



CONSTRUCTION INC.
Washington, North Carolina

2027

BENEFITS GUIDE

Plan Year: January 1, 2027 – December 31, 2027



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WELCOME TO YOUR BENEFITS

This benefits guide contains important information to help you make informed decisions during this open enrollment period and throughout the plan year. We encourage all employees to carefully review the material contained in this guide.

River City Construction Inc. strives to provide a comprehensive and competitive benefit package. Please take the time to review this guide in its entirety to fully understand the array of benefits available to you and your dependents. We are dedicated to the personal, professional and financial health of our employees and will continue to provide meaningful benefits at affordable rates.

Questions? Please contact your Human Resources department.

This booklet summarizes the benefit plans that are available to the River City Construction Inc. eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this booklet is not a guarantee of benefits.



ELIGIBILITY

- > Eligible employees must work 30 or more hours per week to be eligible for benefits.
- > Eligible employees may participate in benefits plans on the first of the month following 30 consecutive days of employment.

SPOUSAL SURCHARGE Effective 1/1/2027

- > If your spouse has health insurance provided to them by their employer and you elect to cover them on your plan here, you will pay a surcharge of \$36 per pay. This additional charge only applies to medical coverage. You can enroll your spouse in any other plans offered without the additional surcharge.

IMPORTANT!!

All employees must make their elections annually. If you want to keep the same benefits as the year prior, you must still submit your elections.

CHANGING YOUR ELECTIONS

It is very important to consider your choices carefully before you make your benefit elections. After your initial enrollment, you cannot add/change/drop any coverage. The benefits you choose will be in place from your eligibility date through the end of the plan year, unless you have a qualifying life event.

QUALIFYING LIFE EVENT	ACTION REQUIRED
Marriage	You may add your spouse to your benefits within 30 days of the marriage. A copy of the marriage certificate is required.
Divorce	You may remove your former spouse from your benefits within 30 days of the divorce. A copy of the divorce decree is required.
Birth or Adoption of a Child	You may add the new dependent to your benefits within 30 days of the birth or adoption date. A copy of the birth certificate or adoption order is required.



ELIGIBILITY *continued*

QUALIFYING LIFE EVENT	ACTION REQUIRED
Death of a Spouse or Dependent	You may remove the spouse or dependent from your benefits within 30 days of death. A copy of the death certificate is required.
Change in Spouse's Employment or Coverage	You may add or drop your spouse from your benefits within 30 days of the change. A letter from the Spouse's employer or confirmation of the change is required.
Change in Work Status	You may enroll in benefits within 30 days of a change in work status to eligible. If you lose eligibility status, you will receive COBRA paperwork to make your election to continue or terminate coverage.
Entitlement to/Loss of Medicare or Medicaid	If you, your spouse, or dependent becomes entitled to or loses coverage under Medicare or Medicaid, you may change your benefit elections within 60 days of eligibility.
Non-FMLA Leave	If you take a leave of absence that does not qualify under FMLA, you will receive COBRA paperwork to make your election to continue or terminate coverage.

** The examples included in this chart are not all-inclusive. Please speak with Human Resources about your circumstances if not listed.*

TERMINATION

Coverages terminate on the last day of work following any termination or resignation.



ENROLLMENT

ONLINE ENROLLMENT INSTRUCTIONS

River City Construction Inc. utilizes online enrollments to streamline the enrollment process and ensure accuracy through UKG. Below you will find instructions on how to register for the program, enroll in benefits, and access your information and documents.

BE ENROLLMENT READY!

- Set up an appointment with a Benefits Coach to walk through your options and complete your enrollment. Please call 1-877-277-7476.
- OR – Log in to UKG at <https://XK001.ukg.net>. Note: This cannot be done through the app.
- Once logged in, click on the **Benefits** then **Manage My Benefits** on the left.
- Make sure to read everything. Links to our Benefits Guides and Brainshark are on the first page.
- You will need your dependents / beneficiary's SSN, DOB, and gender. You cannot complete your enrollment without this information.
- There are important notes at the top of every section and summaries of benefits. Please review all before making your elections.
- If you cannot submit your enrollment, review your selections to ensure you haven't left any mandatory fields blank. Your enrollment will not be complete until you successfully submit it.

This years enrollment will be Passive, meaning that if you do not wish to make any changes, your current benefits will roll over to 2027. Please note that even though this year is Passive, there are premium increases and carrier changes on a few benefits so please review this guide carefully.

IMPORTANT NOTE: Health Savings Accounts (HSAs) **must be re-elected** each year or they will be set to \$0 for 2027.

For more information, visit **XKIG Benefits Site** at <https://xkig.hrbenefits.net>.





MEDICAL BENEFITS

CIGNA

River City Construction Inc. offers two medical plans through **Cigna**. Below is a summary of the plans. Please refer to the Summary of Benefits and Coverage (SBC), for the full scope of coverage.

MEMBER RESPONSIBILITY	3500 OAP PLAN		6500 HSA PLAN	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
DEDUCTIBLE				
Individual / Family	\$3,500 / \$7,000	\$7,000 / \$14,000	\$6,500 / \$13,000	\$13,000 / \$26,000
OUT-OF-POCKET MAXIMUM				
Individual / Family	\$7,500 / \$15,000	\$15,000 / \$30,000	\$6,500 / \$13,000	\$13,000 / \$26,000
COINSURANCE				
Plan Pays / You Pay	70% / 30%	50% / 50%	100% / 0%	60% / 40%
PREVENTATIVE CARE*				
Wellness, Mammograms, etc.	No charge	No charge	No charge	40% AD
FACILITY VISITS				
Primary Care	No charge	50% AD	No charge AD	40% AD
Specialists	\$35 Copay + 30% AD	50% AD	No charge AD	40% AD
Emergency Room	\$500 Copay	\$500 Copay	No charge AD	Covered as in-network
Urgent Care	No charge	50% AD	No charge AD	40% AD
Inpatient Hospital	30% AD	50% AD	No charge AD	40% AD
Outpatient Hospital	30% AD	50% AD	No charge AD	40% AD
Telehealth	No charge	N/A	No charge AD**	N/A
PRESCRIPTIONS				
Tier 1	\$3 Copay	50% AD	No charge AD	40% AD
Tier 2	\$75 Copay	50% AD	No charge AD	40% AD
Tier 3	\$100 Copay	50% AD	No charge AD	40% AD
Tier 4	20% up to \$300	50% AD	No charge AD	40% AD

AD = After Deductible

* Preventative care is covered 100%, however, if additional services are needed, charges may apply. These charges are based on the codes your provider uses to bill the plan.

** Telehealth may have a different or smaller cost share for use of MD Live, Cigna's preferred partner, through the app or member portal.



WEEKLY COST FOR COVERAGE

	3500 OAP PLAN	6500 HSA PLAN
Employee Only	\$79.35	\$43.21
Employee + Spouse	\$167.68	\$143.52
Employee + Child(ren)	\$156.52	\$133.96
Family	\$245.72	\$210.30

HEALTH SAVINGS ACCOUNT (HSA)

When you are enrolled in a Qualified High Deductible Health Plan (QHDHP) and meet the eligibility requirements, the IRS allows you to open and contribute to an HSA Account. This benefit is offered through P&A Group.

WHAT IS A HEALTH SAVINGS ACCOUNT (HSA)?

An HSA is a tax-sheltered bank account that you own to pay for eligible health care expenses for you and/or your eligible dependents for current or future healthcare expenses. The Health Savings Account (HSA) is yours to keep, even if you change jobs or medical plans. There is no “use it or lose it” rule; your balance carries over year to year.

Plus, you get extra tax advantages with an HSA because:

- Money you deposit into an HSA is exempt from federal income taxes
- Interest in your account grows tax free
- You don't pay income taxes on withdrawals used to pay for eligible health expenses. If you withdraw funds for non-eligible expenses, taxes and penalties apply.
- You also have a choice of investment options which earn competitive interest rates, so your unused funds grow over time.

ARE YOU ELIGIBLE TO OPEN A HEALTH SAVINGS ACCOUNT (HSA)?

Although everyone is able to enroll in the Qualified High Deductible Health Plan, not everyone is eligible to open and contribute to an HSA. If you do not meet these requirements, you cannot open an HSA.

- You must be enrolled in a Qualified High Deductible Health Plan (QHDHP)
- You must not be covered by another non-QHDHP health plan, such as a spouse's PPO plan.
- You are not enrolled in Medicare.
- You are not in the TRICARE or TRICARE for Life military benefits program.
- You have not received Veterans Administration (VA) benefits within the past three months.
- You are not claimed as a dependent on another person's tax return.
- You are not covered by a traditional health care flexible spending account (FSA). This includes your spouse's FSA. Enrollment in a limited purpose health care FSA is allowed.

2027 IRS HSA CONTRIBUTIONS

You are able to contribute to your Health Savings Account on a pre-tax basis through payroll deductions up to the

IRS statutory maximums. The IRS has established the following maximum HSA contributions. The annual limit must include the employer amount that is provided to you, the employee.

- \$4,500 Individual
- \$9,000 Family
- If you are age 55 and over, you may contribute an extra \$1,000 catch-up contribution.

