



2018 Benefits Summary

DASEKE®
BENEFITS



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Welcome

At Bulldog Hiway Express, we strive to offer a robust benefits package that gives you peace of mind in knowing that the most important things in life are protected—your family, your finances, and your future. This benefit summary highlights the many benefit options available to you.

Eligibility

If you are a full-time employee working thirty (30) hours a week or more, you are eligible for benefits outlined in this guide. You may cover your spouse if they are not offered health insurance through their employer and you may cover dependent children up to age 26. Coverage begins the 1st of the month following 30 days of employment.

2018 Highlights

To ensure we are offering the best available benefits to our employees, we are excited to announce the following:

- **Lucent Health with PHCS (Private Healthcare Systems) will be the administrator for your employer-sponsored health plan.**
- **MaxorPlus will be your pharmacy benefit manager.**
- **Voluntary benefit programs**, including Hospital Indemnity, Accident, and Critical Illness from Voya and Identity Theft Protection from ID Watchdog.
- **A benefits enrollment team** is available over the phone at 844-831-5969, Monday – Friday, 8 a.m. – 7 p.m. CST to answer your questions, help you select the benefits that are right for you, and enroll you and your family in coverage.
- **An online portal** to access information and enroll in your benefits, if you're unable to do so over the phone. Visit **www.mydasekebenefits.com**.

How to Enroll in Your Benefits

All benefit-eligible employees are encouraged to complete an individual phone meeting with a member of the Benefits Enrollment Team. This meeting is your chance to:

- Ask questions and get more information.
- Get help choosing the best benefits for you and your family.
- Complete the enrollment process.

You can schedule your appointment online or over the phone.

- Phone: Call **844-831-5969**, Monday – Friday, 8 a.m. – 7 p.m. CST.
- Online: Log on to **www.daseke.mybenefitsappointment.com**.

Benefits Effective Date	First Day to Enroll with a Benefit Counselor	Last Day to Enroll with a Benefit Counselor
January 1, 2018	Monday, December 11, 2017	Friday, December 22, 2017
February 1, 2018	Monday, January 8, 2018	Friday, January 19, 2018
March 1, 2018	Monday, February 5, 2018	Friday, February 16, 2018
April 1, 2018	Monday, March 5, 2018	Friday, March 16, 2018
May 1, 2018	Monday, April 9, 2018	Friday, April 20, 2018
June 1, 2018	Monday, May 7, 2018	Friday, May 18, 2018
July 1, 2018	Monday, June 4, 2018	Friday, June 15, 2018
August 1, 2018	Monday, July 9, 2018	Friday, July 20, 2018
September 1, 2018	Monday, August 6, 2018	Friday, August 17, 2018
October 1, 2018	Monday, September 10, 2018	Friday, September 21, 2018
November 1, 2018	Monday, October 8, 2018	Friday, October 19, 2018
December 1, 2018	Monday, November 5, 2018	Friday, November 16, 2018

2018 Highlights

Medical

Because there's nothing more important than your health, Bulldog Hiway Express is proud to announce our partnership with Lucent Health.

Lucent Health

- Lucent Health, combined with PHCS (Private Healthcare Systems), will be the administrator of your employer-sponsored health plan.
- Physician Network — Please check the network before visiting your provider. To locate a provider, log on to **www.mydasekebenefits.com** and click on **www.multiplan.com/naaphcs**.
- Pre-certification — Any services provided in a hospital or facility (whether inpatient or outpatient) will need to be pre-certified for your benefits to apply. Please make sure you are calling Lucent Health to verify your procedure is pre-certified and covered by the plan.

MaxorPlus

- Network — Log on to **www.maxorplus.com** to access the MaxorPlus network and confirm your preferred pharmacy location.
- ID Card — MaxorPlus information will be included on your Lucent Health medical ID card.

Your Medical Plan Options

Bulldog Hiway Express' medical plans offer flexibility in managing care for you and your family. You have the option to choose among four medical plans: Platinum, Gold, Silver, and Bronze. The table on page 4 provides a general summary of your medical benefits and shows the amount you pay; please refer to your Summary Plan Description (SPD) for additional details.

2018 Wellness Program

You will automatically receive a wellness credit on your medical rates in 2018. To continue receiving the credit in 2019, you will need to complete a wellness exam in 2018 and have your physician complete an internal wellness form, then turn the completed form in to HR.

Narus Health – Brought to you by Lucent Health

As part of your Lucent Health plan, Narus Health will help you navigate the healthcare system. With a dedicated personal care team that is available 24/7 through text messaging, video conference, or phone and comprised of nurses, social workers, care managers, and physicians, you will get the help you need to coordinate your care and treatments. This is part of your health plan in 2018.

