



Employee Benefits Guide

January 1, 2026 - December 31, 2026

The information contained in this guide is proprietary information of McGriff.
You are not permitted to share this information with third-parties.



TABLE OF CONTENTS

| | |
|--|----|
| Welcome & Eligibility..... | 3 |
| Changes During the Year | 4 |
| Medical Plans | 5 |
| Pharmacy Benefits | 6 |
| Digital Tools..... | 7 |
| Preventive Care | 7 |
| Dental Plan | 8 |
| Hearing Benefits | 9 |
| Vision Plan..... | 10 |
| Short-Term Disability | 11 |
| Long-Term Disability | 12 |
| Life Insurance | 13 |
| Accident Coverage | 14 |
| Hospital Indemnity Coverage | 15 |
| Critical Illness Coverage..... | 16 |
| Employee Assistance Program (EAP) | 17 |
| 401(k) Retirement & Stock Purchase Program | 19 |
| Employee Discount Program with Verizon | 20 |
| Enroll Now with PlanSource | 21 |
| Contacts | 21 |

WELCOME AND ELIGIBILITY

As a valued employee of **C.W. Roberts Contracting**, you have access to a comprehensive, high-quality benefits package. We encourage you to make the most of your benefits by reviewing all the available offerings and using the tools and resources provided to help you make the best coverage decisions for you and your family. Whether you are enrolling for the first time, reviewing your choices during the annual open enrollment, or modifying your selections due to a life qualifying event, we want your experience with **C.W. Roberts Contracting** to be as rewarding as possible.

This benefit guide was designed to assist you through your benefit choices and contains the highlights of your benefits program. Throughout this guide, you will see words in **GREEN**. These active links will take you to a website, a specific page in the guide, additional information, a quick mini-educational video, or an email address.

You can quickly return to the **Table of Contents** anytime by clicking anywhere on the **GARNET** bar on the right side of each page.

ELIGIBILITY

As a full-time employee, you can enroll your eligible dependents. Your qualified dependents include:

- Your lawful spouse
- Medical: Your child(ren) up to age 26
(eligibility ends at the end of the month in which the child turns age 26)
- Dental & Vision: Your child(ren) up to age 30
(eligibility ends at the end of the year in which the child turns age 30)
- Any other dependent as legally mandated by state law

To enroll an eligible dependent, you must provide proof of the dependent's relationship to you, when requested. If applicable, you are also required to provide proof of a disabled child's disability status prior to their 26th birthday."

NEWLY HIRED EMPLOYEES

For newly hired full-time employees, benefits will begin on the first day of the month following 30 days of employment. New hires need to enroll using the PlanSource portal within the applicable timeframe. If this time is missed, the employee must wait until the next annual open enrollment period, or until there is a life qualifying event to enroll, whichever comes first.

NOTE: Any changes made during the Open Enrollment period are effective January 1st.

IMPORTANT INFORMATION REGARDING YOUR BENEFITS

The medical Summary of Benefits and Coverage (SBCs), Medicare Part D Notice, CHIP Notice, General Notices and HIPAA Privacy Notice are available for you to view under the Resource Center tab on the PlanSource homepage.

If you are a plan participant, you are entitled to a comprehensive description of your rights and obligations under the BCBSAL health plan. We've recently posted a copy of the summary plan description (SPD) in PlanSource at <https://benefits.plansource.com>. To ensure that you fully understand the benefits available to you and your obligations as a plan participant, it is imperative that you familiarize yourself with the information contained within the SPD.

If you would like to receive a paper copy of the SPD or any of the notices or SBC's, you may contact Human Resources.

CHANGES DURING THE YEAR

You must notify Human Resources within **30 calendar days of the qualifying event** to make a change. The following chart is only a summary of the IRS rules for the most frequent examples.

| If you... | You can... |
|--|--|
| Gain a dependent through: marriage; birth of a child(ren); legal adoption; or guardianship | <ul style="list-style-type: none"> Enroll yourself, spouse and applicable dependent(s) in coverage for Medical, Dental, and/or Vision coverage Cancel coverage for yourself, and applicable dependent(s) for Medical, Dental, and/or Vision Coverage |
| Lose a dependent through: divorce; legal separation; death; or if a child(ren) reaches the maximum age of eligibility | <ul style="list-style-type: none"> Cancel applicable dependent(s) coverage for Medical, Dental, and/or Vision coverage Enroll yourself and applicable dependents who lose coverage under spouse's plan(s) in Medical, Dental, and/or Vision coverage |
| Have a spouse or dependent whose employment status changes that results in a gain or loss in eligibility for employer-provided coverage | <ul style="list-style-type: none"> Enroll yourself, and applicable dependent(s) Medical, Dental, and/or Vision coverage Cancel coverage for yourself, and applicable dependents, for Medical, Dental, and/or Vision coverage - ONLY if spouse enrolls in similar coverage If change impacts a dependent only, corresponding changes are limited to that dependent |
| Lose eligibility or become eligible for Medicare or Medicaid (including spouse or dependent) | <ul style="list-style-type: none"> Enroll or cancel coverage for Medical coverage Change coverage option |

Qualifying Events

A qualifying event is something in your life that has changed, making you eligible to change your benefit choices.