2027 HSA FUNDS

River City Construction Inc. will contribute up to \$500 for employee coverage or up to \$750 for family coverage to those enrolled in the 6500 HSA medical plan if you complete an annual physical. A report will be sent from Anthem indicating such. The employer contribution will be deposited tri-annually and there will not be any retro payments. To receive the full amount, your physical needs to be completed by the end of March. Your HSA with P&A Group needs to be opened at the time of deposit to receive it. Please visit <https://xkig.hrbenefits.net/health-savings-account/> for more information.

HSA TRANSFER INFORMATION

Team Members who wish to keep their HSA with Chard-Snyder may do so; however, fees may apply once the account is no longer associated with an active employer-sponsored HSA program. Please refer to the following [link](#) for additional information regarding applicable fees. If a Team Member would prefer to transfer their HSA balance to P&A Group, where the new HSA account will be established, Chard-Snyder currently charges a \$20 account closure/transfer fee. To complete the transfer, Team Members must fill out the transfer form available [here](#) and submit the completed form directly to Chard-Snyder for processing. **Important:** Team Members must first open their new HSA account with P&A Group before submitting a transfer request. If the transfer form is submitted before the P&A Group account has been established, the transfer may be delayed or rejected and could result in additional fees or administrative complications. We encourage all Team Members to confirm that their P&A Group HSA account is active and open by calling P&A Group at **1-716-852-2611** before initiating the transfer process to help ensure a smooth and timely transition of funds. If you have any questions regarding the transfer process, please contact the Benefits Team for assistance.

HEALTH SAVINGS ACCOUNT *continued*



Health Savings Account



Enroll in an HSA and start saving today!

HOW AN HSA WORKS

- An HSA is a personal savings account that allows you to set aside pre-tax dollars for current and future healthcare expenses for you and your dependents.
- You are eligible to open an HSA if you are enrolled in an HSA qualified high-deductible health plan.
- Your HSA is funded by payroll deduction, online banking transfer or a direct contribution. In some situations, your employer may also make contributions to your HSA.
- Use your funds to pay for current healthcare expenses, preserve your funds for tax-free growth, or invest your funds for long-term savings.

IRS CONTRIBUTION LIMITS FOR 2027



Individual
\$4,500



Family
\$9,000

**If you are 55 or older, you can contribute an additional \$1,000 annually.*

HSA BENEFITS

- HSA-eligible health plans typically have lower monthly premiums, giving you an opportunity to contribute those savings into an HSA.
- Your HSA stays with you, even if you leave your employer.
- Unlike an FSA, unused funds stay in your account from year to year and earn interest tax-free – you can choose the interest rate option to meet your needs: High-Yield or Traditional.
- The High-Yield interest option can help you earn up to 10x higher interest on your HSA cash balance.
- Money goes in tax-free, grows tax-free and withdrawals are tax-free if used on eligible items.
- Once your account balance reaches \$1,000, savings can be invested for growth, just like a 401(k).



Easy Spending

Use your P&A Benefits Card to pay providers directly or pay with personal funds and withdraw money from your HSA to reimburse yourself.

Smart Saving

Pair a Limited Purpose FSA with your HSA to set aside tax-free dollars for dental and vision expenses and preserve your HSA funds for growth.

HEALTH SAVINGS ACCOUNT *continued*

INVESTING YOUR HSA FUNDS

A powerful tool for retirement savings!

- Maintain a \$1,000 balance in your cash account to start investing.
- Withdrawals for qualified medical expenses are tax-free.
- Move your investment funds to your cash account at any time.
- Choose from three investment paths: Managed, Self-Directed, Brokerage.
- Manage your HSA and your investment account from the same portal and mobile app.

QUALIFYING EXPENSES

Common Qualified Expenses*

- Co-pays, deductibles, co-insurance
- Prescriptions
- Dental exams, x-rays, orthodontia
- Vision exams, frames, contact lenses
- Physical therapy and chiropractic care
- First-aid kits
- Over-the-counter medications
- And, much more!

EXPENSES THAT DON'T QUALIFY*

- Expenses incurred prior to opening your HSA
- Cosmetic procedures or surgery
- Dental products for general health

**For further guidance, please refer to IRS publication 969, 502 and code section 213(d). These publications are available online at www.irs.gov.*

ONLINE & MOBILE ACCESS

Get instant access to your account online at padmin.com or through P&A's HSA Mobile App!

- View account balance and activity
- Make contributions
- Invest your HSA and view investment activity
- View important alerts and communication
- Review your statements

On mobile, you can also:

- Find ways to save on prescriptions with the virtual medicine cabinet
- Search for providers or procedure and drug prices
- Access a funding calculator to help you save for the future



Log into your HSA at padmin.com.



Download P&A's HSA Mobile App at the App Store or Google Play.



HELPFUL HINTS

- You must have funds in your HSA before you can spend them.
- You can change your contribution amount at any time.
- Save your receipts because the IRS may audit your HSA transactions.
- You can claim a tax deduction for any direct contributions you make to your account with post-tax dollars.

EDUCATIONAL VIDEOS

Below you will find several QR codes on the many different benefits found in this guide. Scan these with your phone's camera to view brief, educational videos on healthcare and insurance topics.



HIGH DEDUCTIBLE HEALTH PLAN
<https://flimp.live/HubDeliverablesHDHPs>



HDHP WITH HSA
<https://flimp.live/HubDeliverablesHDHHSA>



PREFERRED PROVIDER ORGANIZATION
<https://flimp.live/HubDeliverablesPPO>



HDHP VS PPO
<https://flimp.live/HubDeliveablesHDHPvPPO>



PREVENTIVE CARE
<https://flimp.me/HUBDeliverablesPreventive>



DENTAL INSURANCE
<https://flimp.me/HubDeliverablesDentalInsurance>



PRIMARY CARE / URGENT CARE / ER
<https://flimp.me/HubDeliverablesPCUCER>



VISION INSURANCE
<https://flimp.me/HubDeliverablesVision>



MANAGING PRESCRIPTION COSTS
<https://flimp.me/HubDeliverablesManagingRxCosts>



TERM LIFE VS. PERMANENT LIFE
<https://flimp.me/HubDeliverablesTermvPermanent>



HEALTH SAVINGS ACCOUNT (HSA)
<https://flimp.live/HubDeliverablesHSA>



DISABILITY INSURANCE
<https://flimp.me/HubDeliverablesDisability>



HOW TO OPTIMIZE YOUR HSA
https://flimp.live/HubDeliverables_Optimize_HSA



IDENTITY PROTECTION
<https://flimp.me/HubDeliverablesIDProtection>

WELCOME TO CIGNA

Simple ways to make the most of your plan

Cigna resources are designed to help you make smarter choices to improve your whole health and health plan spending.



First, register on myCigna.com^{®1} to access your digital ID cards and activate all available programs

When your plan year begins, register on **myCigna.com**. That way you're ready to go whenever you need to find in-network health care providers, estimate costs or use My Health Assistant.

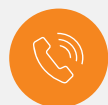


Register now



Access virtual care

Conveniently connect with board-certified doctors, therapists, psychiatrists and dermatologists via video or phone.²



Connect with Cigna One Guide[®]

Our friendly guides have forward-thinking technology to answer questions on your plan, offer personalized advice and connect you to the right care. They can also proactively reach out.³



Ensure in-network care

myCigna and Cigna One Guide can help you stay in-network, maximize savings and avoid any surprises.



Get preventive care

Preventive care, such as check-ups, biometric screenings and wellness screenings, is available at no additional cost to you.⁴ It's even available virtually for maximum convenience.



Prioritize behavioral support

229K+ behavioral health and substance use providers⁵ can help, either in person or virtually. We also have 24/7 therapy, including Talkspace and Ginger for Cigna, and digital tools, such as iPrevail and Happify^{™6}.



Call our 24/7 Health Information Line

Talk with a clinician who can help you choose the right care, whenever you need it – late nights, holidays and more.



Simplify with mail-order medications

Express Scripts[®] is one of the largest pharmacies in the United States and offers convenience, savings and stress-free prescription management.



Identity Theft protection

At no additional cost.



Bounce back with RecoveryOne[™] for Cigna[®]

Virtual physical therapy from the comfort of home is convenient and available at no additional cost to you.



Utilize case management programs

Complex medical conditions can be overwhelming. Our trained teams can help you coordinate care, understand benefits and reach goals through online coaching.





Make sure to get approval from your plan before getting care (known as prior authorization) for routine hospital stays or outpatient procedures.

Learn more at **myCigna.com** or by calling the number on your ID card.



First, register on myCigna.com or the myCigna® App⁷

Once you've registered, you can:

- › Access your digital ID cards for yourself and any dependents. You can download the card images to save, share, print or email directly to your dependents and to your providers.
- › Understand what's covered in your plan
- › Find in-network doctors, hospitals and facilities and sort them by location, reviews and Cigna's quality rating
- › Get cost estimates for appointments, procedures and medications
- › Compare costs for 30- and 90-day medications and see if lower-cost alternatives are available
- › Find retail pharmacies that offer a 90-day supply
- › Manage and track claims
- › Get alerts when new plan documents are available
- › Access a variety of health and wellness resources, including an online health assessment, health tracking tools and My Health Assistant digital coaching



Virtual care²

Virtual care can be a convenient and affordable option for a wide range of care. For appointments, you can work with an in-network provider or connect with an MDLIVE^{®2} provider at **myCigna.com**.