Hospital Indemnity *Voluntary Coverage*

An unexpected hospital stay can put a strain on your budget. Hospital Indemnity insurance through Voya is designed to provide you with financial protection by paying you benefits for hospital confinement, CCU confinement, and rehabilitation facility care. Since the plan pays the benefit directly to you, in addition to what your medical plan covers, you can use the benefit however you want. Use it to pay for out-of-pocket expenses and extra bills relating to your hospitalization, or for other expenses, like buying groceries or paying for childcare.

Event	5X Initial Confinement	10X Initial Confinement
Initial Confinement Benefit	\$500	\$1,000
Hospital Benefit	\$100 per day, up to 30 days	\$100 per day, up to 30 days
Critical Care Unit Benefit	\$200 per day, up to 15 days	\$200 per day, up to 15 days
Rehabilitation Facility Benefit	\$50 per day, up to 30 days	\$50 per day, up to 30 days
Weekly Rate		
Employee	\$2.41	\$3.53
Employee + Sp	\$5.28	\$7.72
Employee + Ch	\$3.78	\$5.58
Family	\$6.65	\$9.78

2018 Highlights

Accident *Voluntary Coverage*

Accident Insurance through Voya can help cover the out-of-pocket costs associated with an accident by paying you a benefit depending on the injuries you suffer and treatment you receive.

Plan Features

- Customize your plan to fit your needs — choose on/off job or off job coverage
- \$50 annual wellness benefit
- Cash benefits paid directly to you in addition to what your medical plan covers, so you can use them however you want
- Coverage for things like emergency room visits, ambulance transportation, fractures, dislocations, burns, and more
- Family coverage available

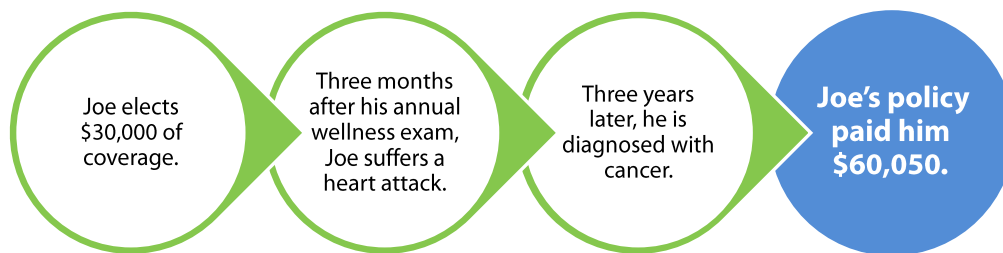
Accident Insurance Weekly Rate		
	On/Off Job	Off Job
Employee	\$2.43	\$1.93
Employee + Sp	\$4.08	\$3.25
Employee + Ch	\$4.55	\$3.62
Family	\$6.20	\$4.94

Critical Illness *Voluntary Coverage*

No one saves to get sick, which is why we are pleased to introduce Critical Illness Insurance from Voya to help you protect your bank account if you are diagnosed with certain conditions and illnesses. Please speak with a member of the Benefits Enrollment Team for your custom quote.

Plan Features

- Coverage for conditions such as heart attack, cancer, and stroke
- \$50 annual wellness benefit
- Benefits paid to you — use them however you want
- **During the enrollment period, you have a one-time only opportunity to elect up to \$30,000 of coverage for yourself and \$15,000 for your spouse and up to \$10,000 for your children without answering medical questions.**



Over three years, Joe's policy paid out multiple benefits, including a \$30,000 heart attack benefit, a \$30,000 cancer benefit, and an annual \$50 wellness benefit each year he completed his wellness exam.

**This example is for illustrative purposes only. Your actual benefits may vary.*

Identity Theft Protection *Voluntary Coverage*

Identity Theft Protection from ID Watchdog provides identity monitoring, alerting, and resolution services. Should your identity be compromised, ID Watchdog's certified resolution experts will step in and work on your behalf to fully restore your identity to its pre-theft condition.

