

BENEFITS SUMMARY

Medical Rx

In-network plan information	Blue Plan (PPO)	Red Plan (HDHP)
Employee pays (biweekly)		
Employee only	\$49.71	\$32.49
Employee + spouse	\$217.95	\$136.24
Employee + child(ren)	\$191.47	\$116.00
Family	\$318.14	\$195.88
Deductible		
Individual Family	\$1,500 \$3,000	\$3,400 \$6,800
Coinsurance (you pay after deductible)	20%	0%
Out-of-pocket maximum		
Individual Family	\$6,350 \$12,700	\$6,350 \$12,700
Preventive care	You pay 0%	You pay 0%
Office visit copay		Subject to deductible
Primary Specialist	\$25 \$50	
Telemedicine (Amwell)	\$0 copay	Subject to deductible
Urgent care visits	Up to \$50 copay	Subject to deductible
Emergency room visits	\$250 copay, then subject to deductible and coinsurance	Subject to deductible

HSA/FSA

Healthcare FSA	Dependent care FSA
You can use money set aside in your healthcare FSA for eligible medical, dental, and vision expenses incurred by you, your spouse, or your taxable dependents.	You can use money set aside in your dependent care FSA to assist in payment of eligible daycare services for a tax-dependent household member.

Health savings account Only available with Red health plan (HDHP)

You can use money in this account to pay for eligible medical, prescription, dental, and vision expenses. Ag Partners will contribute \$500 annually for those enrolled in the Employee Only tier and \$1,000 annually for those enrolled in the Employee + Spouse, Employee + Children, and Employee + Family tiers.

Dental

In-network plan information	Dental plan
Employee pays (biweekly)	
Employee only	\$13.16
Employee + spouse	\$26.11
Employee + child(ren)	\$26.11
Family	\$44.76
Deductible	
Individual Family	\$50 \$150
Diagnostic and preventive services	You pay 0%
Exams, cleanings, and x-rays	No deductible
Basic services	You pay 50% after deductible
Fillings, simple extractions, root canals	
Major services	You pay 50% after deductible
Crowns, dentures and bridges, onlays	
Annual maximum	\$1,500

2026-2027



Vision Plan 1

In-network plan information	Ameritas Vision Plan
Employee pays (biweekly)	
Employee only	\$5.40
Employee + 1	\$8.03
Employee + child(ren)	N/A
Family	\$13.57
Eye exams	\$0 copay
Standard frames	\$130 allowance
Lenses	
Single, bifocal, trifocal, or lenticular	Covered in full
Elective contact lenses	\$130 allowance

Vision Plan 2

In-network plan information	Gold Materials Only 130	Gold Exam + Materials 130	Silver Exam + Materials 130
Employee pays (biweekly)			
Employee only	\$5.10	\$6.99	\$5.78
Employee + 1	\$8.15	\$11.18	\$9.25
Employee + child(ren)	\$9.41	\$12.90	\$10.67
Family	\$16.00	\$21.93	\$18.15
Eye exams	Not included	\$15 copay	\$15 copay
Standard frames	\$130 allowance	\$130 allowance	\$130 allowance
Lenses			
Single, bifocal, trifocal, or lenticular	\$15 copay	then 100% covered	

Contact lenses	Note: contact benefit is chosen in lieu of glasses		
Medically necessary		\$250 allowance	
Elective (lenses only)	\$130 allowance	\$130 allowance	\$130 allowance

COOP RETIREMENT & 401(K)

401(K) RETIREMENT PLAN

- Eligible to participate after 3 months of service
- Ag Partners Coop provides up to a 2% match

Employee must be 18 years old to be eligible for participation in the 401(k) plan

RETIREMINT PLAN

- Mandatory participation after 1,000 hours of service
- Employee contributes 4% of gross wages
- Ag Partners Coop contributes 2.55% of gross wages

Employee must be 21 years old to be eligible for participation in the RetireMint plan.

Incentive Plan

PURPOSE

To **recognize and reward** employees, align **individual efforts** with **business strategies**, provide a variable component of total pay that is **market competitive**, and motivate and reward **total company results**.

- A discretionary incentive may be awarded following the fiscal year ending August 31, 2026, subject to company profitability and management discretion.

Dave Ramsey – Smart Dollar

- FREE Smart Dollar account with mortgage, investment, and net worth calculators as well as financial coaching videos.

AgActive Wellness Program

Complete an annual preventive physical and submit a signed wellness form to HR = \$500 incentive for fitness or wellness-related items and activities.

Paid Time Off & Holidays

All full-time employees shall be entitled to the number of PTO days as outlined below.

NON EXEMPT (Hourly): Beginning on the first day of the month following 30 days of continuous service, an employee will begin accruing the following hours/days per month.

Continuous employment	Full-time accrual
1-4 years	18 workdays (12 hours/month)
5-9 years	21 workdays (14 hours/month)
10+ years	30 workdays (20 hours/month)

Employees may accrue PTO leave up to a maximum of 40 days or 320 hours at any one time. Unpaid time off requires supervisor approval.

EXEMPT (Salary): Unlimited PTO. There is no set number of days off — as long as time away is approved in advance and responsibilities are covered. This flexible policy reflects our trust in employees to balance time off with performance and team needs.

HOLIDAY PAY 6 paid holidays each year for full-time employees:

- New Year's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

PAID MATERNITY LEAVE

- 8 weeks of paid maternity leave to mothers giving birth, immediately following birth.
- Eligibility begins at 1 year of employment.

PAID MEDICAL LEAVE

- Up to 8 weeks of paid medical leave for exempt (salary) employees facing a serious health condition, following 4 weeks of unlimited PTO
- Eligibility begins at 1 year of employment.

ADDITIONAL BENEFITS

VOLUNTARY SHORT-TERM DISABILITY

Short-term disability replaces a portion of an employee's income if that employee is unable to work due to an accident or illness. This plan covers 60% of your weekly income for up to 13 weeks.

ACCIDENT INSURANCE

A benefit that pays you directly in the case of an accident resulting in injury.

CRITICAL ILLNESS INSURANCE

Pays a lump-sum benefit upon diagnosis of certain specified illnesses, conditions and procedures.

Life Insurance

GROUP BASIC LIFE

Ag Partners Coop provides employees with basic life and AD&D Insurance. **This coverage is entirely company paid and requires no contribution on your part.**

- Employee Life Insurance – 1x Annual Salary

VOLUNTARY LIFE AND AD&D PLAN

Ag Partners Coop offers employees the opportunity to purchase voluntary life and AD&D Insurance. **These coverages are entirely employee paid.**

Ground & Air Ambulance Coverage

- Emergency ambulance coverage: Out-of-pocket expense coverage for emergency ground and air transition to a medical facility.
- Hospital-to-hospital ambulance coverage: Out-of-pocket expense coverage for medically appropriate transfers between medical facilities.

Employee Uniforms & Discounts

COMPANY UNIFORM & BOOT PROGRAM

Employees receive a \$270 per calendar year allowance for Ag Partners branded apparel or boots ordered online through our company clothing website.

EMPLOYEE DISCOUNTS

Fuel: \$0.05 per gallon discount for employees using their Co-op fuel card at C-Stores or Cardrol locations.

Propane: \$0.10 per gallon discount on bulk propane purchases only.

Fountain drinks/coffee: Free fountain drinks or coffee for employees while they are working.

QUESTIONS?

If you have any questions, please contact:

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