Right from your phone, tablet or computer, you can:

- › Access board-certified doctors, psychiatrists, dermatologists and licensed therapists
- › Get virtual urgent care 24/7/365 – even on weekends and holidays with MDLIVE
- › Access virtual primary care for preventive care, routine care and specialist referrals
- › Access dermatologists⁸ for fast, customized care for skin, hair and nail conditions – no appointment required
- › Schedule an online virtual behavioral health appointment in minutes through MDLIVE
- › Have a prescription sent directly to your local pharmacy if appropriate

Virtual primary care

- › Preventive care check-ups/wellness screenings are available at no additional cost³ and can help identify conditions early
- › Routine care visits allow you to build a relationship with the same primary care provider (PCP) to help manage conditions

- › Access MDLIVE by logging in to **myCigna.com** and clicking on “Talk to a doctor.” You can also call MDLIVE at **888.726.3171**.
- › Select the type of care you need: Medical care or counseling. The cost will be displayed on both **myCigna.com** and MDLIVE.
- › Appointments are available via video or phone, whenever it's most convenient for you. No appointments are required for dermatology care.



Cigna One Guide

Combining digital technology with our personalized customer service, over the phone or on the myCigna App,⁷ the Cigna One Guide support tool can help you:

- › Resolve health care issues
- › Save time and money
- › Get the most out of your plan
- › Find the right hospitals, dentists and other health care providers in your plan's network
- › Get cost estimates
- › Understand your bills
- › Navigate the health care system



In-network care

Save money when you use doctors, hospitals and health facilities that are part of your plan's network. Chances are there's a network doctor or facility right in your neighborhood. It's easy to find quality, cost-effective care at **myCigna.com**.



Preventive care

It's important to catch any issues while they're still small. That's why we cover eligible preventive care services at no extra cost, including:⁴

- › Screenings for blood pressure, cholesterol and diabetes
 - › Testing for colon cancer
 - › Clinical breast exams and mammograms
 - › Pap tests
 - › Additional covered procedures listed on **myCigna.com**
- Since your physical and emotional health are connected, make sure to talk about how you're feeling at your annual check-up.



Behavioral care

You have access to 229K+ behavioral health and substance use providers,⁵ and 75K+ of those are virtual.⁵ Whether you're dealing with a behavioral health condition, going through a rough time or looking for substance use support, you can find the one that fits your needs, either in person or virtually. To find a virtual provider:

- › Go to **myCigna.com** > Find Care & Cost
- › Search for "Behavioral Health Counselor" under "Doctor by Type"
- › Call to make an appointment with your selected provider

Online visits with our behavioral health network providers cost the same as in-office visits. Costs vary by plan.



24/7 Health Information Line

At no extra cost, you can speak to a clinician to make more-informed decisions about your care. Whether it's reviewing home treatment options, following up on a doctor's appointment or finding the nearest urgent care center in your plan's network, you can call the number on your Cigna ID card, day or night.



Specialty medications

We can help you understand, manage and treat complex conditions that require a specialty medication. Our therapy management teams, made up of health advocates with nursing backgrounds as well as pharmacists, are specially trained to help with your specific needs.¹⁰

- › Personalized, 24/7 support
- › Condition-specific education on medication therapy and side effects
- › Help with the medication approval process
- › Financial assistance programs if needed

For more information, call **800.351.3606**.



Identity Theft Protection

- › We're committed to the physical, emotional and financial well-being of those we serve. That's why Cigna teamed up with IdentityForce, a top-rated provider of identity theft protection.¹¹

- › We'll help protect you and your children against identity theft and help fix any identity theft compromises – at no additional cost for all medical subscribers.
- › Three ways to register:
 - Visit **<https://cigna.identityforce.com/starthere>**
 - Call 833.580.2523
 - If you are new to a Cigna Medical plan and you provide your email address on **myCigna.com**, you may also receive emails from IdentityForce that will provide you links to register for services.

Once registered, you and your children can access IdentityForce directly through the IdentityForce app or website.



RecoveryOne for Cigna includes:⁶

- › Virtual physical therapy at no additional cost¹²
- › A private video consult with a virtual physical therapist
- › Customized plans to meet your needs – from the comfort and convenience of wherever you are
- › A multimedia app that guides you through your personalized exercises
- › Video, voice and chat conversations with your support team
- › Motion-tracking technology



Case management programs

Take advantage of our personal services to help you with your personal health needs. A Cigna case manager, trained as a nurse, can work closely with you and your doctor to check on your progress. You can get help with conditions and illnesses, such as cancer and end-stage renal disease, as well as with neonatal care and pain management.

You also have access to My Health Assistant on **myCigna.com** to help you:

- › Control stress
- › Lose weight and eat better
- › Enjoy exercise
- › Quit tobacco
- › Manage diabetes, chronic obstructive pulmonary disease, asthma and other conditions

Enroll online today. Go to **myCigna.com** > Wellness > Health Assistant.

TIPS TO HELP YOU SAVE MONEY



Find where to get prescription drugs

- Find the complete list of covered medications on **myCigna.com**
- Use cost-comparison tools on myCigna to compare prices and purchase mail-order prescriptions¹³
- Use generics when possible
- Know what brand-name drugs are covered in your plan
- Ask your doctor about a 90-day supply for your maintenance medication(s) through our home delivery pharmacy service



Know where to go for care

- Use an emergency room for true emergencies
- Don't wait: Locate an in-network convenience care clinic, sometimes found within a grocery store, or urgent care center near you, before you need it
- For minor medical conditions, connect with a board-certified doctor via video or phone when, where and how it works best for you. Visit **myCigna.com**, or call MDLIVE at 888.726.3171 to talk with a doctor 24/7²
- Don't be fooled: Some emergency rooms look like urgent care centers, so know what type of facilities are in your area



Choose the right provider

- Know which providers are in your network by going to **myCigna.com** > Find Care & Costs
- Choose providers who have received the Cigna Care Designation – high-performance recognition given to physicians in certain specialties who meet Cigna quality and medical cost-efficiency standards¹⁴
- Opt to connect with a board-certified doctor, therapist or psychiatrist via video or phone²
- Use in-network national labs to help save money



Be proactive about your health

- Get information on the cost of medications and treatments to avoid surprises
- Use your preventive care benefits, learn your core health numbers (blood pressure, cholesterol and blood glucose), and make use of the health improvement tools at **myCigna.com**

Find your way to better health.

Get more information on all the programs that are available to you.



When your plan year begins, register on **myCigna.com**.



Call the 24/7 customer service number on your ID card.



Download the **myCigna App**.⁷



1. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com. 2. Cigna provides access to virtual care through participating in-network providers. Not all providers have virtual capabilities. Cigna also provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. All health care providers are solely responsible for the treatment provided to their patients; providers are not agents of Cigna. Refer to plan documents for complete description of virtual care services and costs. 3. Not available with all plans. 4. Not all preventive care services are covered, and different plans may cover different things. For example, immunizations for travel are usually not covered. See your plan materials for a complete list of covered preventive care services. 5. Internal unique provider data as of December 2021. Subject to change. 6. The program and services are provided by an independent company and not by Cigna. Program and services are subject to all applicable program terms and conditions. Program availability is subject to change. 7. The downloading and use of any mobile App is subject to the terms and conditions of the App and the online store from which it is downloaded. Standard mobile phone carrier and data usage charges apply. 8. Virtual dermatological visits through MDLIVE are completed via asynchronous messaging. Diagnoses requiring testing cannot be confirmed. Customers will be referred to seek in-person care. Treatment plans will be completed within a maximum of 3 business days but usually within 24 hours. 9. For legacy clients that have a non-zero preventive care benefit, customers' preventive benefit will be applied when receiving a virtual wellness screening. 10. Not all plans offer all of these programs and services. Please log in to the myCigna App or website, or check your plan materials, to learn more about what your plan offers. The providers in Cigna's pharmacy network don't work for Cigna and are solely responsible for any treatment they provide. 11. White, A. "Best identity theft protection services of September 2021." CNBC.com. August 27, 2021. <https://www.cnbc.com/select/best-identity-theft-protection-services/>. Frankel, RS. "Best Identity Theft Protection Services Of 2021." Forbes Advisor. June 10, 2021. <https://www.forbes.com/advisor/personal-finance/best-identity-theft-protection-services/>. The program and services are provided by Sontiq, Inc. and not by Cigna Corporation or its operating subsidiaries. Program and services are subject to all applicable program terms and conditions. Program availability is subject to change. References to third-party organizations or companies, and/or their products, processes or services, do not constitute an endorsement or warranty thereof. Your use of such products, processes or services is at your sole risk. Product may be updated or modified prior to availability. 12. Cost and usage of this program is covered by your plan administrator; no additional out-of-pocket expense applies for you or your covered dependents (ages 18+). 13. Prices shown on myCigna are not a guarantee. Coverage falls under your plan terms and conditions. Visit myCigna for more information. 14. Patient experience, quality designations, cost-efficiency and other ratings found in Cigna's online provider directories are a partial assessment of quality and should not be the only basis for decision-making (as such measures have a risk of error). They are not a guarantee of the quality of care that will be provided to individual patients. Individuals are encouraged to consider all relevant factors and talk with their physician about selecting a health care facility. Providers are solely responsible for any treatment provided and are not agents of Cigna.

Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, contact a Cigna representative.

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PHARMACY BENEFITS

CIGNA - EXPRESS SCRIPTS PHARMACY

Home delivery with Express Scripts® Pharmacy is a convenient option when you're taking a medication on a regular basis.¹ It's simple, safe – and saves you trips to the pharmacy.

Make fills easier. Have your medication sent to your home.