Level	Features	Weekly Rate (Employee/Family)
Level 1	Credit monitoring, rapid credit alerts, annual credit report & score, and credit score tracker from 1 credit bureau	\$1.83/\$3.22
Level 2	Level 1 + credit monitoring done through 3 credit bureaus	\$2.30/\$4.14
Level 3	Level 2 + annual credit report and score provided from 3 credit bureaus	\$2.99/\$5.30

Medical Plan Features								
	Platinum		Gold		Silver		Bronze	
Benefit	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductibles and Maximums								
Annual Deductible								
Individual	\$500	\$1,000	\$1,500	\$3,000	\$2,500	\$5,000	\$3,000	\$6,000
Family	\$1,000	\$2,000	\$3,000	\$6,000	\$5,000	\$10,000	\$6,000	\$12,000
Coinsurance	10%	30%	20%	40%	30%	40%	40%	40%
Annual Out-of-Pocket Maximum <i>Including Deductible</i>								
Individual	\$2,500	\$5,000	\$5,000	\$10,000	\$6,600	\$13,200	\$6,550	\$13,100
Family	\$5,000	\$10,000	\$10,000	\$20,000	\$13,200	\$26,400	\$13,100	\$26,200
Covered Services								
Preventive	0%	30% AD*	0%	40% AD*	0%	40% AD*	0%	40% AD*
Physician	\$20 copay	30% AD*	\$25 copay	40% AD*	\$30 copay	40% AD*	40% AD*	40% AD*
Specialist	\$30 copay	30% AD*	\$40 copay	40% AD*	\$50 copay	40% AD*	40% AD*	40% AD*
Teladoc	\$0	\$0	\$0	\$0	\$0	\$0	\$45	\$45
X-Ray/Lab	10% AD*	30% AD*	20% AD*	40% AD*	30% AD*	40% AD*	40% AD*	40% AD*
Inpatient Hospital	10% AD*	30% AD*	20% AD*	40% AD*	30% AD*	40% AD*	40% AD*	40% AD*
Emergency Room	10% AD*	10% AD*	20% AD*	20% AD*	30% AD*	30% AD*	40% AD*	40% AD*
Prescription Benefit								
30-Day Retail Supply								
	Copays:		Copays:		Copays:		Deductible then:	
Generic	\$10		\$10		\$10		\$10	
Preferred	\$30		\$50		\$60		\$60	
Non-Preferred	\$50		\$75		\$125		\$125	
Specialty	\$100		\$150		\$200		\$200	
90-Day Mail Order Supply								
	Copays:		Copays:		Copays:		Deductible then:	
Generic	\$30		\$30		\$30		\$30	
Preferred	\$90		\$150		\$180		\$180	
Non-Preferred	\$150		\$225		\$375		\$375	
Weekly Rate**								
Employee	\$55		\$14		\$0		\$0	
Employee + Sp	\$210		\$158		\$125		\$81	
Employee + Ch	\$150		\$104		\$78		\$43	
Family	\$270		\$204		\$172		\$120	



Schedule your enrollment appointment today!

Log on to www.daseke.mybenefitsappointment.com or call 844-831-5969, Monday – Friday, 8 a.m. – 7 p.m. CST.

*AD = After Deductible

**For more information on how to receive the wellness credit on your medical rates, see page 2.

Meet ALEX

ALEX is a virtual (online) benefits counselor that will help you understand and make decisions about your benefits for you and your family. To have ALEX help you with your benefit decisions, go to www.myalex.com/bulldog/2018 to get started. Try it once or 10 times, there is no cost to use this valuable tool.

Teladoc

Teladoc provides 24/7/365 access to U.S. board-certified physicians to diagnose, treat, and prescribe medication for common medical issues such as cold and flu symptoms, allergies, ear infections, and more. Assistance is available over the phone, online, or through the Teladoc app. There is a \$0 copay if you enroll in the Platinum, Gold, or Silver medical plans. If you elect the Bronze plan, there is a \$45 copay per phone visit. Don't forget to log on to www.teladoc.com and register.

Dental

Because maintaining your smile is important, we are proud to offer you dental coverage through MetLife. Although you have the option to see any provider you wish, you will receive the best benefits when you choose an in-network dentist. The table below shows the amount you pay for each service.

www.mybenefits.metlife.com

Dental Plan Features		
Benefit	High PPO	Low PPO
Deductible <i>Individual / Family</i>	\$25/\$75	\$50/\$150
Annual Max	\$2,000	\$1,000
Preventive	0%	0%
Basic	20%	20%
Major	50%	50%
Ortho	50%	Not covered
Ortho Max	\$1,500	Not covered
Weekly Rate		
Employee	\$5.73	\$4.01
Employee + Sp	\$11.72	\$8.22
Employee + Ch	\$13.34	\$9.35
Family	\$20.09	\$14.08

Vision

We are pleased to offer vision benefits through Ameritas using EyeMed's network of providers. Although you have the option to see any provider you wish, you will receive the best benefits when you choose an in-network doctor.

