care – Routine health care including annual physicals and screenings to prevent disease, illness, and other health complications. In-network preventive care is covered at 100%.

Urgent Care – Urgent care is not the same as emergency care. Visit urgent care for sudden illnesses or injuries that are not life-threatening.

Urgent care centers are helpful when care is needed quickly to avoid developing more serious pain or problems.

Preferred generic drugs – Generic drugs have the same active ingredients and work the same way as the brand-name drugs they copy. They usually cost less than the brand-name versions.

Preferred brand drugs – These drugs are included in a plan's list of covered drugs and may not have a generic version. They cost more than generic drugs but less than non-preferred brand drugs.

Specialty drugs – These drugs are used to treat ongoing health conditions and can be costly. They often require special handling and may have to be ordered through a specialty pharmacy.

MEC Plan – Minimum Essential Coverage. A MEC plan is health insurance that meets the federal government's standard for coverage.

BENEFITS 101

Deductible

Amount you pay for healthcare **BEFORE** your insurance starts to pay.

Coinsurance (aka Cost Share)

A **percentage** of the cost of care you are responsible to pay for **AFTER** you have met the deductible.

Co-Payment (aka Copay)

Fixed amount of money you pay each time you or your dependents receive care.

Out of Pocket Maximum (OPM)

Greatest amount of money you can spend on healthcare for the year.

- Does not include premiums or costs that your insurance plan does not cover.



DEDUCTIBLE

COINSURANCE

COPAYMENT

Out of Pocket Maximum



Do You Have Questions About Your Benefit Programs and Aren't Sure Who to Contact?

THE TRUENORTH TRUEADVOCATE TEAM IS HERE TO HELP!

You can contact one of our Advocates
Monday – Friday from 7:30 am – 5:00 pm CT

Our team can assist with:

- Benefit coverage questions
- Ordering an ID card
- Claim questions and explanation of benefits
- Finding a form
- Provider search
- Choosing a plan that works for you

(888) 655-9980

trueadvocate
@truenorthcompanies.com

QCR HOLDINGS, INC.

TRUENORTH



REQUIRED ANNUAL NOTICES

IMPORTANT NOTICES FROM QCR HOLDINGS, INC. REGARDING THE QCRH HEALTH PLAN

In compliance with insurance regulations, we provide information regarding the health benefits we offer and what options you have as an employee.

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