With just a few simple clicks of your mobile phone, tablet or computer, your important medications will be on their way to your door (or location of your choice).

- **Easily order, manage, track and pay for your medications** on your phone or online
- Standard shipping at **no extra cost**²
- Fill up to a **90-day supply** at one time³
- Helpful pharmacists **available 24/7**
- **Automatic refills**⁴ or refill reminders so you don't miss a dose
- **Flexible payment options** – split your bill into three smaller equal payments



Three easy ways to get started using Express Scripts® Pharmacy

1. **Log in to the myCigna® App⁵ or myCigna.com® to move your prescription electronically.** Click on the Prescriptions tab and select My Medications from the dropdown menu. Then simply click the button next to your medication name to move your prescription(s). Or,
2. **Call your doctor's office.** Ask them to send a 90-day prescription (with refills) electronically to Express Scripts Home Delivery. Or,
3. **Call Express Scripts® Pharmacy at 800.835.3784.** They'll contact your doctor's office to get your prescription. Have your Cigna HealthcareSM ID card, doctor's contact information and medication name(s) ready when you call.



Got a new prescription?

Ask your doctor to send it to Express Scripts® Pharmacy for you.

1. **Electronically:** For fastest service, have them send it electronically to Express Scripts® Home Delivery, NCPDP 2623735. Or,
2. **By fax:** Have them call **888.327.9791** to get a Fax Order Form.



PHARMACY BENEFITS

CIGNA - ACCREDO SPECIALTY PHARMACY

When it comes to specialty medications, you need a pharmacy that's focused in complex medical conditions like yours. That's why your plan only covers certain specialty medications if you fill them through Accredo®'s specialty pharmacy.¹

At Accredo, you're the number one focus.

Accredo will deliver your specialty medication to your home, workplace or doctor's office² – or even to a vacation location – to make sure you have it when and where you need it. And their team of specially trained pharmacists, nurses and clinicians work together to give you the personalized care and support you need to manage your therapy.

- Get personalized care services
- Talk to a specially-trained pharmacist, nurse and/or clinician, 24/7
- Learn how to work through side effects
- Find ways to help pay for your medications, if needed
- Get standard shipping, at no extra cost³
- Sign up for refill reminders
- Easily manage your medications by phone or online⁴



Call Accredo today.

877.826.7657

M–F 7:00 am–10:00 pm CT

Sat 7:00 am–4:00 pm CT

Be sure to call Accredo about two weeks before your next refill so they have time to get a new prescription from your doctor's office.



Learn more about Accredo.

Go to Cigna.com/specialty. Be sure to check out the video to learn more about the personalized care and support Accredo provides.



Frequently asked questions about using Accredo.

Q: Do I need to fill my specialty medication through Accredo?

A: Yes. Your plan only covers specialty medications if you fill them through Accredo.

Q: After I place an order, how long will it take for me to get it?

A: Once Accredo gets your order, you should get it in two to three days. To help make sure you don't miss a dose, please be sure to call Accredo about two weeks before your next refill so they have time to get a new prescription from your doctor's office.

Q: Are the medications Accredo fills the same quality as what I'd get at a retail pharmacy?

A: Yes. All medications are approved by the U.S. Food and Drug Administration (FDA). If you have any questions about the medication you get, call Accredo. They're happy to review your medication with you.

Q: How safe is it to have Accredo ship my medication?

A: It's very safe to fill your medication through Accredo. Accredo will ship your order by UPS or FedEx. The packaging is designed to protect your privacy and stand up to bad weather and warm temperatures. They'll also provide refrigeration if your medication needs it. Accredo will ship to your home or workplace – or even to a vacation location – to make sure you get your medication when and where you need it.

Q: Where can I have my order shipped?

A: Accredo can ship your order to your home or another address in the U.S., Guam, Puerto Rico, or the U.S. Virgin Islands.

Q: How much does shipping cost?

A: There's no extra cost for standard shipping. However, there is an extra cost for rush delivery of your order.

Q: What are my payment options?

A: You can pay by debit or credit card (American Express, Diners Club International, Discover, Mastercard or Visa), with your checking account, or through a flexible spending account (FSA). You can set up automatic payments and update your payment preferences online.

Q: Does Accredo offer payment assistance?

A: Yes. You have access to a dedicated team at Accredo that will help coordinate copay assistance and other options if you need help paying for your medication.

Q: Can I manage my specialty medications online?

A: Yes, as long as you already have a prescription at Accredo. Log in to the **myCigna® App⁵** or **myCigna.com®** and click on the Prescriptions tab. Select My Medications from the dropdown menu and click the button next to your medication name. We'll automatically connect you to your online Accredo account.

Q: What do I do if I have a question about my medication?

A: You can talk with an Accredo pharmacist at any time, 24/7, at **877.826.7657**. Accredo pharmacists are trained to provide clinical support for complex conditions that require specialty medications.

Q: How can I be sure that Accredo will fill my prescriptions correctly?

A: All prescriptions are filled by licensed pharmacists. They follow the same state and federal legal requirements that retail pharmacists do.

Q: Can Accredo help me manage my condition?

A: Yes. They'll help you work through side effects, check in with you and your doctor to see how your therapy's going, help you get your medications approved for coverage and more.



1. Cigna HealthcareSM maintains an ownership interest in Accredo's specialty pharmacy services.

2. As allowable by law. For medications administered by a health care provider, Accredo will ship the medication directly to your doctor's office.

3. Standard shipping costs are included as part of your prescription plan.

4. You'll see your medication listed online as soon as Accredo ships it.

5. App/online store terms and mobile phone carrier/data charges apply. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com.

Para obtener ayuda en español llame al número en su tarjeta de Cigna Healthcare.

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DENTAL BENEFITS

ANTHEM

This year River City Construction Inc. is proud to offer two dental plan options through **Anthem**. The chart below is a brief summary of the in-network benefits. Please refer to the summary plan description for complete plan details.

MEMBER RESPONSIBILITY	PPO BASE PLAN IN-NETWORK	PPO BUY-UP PLAN IN-NETWORK
ANNUAL DEDUCTIBLE		
Individual / Family	\$50 / \$150	\$50 / \$150
Deductible applies to:	Type 2 & 3	Type 2 & 3
TYPE 1 – DIAGNOSTIC & PREVENTATIVE <i>Oral exams, cleanings, x-rays, fluoride, sealants, space maintainers, emergency treatment</i>	No charge	No charge
TYPE 2 – BASIC SERVICES <i>Direct placement fillings, simple extractions, periodontal scaling & root planing</i>	Ded., then 20%	Ded., then 20%
TYPE 3 – MAJOR SERVICES <i>Dentures, bridges, crowns, inlays/onlays</i>	Ded., then 50%	Ded., then 50%
TYPE 4 – ORTHODONTIC SERVICES (covers adults and children) <i>Orthodontic Exams, X-rays, Extractions, Study Models and Appliances</i>	Not covered	50%
MAXIMUM BENEFIT (per covered person):		
Types 1, 2 & 3 combined	\$1,500 Per Calendar Year	\$2,500 Per Calendar Year
Type 4, while covered by the plan	Not Covered	\$2,500 Lifetime
ANNUAL MAXIMUM TYPE	MaxRewards® Included. A covered person may be eligible for the Rollover Amount for Types 1, 2 & 3 combined based on the following:	MaxRewards® Included. A covered person may be eligible for the Rollover Amount for Types 1, 2 & 3 combined based on the following:
Eligible Range (claim threshold):	\$1 - \$800 Per Calendar Year	\$0 - \$900 Per Calendar Year
Rollover Amount:	\$500 Per Calendar Year	\$650 Per Calendar Year
Maximum Rollover Account Balance:	\$1,250 Rate assumes that all members' Maximum Rollover Account Balance is \$0 at time of takeover.	\$1,500 Rate assumes that all members' Maximum Rollover Account Balance is \$0 at time of takeover.

* Out-of-network services are based on the Maximum Allowable Charge (MAC).

WEEKLY COST FOR COVERAGE

Employee Only	\$4.94	\$6.34
Employee + Spouse	\$9.68	\$12.69
Employee + Child(ren)	\$11.77	\$15.54
Family	\$17.84	\$23.12

IMPORTANT NOTICE

- Please be advised that utilizing out-of-network services may result in additional expenses attributed to the Maximum Allowable Charge set by Anthem.
- Visiting an out-of-network dentist may lead to being balanced billed for any charges exceeding Anthem's allowance.
- It is recommended to seek in-network providers to ensure a more cost-effective experience.



Dental Essential Choice PPO for Large Groups

Annual maximum carry-over and carry-in benefits



Employees can bank unused dollars in their dental plan to save on future dental expenses. The annual maximum benefit is the highest amount a dental plan will pay for covered services in a given plan year. Carry-over allows employees to transfer a portion of their annual maximum from one year to the next if their paid dental claims that year are less than the threshold specified in their plan. Carry-in is a one-time amount that employees can carry into their dental plan from their previous dental plan's carry-over benefit.

- Carry-over dollars never expire, so employees can use the dollars they saved for dental care in future years.
- Employees aren't required to have an annual preventive visit to receive a carry-over reward.¹
- Network boost is an additional reward that lets employees carry over an additional portion of their annual maximum from one year to the next — when all dental services on claims were performed by dentists in the plan.
- Employees can carry-in up to their annual maximum.
- Carry-over and carry-in features can be paired so Employees never lose dollars they accumulated for their dental care.
- Annual maximum carry-over reporting is available to employers on an ad hoc basis or scheduled monthly, quarterly, or annually. Reports can provide summary information and detailed employee-level information. Reports can be requested by contacting your Sales representative.