www.eyemedvisioncare.com

Vision Plan Features		
Benefit	In-network	Out-of-network
Exam <i>every 12 mos</i>	\$10 copay	Reimbursement up to \$35
Frames <i>every 24 mos</i>	\$150 allowance	Reimbursement up to \$75
Lenses <i>every year, single/ bifocal/trifocal</i>	\$10 copay	Reimbursement up to: \$25/\$40/\$55
Contacts	\$150 allowance	Up to \$120
Weekly Rate		
Employee		\$0.96
Employee + Sp		\$1.89
Employee + Ch		\$1.82
Family		\$2.75

Life and Accidental Death and Dismemberment (AD&D)

Basic Life Insurance and AD&D through Voya is available at no cost to you and is paid for by Bulldog Hiway Express. Eligible employees are covered in the amount of \$50,000.

Voluntary Life Insurance and AD&D is available for purchase through Voya. This is in addition to your employer-provided basic coverage. If you would like to purchase additional insurance during your new hire enrollment period, you can elect up to the guaranteed issue amount of \$200,000 for individual coverage and up to \$50,000 spousal coverage. No Evidence of Insurability is required during the new hire enrollment period for amounts up to the guaranteed issue. You must purchase voluntary coverage on yourself in order to purchase dependent policies. Overall, you can purchase up to \$500,000 for yourself, up to \$250,000 (not to exceed 50% of employee coverage amount) for your spouse, and up to \$10,000 for children ages six months to 19 years. Increases to coverage can only be made during the next annual open enrollment period and will require you to complete the Evidence of Insurability form. Please speak with a member of the Benefits Enrollment Team for your custom quote.

Disability

Disability insurance protects a portion of your income if you are disabled and unable to work due to an injury or illness. During your initial enrollment period, you can enroll without answering medical questions. Please speak with a member of the Benefits Enrollment Team for your custom quote.

Voluntary Short Term Disability (STD) Insurance through Voya provides eligible employees with a portion of your income for up to 24 weeks if you become disabled due to an injury or illness. The policy pays a benefit of 60% of your weekly pre-disability earnings, up to \$1,000 per week. Benefits begin after you have been disabled for 14 calendar days.

Voluntary Long Term Disability (LTD) Insurance is available for purchase through Voya. Benefits begin 180 days after your disability. The policy can replace up to 60% of your income, not to exceed \$5,000 per month. Please speak with a member of the Benefits Enrollment Team for more information on your coverage.

Health Savings Account (HSA)

If you participate in the Bronze Plan, you are eligible to set aside pre-tax dollars in a Health Savings bank account through Optum Bank to pay for eligible medical, dental, and vision expenses.

- Unused money in an HSA account is not forfeited at the end of the year and is carried forward.
- The HSA account is yours to keep, meaning that you can take it with you if you leave employment.
- Annual individual maximum contribution is \$3,450 or \$6,850 for a family.

Flexible Spending Accounts (FSA) – *administered through Benefit Express*

A Flexible Spending Account allows you to set aside some of your income on a pre-tax basis to pay for certain health or day-care expenses that may not be covered as part of your benefit plans. Bulldog Hiway Express offers two types of accounts, a Healthcare Flexible Spending Account and a Dependent Care Account. Both plans have *Use It or Lose It* provisions, meaning that any money left in the account at the end of the plan year will be forfeited.

A **Healthcare FSA** allows you to pay for medical, dental, and vision expenses not covered by your benefit plans. This includes deductibles, copays, orthodontia, glasses, and contact lenses. The annual maximum is \$2,650.

A **Dependent Care Account** can help fund the care of children under the age of 13 or a disabled spouse or parent while you work. The account can be used for day care, preschool, after-school care, summer day camp, or elder care. The annual maximum is \$5,000.

401(k) Plan

You are eligible to join our 401(k) plan the first quarter following six months of employment. A welcome letter with enrollment information will be mailed directly to you approximately 60 days prior to your enrollment date. Don't leave free money on the table... if you contribute to the plan, you will share in our company match: 100% of the first 3%, and 50% of the next 2% that you elect to contribute. The maximum matching contribution is 4% of your pay.

Visit www.ta-retirement.com for more details.

Benefit Contact Information

All of your benefit contact information is available through www.mydasekebenefits.com. You may also call 844-831-5969 or contact your local HR leader for more information.

Investing in *people*.



This brochure provides a highlight of the plans offered by your employer and in no way serves as the Summary Plan Description or plan document for the plans. If any discrepancies exist between this brochure and the plan documents or Bulldog Hiway Express Policy, the plan documents or policies shall govern. All Summary Plan Descriptions are available through Human Resources. We reserve the right to modify any of these plans at any time.