A great benefit for employees



Only 3.6%

of enrollees in dental PPO plans reach or exceed their annual maximum for in-network services.²



About 63%

of dental PPOs have a maximum annual benefit of less than \$1,500.²

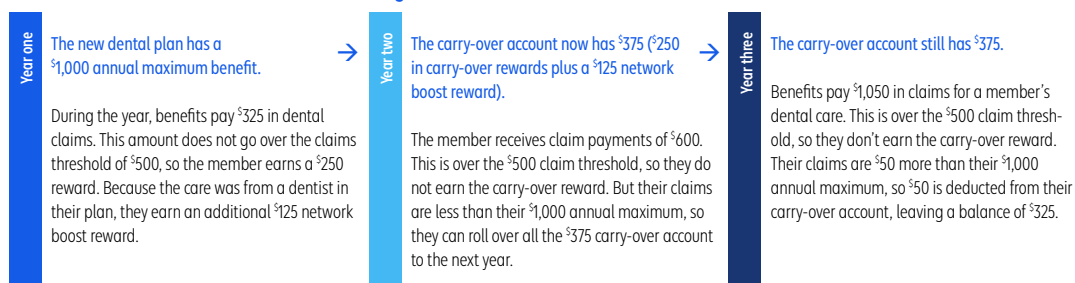


When carry-over is included in a plan, it gives employees the same level of benefits as a plan with a higher annual maximum — but at a premium savings of as much as 15% or more.³



DENTAL PLAN HIGHLIGHTS *continued*

How an annual maximum carry-over works



Annual maximum carry-over options

Annual maximum	Claims threshold	Carry-over reward	Network boost reward	Carry-over maximum bank
\$500	\$250	\$100	\$50	\$500
\$750	\$350	\$150	\$75	\$750
\$1,000	\$500	\$250	\$125	\$1,000
\$1,250	\$600	\$300	\$150	\$1,250
\$1,500	\$700	\$350	\$175	\$1,500
\$2,000	\$800	\$400	\$200	\$2,000
\$2,500	\$900	\$450	\$225	\$2,500
\$2,750	\$950	\$500	\$250	\$2,750
\$3,000	\$1,000	\$500	\$250	\$3,000
\$3,000 or more	\$1,000 or more	\$500	\$250	\$3,000

Annual maximum — The maximum amount the dental plan will pay for covered services in a calendar year.

Claims threshold — The total amount the dental plan pays for covered services each year.

Carry-over reward — The reward employees can earn when their dental claims are below the claims threshold. Carry-over rewards vary based on the annual maximum benefit for the plan.

Network boost reward — The reward employees can earn when their dental claims are below the claims threshold and they get services from dentists in the plan.

Carry-over maximum bank — The maximum amount of carry-over and network boost rewards employees can have at any given time.

Market comparison

Other dental plans

- Don't let employees carry-in accumulated benefit dollars from a prior dental plan.
- Require at least one preventive visit a year to earn a carry-over reward.
- Offer a higher annual maximum instead of a carry-over benefit.
- Don't offer a network reward boost or cap the carry-over maximum bank to as little as \$1,000.
- Offer higher claims thresholds and lower carry-over rewards than our plans do.

Our dental plans

- Let employees use their carry-in benefit from their previous dental plan.
- Don't require them to have an annual preventive visit to earn their carry-over reward.
- Result in premium savings of 15% or more.³
- Include a network boost and annual maximum carry over up to your plan's annual maximum.

For a complete list of rules or for more information, see your benefit booklet.





DENTAL PLAN HIGHLIGHTS *continued*

VISIT THE DENTIST 24/7

Dental at home makes it convenient to receive dental care from anywhere.

When a visit to the dentist's office isn't an option, it's good to know there's an alternative. Dental at home is a teledentistry benefit included in Anthem dental plans that makes it easy to connect with a licensed dental care provider for virtual care.

DENTAL AT HOME OFFERS:

- Access to a dentist from anywhere using a smartphone, mobile device, or computer.
- Easier administration with no appointments needed and no claims to file.
- Consultations for dental problems or a dental emergency. All virtual visits are secure, private, and Health Insurance Portability and Accountability Act (HIPAA) compliant.
- Coverage at the same amount as an in-person visit to the dentist's office.¹

HOW IT WORKS:

1. Access dental at home through our SydneySM Health app or at www.anthem.com.
2. Find a participating care provider using the Find Care tool and search for General Practice Dentistry.
3. Select The TeleDentists.
4. Fill out a health history questionnaire and connect with a virtual dentist within approximately five minutes.

AFTER THE APPOINTMENT, THE DENTIST CAN:

- Prescribe non-opioid medication to a local pharmacy, if necessary.
- Refer the patient to a network dentist for further care.

1. Uses Anthem's Prime and Complete and Dental Blue 100/200/300 preferred provider organization networks.



DENTAL PLAN HIGHLIGHTS *continued*

Chat with us for quick answers



Receive support anytime through Sydney Health or [anthem.com](https://www.anthem.com)

When you have questions about your dental coverage, log in to the SydneySM Health mobile app or [anthem.com](https://www.anthem.com) and chat for answers — at your convenience. Either way, you'll find what you need in minutes!

Ask simple questions in our chat box

To find basic information about your benefits, you can type keywords or questions in the chat box and get automated feedback. If you do not receive the answers you need, you can chat with a live agent.

Here are some commonly asked questions:

- What is my deductible?
- Can you show me my ID card?
- What do I owe on this claim?

For in-depth questions, type “live chat” and you will be connected to an agent.



- ▶ Whether you're on your phone or computer, log in and select the Sydney Health logo to **start a new chat**.



Scan the QR code with your smartphone camera to **download the app today!**



Sydney Health is offered through an arrangement with Carlson Digital Platforms, a separate company offering mobile application services on behalf of your health plan. ©2024

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VISION BENEFITS

EYEMED

This year River City Construction Inc. is proud to offer two vision plan options through **EyeMed**. The chart below is a brief summary of the in-network benefits. Please refer to the summary plan description for complete plan details.

MEMBER RESPONSIBILITY	BASE PLAN IN-NETWORK	BUY-UP PLAN IN-NETWORK
ROUTINE EXAMS	\$10	\$10
VISION MATERIALS		
Frames	20% off balance over \$130	20% off balance over \$200
Contacts - Covered in lieu of frames		
Conventional Contacts	15% off balance over \$130	15% off balance over \$200
Disposable Contacts	100% of balance over \$130	100% of balance over \$200
Medically Necessary Contacts	No charge	No charge
STANDARD PLASTIC LENSES		
Single / Bifocal / Trifocal / Lenticular	\$25	\$10
Progressive	\$80 - \$200	\$65 - \$185
FREQUENCY		
Exams, Lenses (in lieu of contacts), Contacts (in lieu of lenses)	Once every plan year	Once every plan year
Frames	Once every other plan year	Once every plan year

WEEKLY COST FOR COVERAGE

Employee Only	\$1.66	\$3.46
Employee + Spouse	\$3.15	\$6.57
Employee + Child(ren)	\$3.32	\$6.92
Family	\$4.88	\$10.17

ADDITIONAL SAVINGS

- 40% off additional pairs of glasses
- 20% off any item not covered by the plan, including non-prescription sunglasses
- 15% off retail price or 5% off promotional price for Lasik or PRK from US Laser Network
- Up to 64% off hearing aids, with an extended warranty and free batteries through Amplifon Hearing Health Care Network

Members can get exclusive additional discounts and deals that are often stackable with their vision benefits at eyemedvisioncare.com



VOLUNTARY LIFE/AD&D

LINCOLN FINANCIAL GROUP

You may purchase additional Voluntary Life and AD&D insurance with **Lincoln Financial Group** to cover any gaps in your existing coverage that may be a result of age reduction schedules, cost of living, existing financial obligations, etc. Your election, however, could be subject to medical questions and Evidence of Insurability (EOI). You are required to elect coverage for yourself in order to elect coverage for your spouse and/or dependents. Your contributions will depend on your age and the amount of coverage you elect. Your spouse's rate will be based on your age. Please refer to the summary plan description for complete plan details and rates.

FOR YOU:

VOLUNTARY LIFE

Amounts of Insurance: Increments of \$10,000 to a maximum of lesser of 5x earnings of \$500k with a minimum of \$10,000

Guaranteed Issue: \$300,000

Reduction Schedule: 65% at age 65, 50% at age 70

VOLUNTARY AD&D

Amounts of Insurance: Increments of \$10,000 to a maximum of \$500,000 with a minimum of \$10,000

Reduction Schedule: 65% at age 65, 50% at age 70

FOR YOUR SPOUSE:

VOLUNTARY LIFE

Amounts of Insurance: Increments of \$5,000 to a maximum of \$150,000 with a minimum of \$5,000

Coverage up to Employee Amount: 100% of Employee Optional

Guaranteed Issue: \$30,000

Reduction Schedule: 65% at age 65, 50% at age 70

VOLUNTARY AD&D

Amounts of Insurance: Increments of \$5,000 to a maximum of \$150,000 with a minimum of \$5,000

Coverage up to Employee Amount: 100% of Employee Optional

Reduction Schedule: 65% at age 65, 50% at age 70

FOR YOUR CHILD(REN):

VOLUNTARY LIFE

Amounts of Insurance: Increments of \$5,000 to a maximum of \$10,000 with a minimum of \$5,000

Child Age Limit / Student Age Limit: 26/26

VOLUNTARY AD&D

Amounts of Insurance: Increments of \$5,000 to a maximum of \$10,000 with a minimum of \$5,000

Child Age Limit / Student Age Limit: 26/26

IMPORTANT REMINDERS!

Your voluntary life insurance plan includes an option to port or convert your coverage if you leave employment or otherwise lose eligibility under the group plan. This allows you the opportunity to continue coverage, subject to plan provisions. For additional details on continuing your coverage after loss of group eligibility, please contact your HR department.

Be sure to assign a beneficiary or living trust to ensure your assets are distributed according to your wishes. Beneficiaries may be changed at any point during the plan year.



VOLUNTARY PERMANENT LIFE WITH LTC

TRUSTMARK LIFE + CARE

A simple way to get both life and long-term care insurance

The need for long-term care (LTC) services can put a strain on families. Yet it can be a challenge to find protection against the rising costs of those services, in the event of an accident, illness or aging. Trustmark Life + Care insurance can be an easy way to buy affordable LTC coverage. It provides a long-term care benefit that's funded by permanent life insurance.

It can happen at any age, to anyone: something goes wrong and you start needing **help with the basics of everyday life**, like eating, dressing or going to the bathroom. When that happens, Trustmark Life + Care® pays **cash benefits** that can help you afford the comfort and quality of care that you desire. Plus, it **doubles as life insurance**, with a death benefit payable to your beneficiaries.

Why Trustmark Life + Care?

- 1. Two-in-one coverage: get both **permanent life insurance** (death benefit) **and long-term care benefits** for one affordable rate.
- 2. **Benefits can help with the cost of long-term care** if the time comes, so you can avoid depleting your retirement savings or overburdening family members.
- 3. Long-term care benefits can help pay for **professional caregiving services**: home health care, assisted living, adult day care and more.
- 4. Coverage is available to you on a **guaranteed issue basis – no medical questions** asked, and you can't be turned down – up to benefit amount limits.¹
- 5. Guaranteed to last a lifetime: once you have coverage and continue to pay your premium, your rate **doesn't increase as you get older**.

How Long-Term Care Benefits Work

Trustmark Life + Care pays benefits in cash, directly to you, when you **require help with at least two of six activities of daily living** (for example, eating, bathing or dressing) or have a **severe cognitive impairment** (such as Alzheimer's Disease) and receive caregiving services for more than 90 days.²

Long-term Care Benefits

When you receive professional caregiving services, you can collect **4% of your death benefit amount per month**, up to two times the face amount of your certificate.

Professional Caregiving benefits example for a \$100,000 certificate: \$4,000 per month up to a \$200,000 maximum.

Plus, with your Family Caregiving benefit, you can get benefits **when care is provided by a family member or friend** rather than by a

professional! For family caregiving, collect **2% of your death benefit per month**, up to two times the face amount of your certificate.

Family Caregiving benefits example for a \$100,000 certificate: \$2,000 per month up to a \$200,000 maximum

You can even **switch between family caregiving and professional caregiving** and keep collecting benefits, up to the maximum of twice your certificate's face amount.

Plus, long-term care benefits paid **do not reduce the death benefit**, so a full death benefit is available to your beneficiaries even after you receive long-term care benefits! This can dramatically increase the maximum value of your coverage:

Benefit type	Maximum Amount (\$100,000 certificate)
Long-term Care benefits	\$200,000
Death benefit (before age 70 or 10th anniversary)	+ \$100,000
Total maximum benefit	= \$300,000

You can manage your coverage or easily file online claims 24/7 at www.TrustmarkVB.com!

Note: If you choose to waive coverage when initially offered, you may not be eligible to enroll at a later date, even if circumstances change. Additionally, you may also not be able to enroll at all, or any delayed enrollment may require the completion and approval of Evidence of Insurability (EOI).

- 1. Maximum issue age for guaranteed issue is 70. Employees who have previously been offered this coverage may not be eligible for guaranteed issue. Refer to the sample-rate sheet or speak to an enroller for details. Long-term care benefits require non-medical questions at time of application.
- 2. Long-term care benefits are payable after 90 days of qualifying care has been received; to qualify you must meet the conditions for payment.



VOLUNTARY PERMANENT LIFE WITH LTC

Introducing Cariloop® Because no one should go through caregiving alone

Caring for aging loved ones can be challenging - but you don't have to do it alone. When you receive Trustmark coverage, you gain access to Cariloop's Caregiver Support Platform® - a resource designed to lighten the load and support you every step of the way.



What is Cariloop?

Cariloop provides professional guidance and practical tools to help you and your family navigate elder care. Through the Caregiver Support Platform® you get personalized coaching, care planning tools, and access to a trusted provider network. Whether you're supporting an aging loved one or planning ahead for your own needs, Cariloop helps ease the stress and burnout that often comes with managing care.



Work with professional Cariloop Coaches to navigate senior living, Medicare and Medicaid, and financial or legal caregiving challenges.¹



Stay informed with on-demand webinars and curated content — featuring tips on managing stress, navigating care, and more.



Invite family members into the Care Portal to share updates, coordinate appointments, and keep important documents in one secure place.



Connect with other caregivers through Community Channels and find support, shared experiences, and helpful resources — wherever you are in your care journey.

¹Trustmark provides access to Cariloop's care coaching services at no extra cost, for one month, per calendar year.

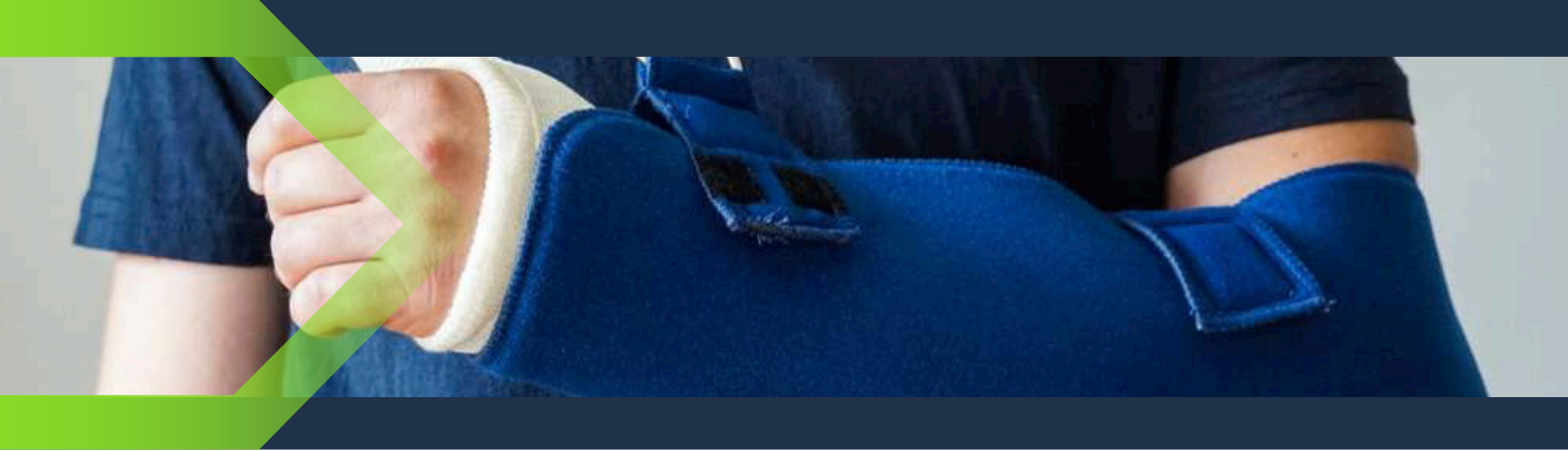
Find more information on this exclusive benefit when you receive Trustmark coverage!



400 Field Drive
Lake Forest, IL 60045
TrustmarkVB.com

Cariloop membership is provided as a value-added benefit, separate from the life insurance policy. While we strive to maintain this offering, please note that it may be subject to change or discontinuation in the future without notice.

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VOLUNTARY DISABILITY PLANS

VOLUNTARY SHORT-TERM DISABILITY

Voluntary Short-Term Disability coverage through **Lincoln Financial Group**, replaces a portion of your income when you are unable to work due to an illness or injury. This coverage has a pre-existing limitation of 12 months for conditions treated within the six months prior to effective date of coverage.

Coverage amount: 60% of your Basic Weekly Earnings not to exceed \$2,500 per week

Benefit Duration (Including EP): 13 weeks

Accident elimination period: 7 days

Illness elimination period: 7 days

Pre-Existing Condition Exclusion: 6 months lookback; 12 months after effective date of coverage

VOLUNTARY LONG-TERM DISABILITY

Voluntary Long-Term Disability coverage through **Lincoln Financial Group**, is designed to cover a portion of your salary when you are unable to work due to an accident or illness that occurs 90 days after being deemed disabled and picks up after short-term disability is exhausted. This coverage has a pre-existing limitation of 12 months for conditions treated within the three months prior to effective date of coverage.

Coverage amount: 60% of your monthly earnings to a maximum of \$15,000 per month

Maximum benefit period: Social Security Normal Retirement Age (SSNRA) or maximum benefit period on an age related scale

Elimination period: After the end of your short-term disability or a period of 90 days of disability, whichever is greater

Pre-Existing Condition Exclusion: 3 months lookback; 12 months after effective date of coverage



VOLUNTARY WORKSITE PLANS

VOLUNTARY ACCIDENT

No one plans to have an accident but, it can happen at any moment throughout the day, whether at work or at play. Most major medical insurance plans only pay a portion of the bills. This policy through **Lincoln Financial Group**, can help pick up where other insurance leaves off and provide cash to cover the expenses. Our accident coverage helps offer peace of mind when an accidental injury occurs. Below is a brief summary of benefits. Please see your benefit summary for more information about this coverage.

Summary of Benefits:

Initial care visit	\$150	Ambulance	\$300
X-ray	\$300	Air ambulance	\$1,500
Emergency care / treatment	\$200	Major diagnostic	\$200

VOLUNTARY CRITICAL ILLNESS

Critical Illness coverage through **Lincoln Financial Group**, provides a lump sum benefit following major diagnosis like cancer, kidney failure, heart attacks, or stroke. This benefit can be used to help cover expenses that your insurance does not, such as bills, groceries, or transportation. Below is a brief summary of benefits. Please see your benefit summary for more information about this coverage.

Coverage Amounts:

- Employee - \$10,000
- Spouse - \$5,000 up to 50% of employee benefit amount
- Children - 50% of your coverage amount at no extra cost

Health Assessment/Wellness Benefit*: Level: \$50

* You receive a cash benefit every year you and any covered family members complete a single covered exam or screening.



VOLUNTARY WORKSITE PLANS

VOLUNTARY HOSPITAL INDEMNITY

Hospital Indemnity coverage through **Lincoln Financial Group**, helps deliver financial security for the unexpected—allowing you to help protect your budgets against unforeseen expenses if you suffer an accidental injury or sickness. You can use the cash benefits from this coverage to help meet copayments, to pay for recovery expenses or in any way you see fit. Below is a brief summary of benefits. Please see your benefit summary for more information about this coverage.

Summary of Benefits:

Hospital Admission: For the initial day of admission to a hospital for treatment of a sickness/an injury	\$2,000 per day for one day per calendar year
Hospital Confinement: For each day of confinement in a hospital as a result of a sickness/an injury	\$200 per day for 30 days per calendar year (starting on day 2)
Hospital ICU Confinement: For each full or partial day of confinement in an ICU as a result of a sickness/an injury	\$400 per day for 30 days per calendar year (starting on day 1)
Newborn Care: For each day of confinement to a hospital for routine postnatal care following birth	\$200 per day for two days per calendar year
Health Assessment/Wellness Benefit*:	Level: \$50

* You receive a cash benefit every year you and any of your covered family members complete a single covered exam, screening, or immunization.



401(K) RETIREMENT PLAN

River City Construction Inc. is proud to offer a 401(k) Retirement plan through John Hancock. Employees are eligible to start contributing to this plan the first of the month following 60 days of employment. **Example:** Date of hire = 4/6/2027, 60 days will be reached in June, eligibility to begin contributing = 7/1/2027.

You will receive enrollment information from John Hancock (also included below) via email and in the mail shortly before you are eligible to participate. You will not be able to enroll prior to your eligibility window.

Saving for retirement while taking care of other financial priorities can be a tricky balance. John Hancock provides the resources to help you navigate the pressures of long and short-term goals, so you can live your best life today and tomorrow.

XKIG will match your contribution on the following schedule:

- 100% match 1-3%
- 50% match 4-5%

Example: if an employee contributes 5% or more, you will earn a 4% employer match.

The vesting schedule for employer match is 5 years graded (elapsed time), please see schedule below.

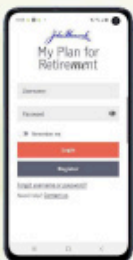
- Less than 1 year = 0%
- 1 year but less than 2 = 20%
- 2 years but less than 3 = 40%
- 3 years but less than 4 = 60%
- 4 years but less than 5 = 80%
- 5 years or more = 100%

Please make sure to add your **401(k) beneficiary designation** directly through the **John Hancock** website, as beneficiary elections do not feed over from payroll and cannot be updated through our payroll system.



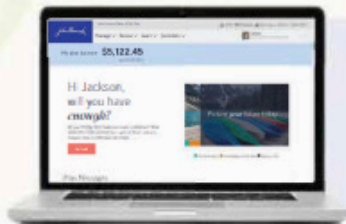
401(K) RETIREMENT PLAN *continued*

Enroll now into your retirement savings plan.



Mobile

Download **John Hancock's retirement app**.



Online

Visit **myplan.johnhancock.com**.



Over the phone

Speak with a John Hancock representative at **800-294-3575**.

Available from 8 a.m. to 10 p.m. (EST), Monday to Friday or 1-888-440-0022 for assistance in Spanish between 10 a.m. to 8 p.m.



UTILITIES EMPLOYEES CREDIT UNION (UECU)

River City Construction Inc. has partnered with Utilities Employees Credit Union (UECU) to offer you and your family members the ability to join the credit union. Please direct questions to Lisa Reynolds at lreynolds@uecu.org or call her at 484-388-0655.

WHERE WORKERS *Bank Smarter*

Exclusive Credit Union Perks Await You! **Join Today!**

Open one of the accounts below and get a \$25 gift card!

Kasasa® Checking

- Kasasa Cash®
- Kasasa Cashback®

+

Visa® Power Card™

- Rewards Credit Card
- Exclusive Offer

Bank for *Free* + Get *Rewarded* Monthly

- ✓ Get Rewarded Monthly²
- ✓ Easy Mobile Deposit
- ✓ Save More with *Kasasa Saver*
- ✓ Cash Rewards²
- ✓ ATM Fee Refunds³
- ✓ No Monthly Maintenance Fees

Low *1.99% APR*⁴ Introductory Rate

- ✓ Borrow up to \$25,000
- ✓ No Balance Transfer Fee
- ✓ No Annual Fee
- ✓ Earn VantagePoints® Rewards⁵
- ✓ 12-Month 1.99% APR Intro Rate⁴
- ✓ 8.75%-18.00% variable APR thereafter⁶

And...

Loan Rate Discounts

- Open a Loan & Checking for Double the Discount!

Exclusive Double Discount Up to *0.50% Off*⁴ Your Loan Rate⁶

- ✓ Get Pre-Approved Online
- ✓ Better Rates than Dealerships
- ✓ Exclusive Offer for *You!*
- ✓ Auto Refinance Loans
- ✓ New and Used Auto Loans
- ✓ Personal Loans

Lisa Reynolds
Sr. B2B National Account Rep

800.288.6423 Ext. 7502
Mobile: 484.388.0655
lreynolds@uecu.org
uecu.org/lisa

Reference this flyer and get an additional \$10 Gift Card when you open an account!

Scan to Join



EMPLOYEE ASSISTANCE PROGRAM



Employee Assistance Program

The resources
you need to meet
life's challenges



EmployeeConnectSM offers professional, confidential services to help you and your loved ones improve your quality of life.

 In-person guidance	 Unlimited 24/7 assistance	 Online resources
Some matters are best resolved by meeting with a professional in person. With <i>EmployeeConnectSM</i>, you and your family get: ▪ In-person help for short-term issues (up to five sessions with a counselor per person, per issue, per year) ▪ In-person consultations with network lawyers, including one free 30-minute in-person consultation per legal issue, and 25% off subsequent meetings	You and your family can access the following services anytime — online, on the mobile app or with a toll-free call: ▪ Information and referrals on family matters, such as child and elder care, pet care, vacation planning, moving, car buying, college planning and more ▪ Legal information and referrals for family law, estate planning, consumer and civil law ▪ Financial guidance on household budgeting and short- and long-term planning	<i>EmployeeConnectSM</i> offers a wide range of information and resources you can research and access on your own. Expert advice and support tools are just a click away when you visit GuidanceResources.com or download the <i>GuidanceNowSM</i> mobile app. You'll find: ▪ Articles and tutorials ▪ Videos ▪ Interactive tools, including financial calculators, budgeting worksheets and more

EmployeeConnectSM

EMPLOYEE ASSISTANCE PROGRAM SERVICES

Confidential help 24 hours a day, seven days a week for employees and their family members. Get help with:

- Family
 - Parenting
 - Addictions
- Emotional
 - Legal
 - Financial
- Relationships
 - Stress

Insurance products issued by:
The Lincoln National Life Insurance Company
Lincoln Life & Annuity Company of New York
Lincoln Life Assurance Company of Boston

LTD-EAPEE-FLI001_Z01





EMPLOYEE ASSISTANCE PROGRAM

We partner with your employer to offer this service at no additional cost to you!



*EmployeeConnect*SM counselors are experienced and credentialed.

When you call the toll-free line, you'll talk to an experienced professional who will provide counseling, work-life advice and referrals. All counselors hold master's degrees, with broad-based clinical skills and at least three years of experience in counseling on a variety of issues. For face-to-face sessions, you'll meet with a credentialed, state-licensed counselor.

You'll receive customized information for each work-life service you use.



To take advantage of the *EmployeeConnect*SM program or for more information: Visit GuidanceResources.com (username: LFGSupport, password: LFGSupport1), download the *GuidanceNow*SM mobile app or call 888-628-4824.

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MAP 12/19 **Z01**

Order code: LTD-EAPEE-FLI001



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*EmployeeConnect*SM

EMPLOYEE ASSISTANCE PROGRAM SERVICES

To find out more:

- Visit GuidanceResources.com (username: LFGSupport ■ password: LFGSupport1)
- Download the *GuidanceNow*SM mobile app
- Call 888-628-4824



IDENTITY PROTECTION PLAN



all-in identity and scam protection that never clocks out

Safeguard yourself and your family from evolving identity threats and scams with always-on protection from Allstate — provided by your company as a benefit.

Our enhanced identity protection features deliver stronger security to help you and your family stay ahead of rising scams and identity fraud. Get 24/7 monitoring, advanced scam detection, and expert support for peace of mind.

Benefits highlights:

(See page 2 for expanded features list)

NEW Allstate Scam ProtectionSM

Get powerful, all-in-one digital defense with proactive scam monitoring, robust detection, alerts and phone and text scam blocking, and up to \$50K in scam reimbursement*—plus up to \$5M¹ in other financial protections.

Family digital safety

Monitor 30+ apps and sites, track loved ones, and access mental health support. Plus with a family plan get protection for you and all family “under roof or under wallet” as well as any family member 65 or older.

Award-winning cybersecurity

Protect your devices with top-rated** anti-malware and threat detection that runs in the background without slowing you down.

scammers are getting smarter

Even the most tech-savvy are falling for AI-powered scams

80%

of scam victims said they thought they could spot a scam before falling for one¹

49%

of scam victims experienced two or more scams in just the past two years¹

95%

of our members were satisfied with the identity theft recovery support they received²

¹ Javelin Strategy and Research, Breaking Barriers to Innovation, 2024

² Allstate Identity Protection internal analysis, 2022

**Overall Score. July 2011 – February 2025. Source: AV TEST.org

Coverage subject to terms, conditions, and exclusions. Reimbursement limits apply. See full policy for details.

IDENTITY PROTECTION PLAN

With Allstate Identity Protection, get identity and cyber protection features designed to help you defend yourself from today's risks.

- **NEW** Allstate Scam ProtectionSM with alerts and education plus phone and text scam blocking, mobile scam alerts, email scan, web protection, URL blocking, and scam takedown
- **NEW** Reimbursement categories for scams, social engineering, cyberbullying, cryptocurrency, and ransomware payments^{††}
- **NEW** In-portal conveniences like one-on-one personal coaching, Identity Fraud Finder, online scheduler and specialist chat
- **NEW** Data removal tool discovers and removes your data on broker sites automatically
- **UPGRADED** Full-service identity restoration with up to \$5 million in expense reimbursement[†] for stolen funds and out-of-pocket costs due to identity theft including ransomware expense reimbursement^{*}
- Allstate Digital Footprint[®], our proprietary privacy tool, shows where your data lives online and how it might be exposed^{*}
- Comprehensive identity and financial monitoring
- Identity Health Status gives you at-a-glance insight into your risk
- Allstate Security Pro[®] delivers updates and education on scams and emerging threats relevant to you
- Social media account takeover monitoring
- Tri-bureau credit monitoring with annual reporting and credit score
- Lock your TransUnion credit report in a click and get credit freeze assistance
- Dark web monitoring

Cyber protection

- **UPGRADED** Device protection tools for up to 10 devices
 - Malware and anti-virus protection
 - Safe browsing
 - Phishing protection
 - Anti-tracker
 - Missing and stolen device tools (Android only)
 - Smart watch protection (Android only)
 - Firewall (Windows only)
 - Webcam protection (Windows only)
 - Safe pay (Windows only)
 - File shredder (Windows only)
- Network security
- Military-grade VPN with thousands of servers to stay safe without slowing down
- Password manager

Opt for a family plan and get:

- **NEW** Child credit check
- **UPGRADED** Family mobile and desktop device protection for up to 10 devices per adult
- Coverage can extend to you and family members “under your roof or wallet” plus senior family members aged 65+ who don’t live with you or who are not financially dependent up on you
- Family digital safety tools from Bark that monitor 30+ apps and websites for signs of danger plus location tracking, screen time management, and web filtering
 - **NEW** Free access to TalkSpace Go for family plan members and their loved ones including tailored help and \$100 off TalkSpace Therapy

Plans and pricing

\$1.73 per person/ week

\$3.57 per family/ week

Questions?

1-800-789-2720

or visit myaip.com

[†] Identity theft insurance covering expense and stolen funds reimbursement is underwritten by American Bankers Insurance Company of Florida, an Assurant company. The description herein is a summary and intended for information purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions. Products and features are subject to change.

^{*} Does not cover cyber ransom payments to hackers.

Bark and Talkspace Go are third-party services subject to their own terms, conditions, and availability.

^{††} Cyber insurance, which includes data recovery, cyber extortion, cyber crime and cryptocurrency coverage is underwritten by Houston Casualty Company, a Tokio Marine HCC Company. Please refer to the actual policy for all the terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.

Products and features are subject to change. Certain features require additional activation and may have additional terms.

Allstate Identity Protection is offered and serviced by InfoArmor, Inc., a subsidiary of The Allstate Corporation.

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MEDICARE

MY BENEFIT
ADVISOR

We Make Medicare Easier for You

Medicare is complex and confusing, but My Benefit Advisor (MBA) provides you with the resources you need to understand its complexities and find the solution that is right for you.

When you, or someone you know, decides it's time to transition to Medicare, we provide personal help from one of our Medicare specialists at no cost.

MBA Can Help You With



Understanding Medicare

We provide you with educational materials and a personal Medicare specialist.



Review Plan Options

MBA has access to an extensive list of insurance companies and their plans.



Simplifying Enrollment

MBA reduces the stress of the enrollment process by providing step-by-step guidance.



Plan Review

If requested, we will review your benefits and provide alternatives.

Get Answers to Your Questions:

- How & when do I enroll in Medicare?
- Which insurance plan is right for me?
- What is Medicare Part A, B, C, & D?
- Will my doctors, hospital, and prescriptions be covered?
- How much will it cost?



To learn more about how we can help you with Medicare, contact Shawn McLean at (757) 663-4089 or email shawn.mclean@mybenefitadvisor.com

<https://utility.mybenefitadvisor.com/medicare-ae/shawn-mclean>

My Benefit Advisor

Disclaimer: My Benefit Advisor is not affiliated with Medicare or Social Security. ©2020 My Benefit Advisor. All Rights Reserved. CA Insurance License #0G33244



Benefit Resource Center (BRC)

We're Here To Help!

The Benefit Resource Center is staffed with experienced professionals who are well-versed in employee benefits. They are committed to providing superior customer service and participant advocacy.

Our Benefits Specialists can help you with:

- Deciding which plan is the best for you
- Benefit plan and policy questions
- Eligibility and claim problems with carriers
- Information about claim appeals and process
- Allowable family status election changes
- Transition of care when changing carriers
- Claim escalation, appeal and resolution
- Medicare basics with your employer plan
- Coordination of benefits
- Finding in-network providers
- Access to care issues
- Obtaining case management services
- Group disability claims
- Filing claims for out-of-network services

Toll Free:
855-874-6699

Email:
BRCEast@usi.com

Our Benefits Specialists can assist you
Monday through Friday, 8am to 5pm
Eastern and Central Standard Time.



CONTACT INFORMATION

RIVER CITY CONSTRUCTION INC. BENEFITS TEAM

The River City Construction Benefits Team is your internal resource for questions or concerns regarding your benefits:

Call: (252) 946-8164 x 1027 (office)
(252) 999-3510 (direct)

Email: benefits@xkig.com

CARRIER REPRESENTATIVES

BENEFIT	CARRIER	PHONE NUMBER	WEBSITE
Medical / Claims	Cigna	1-800-997-1654	www.myCigna.com
Health Savings Account	P&A Group	1-716-852-2611	www.padmin.com
Dental	Anthem BCBS	1-833-592-9956	www.anthem.com
Vision	EyeMed	1-844-225-3107	www.eyemed.com
Voluntary Life/AD&D	Lincoln Financial Group	1-877-275-5462	www.lfg.com
Voluntary Permanent Life with LTC	Trustmark	—	www.TrustmarkVB.com
Voluntary Short & Long-Term Disability	Lincoln Financial Group	1-877-275-5462	www.lfg.com
Voluntary Accident, Critical Illness & Hospital Indemnity	Lincoln Financial Group	1-877-275-5462	www.lfg.com
401(k) Retirement Plan	John Hancock Spanish Speaking Line	1-800-294-3575 1-888-440-0022	www.myplan.johnhancock.com
Utilities Employees Credit Union (UECU)	Lisa Reynolds	1-484-388-0655	lreynolds@uecu.org
Employee Assistance Program (EAP)	Lincoln Financial Group	877-622-4327	www.GuidanceResources.com username: LFGSupport password: LFGSupport1
Identity Protection Plan	Allstate	1-800-789-2720	www.myaip.com
Medicare	My Benefit Advisor / Shawn McLean	1-757-663-4089	shawn.mclean@mybenefitadvisor.com
Open Enrollment	GIS	1-877-277-7476	—
Human Resources Benefits Team	River City Construction Inc.	252-946-8164 x1027 252-999-3510	benefits@rivercityinc.net



CONSTRUCTION INC.
Washington, North Carolina



Provided By:



4840 Cox Road | Suite 150
Glen Allen, VA 23060
1-804-200-5200
www.usi.com

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