Most frequent examples:

- Adoption or birth of a child
- Marriage or divorce
- Spouse gained or lost health plan coverage through their employer



Qualifying Events
[Watch Video](#)



Medicare Eligibility
[Watch Video](#)

- All changes must follow the Internal Revenue Service's rules, including the consistency rules. For detailed information, please review the official Premium Only Plan (Section 125 Plan) Document.
- The list of qualifying events set forth above is not exhaustive. Please refer to the plan documents for complete information regarding qualifying events.
- Even if you already have "employee + children" or "employee + family" coverage, you must notify the HR team of any Qualifying Events that occur during the year. You can make changes to dependents within 30 days of the date of the event or the dependent(s) will not be covered and you cannot enroll/unenroll the dependent(s) until the next open enrollment period (effective on the first day of the next plan year) unless you have another applicable qualifying event. *For example, if there is the birth of a child, please notify the HR team. If your child no longer meets the eligibility requirements, please notify the HR team.*

| Benefits | In-Network are Benefits Listed Below | |
|---|---|---|
| | Standard Plan | Value Plan |
| Network Name | BlueCard PPO | |
| Find a Provider | Link - Find a Medical Provider | |
| Member Coinsurance | 20% after CYD | 20% after CYD |
| Calendar Year Deductible (CYD) | | |
| • Individual | \$400 | \$2,500 |
| • Family | \$1,200 | \$5,000 |
| Out-of-Pocket Maximum | (Copays & CYD are NOT included) | (Copays & CYD are included) |
| • Individual | \$500 | \$8,700 |
| • Family | \$1,500 | \$17,400 |
| Doctor's Office Visits | | |
| • Primary Care (PCP) | \$35 Copay | \$30 Copay |
| • Specialist | \$35 Copay | \$50 Copay |
| Preventive Care | Learn about what is covered | Learn about what is covered |
| • Well-Child Care | \$35 Copay | Covered at 100% |
| • Well Adult Care | \$35 Copay | Covered at 100% |
| Urgent Care Centers | \$35 Copay | \$50 Copay |
| Emergency Room | \$150 Copay | \$250 Copay |
| Diagnostic Testing | | |
| • Independent Labs & X-rays | Covered at 100% | Member pays 20% after CYD |
| • Advanced Imaging (PET, CT, MRI) | Covered at 100% | Member pays 20% after CYD |
| Outpatient Hospital Services | \$150 Copay | Member pays 20% after CYD |
| Inpatient Hospital Services | \$300 Deductible + \$50 per day copay for days 2-11 per admit | Member pays 20% after CYD |
| For details and out-of-network benefits refer to the Plan SBC | Click Here <i>This is a Grandfathered Plan</i> | Click Here |

| Weekly Premiums | Standard Plan | Value Plan |
|-----------------------|---------------|------------|
| Employee | \$50.00 | \$29.00 |
| Employee + Spouse | \$100.00 | \$67.00 |
| Employee + Child(ren) | \$100.00 | \$67.00 |
| Employee + Family | \$132.00 | \$85.00 |

Understanding how insurance works and the common terms used can assist you in understanding your medical plan options. Watch the videos below to learn more.

[What is a Deductible](#)
[What is Coinsurance](#)
[What is an Out-of-Pocket Maximum](#)

This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

| Pharmacy Benefits | Standard Plan | Value Plan |
|---|--|--|
| Retail Rx (up to a 31-day supply) <ul style="list-style-type: none"> • Tier 1 • Tier 2 • Tier 3 | \$15 Copay \$30 Copay \$50 Copay | \$15 Copay \$35 Copay \$60 Copay |

Prescription medications can be costly, so understanding how your pharmacy benefits work can help you manage your out-of-pocket costs.

Knowing which medications are Generic, Preferred Brand, or non-preferred Brand. This will help you understand where you can save money. You'll find the details about most prescription drug benefits by looking at your plan's Prescription Drug List (PDL), also called a Formulary. It's a list of medications and how your plan covers them. If you have a prescription for a particular drug, you can look it up in your PDL to see how it's covered.

The Prescription Drug List can provide the following information.

1. What tier is the drug listed under?
2. Does the drug have quantity limits?
3. Does the drug require prior authorization?
4. Does the drug require step therapy?

Blue Cross of Alabama updates its PDL lists during the year. Although changes that offer positive impacts, like new medication coverage or cost savings, can occur anytime, you can check your current coverage on the member website associated with your ID card to stay updated.

You are your own best advocate, when your physician gives you a prescription, ask questions.

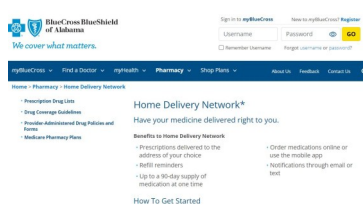
HOME DELIVERY/MAIL ORDER PHARMACY

Many members regularly take medication to help control or reduce symptoms of chronic disease, or other health conditions (ie: high blood pressure, depression, anxiety, high cholesterol).

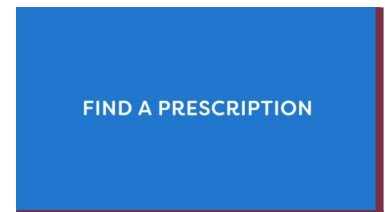
Using the mail-order pharmacy is convenient and may save you money. Note, not all medications are available through mail-order.



PDL Lists Explained
[Watch Video](#)



Home Delivery Pharmacy
[Access Link](#)



Find a Prescription
[Watch Video](#)

This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Get the most out of your benefits

Register for your personalized website on [BCBSAL.com](https://www.bcbsal.com) and download the app. These digital tools are designed to help you understand your benefits and make informed decisions about your care.

Find care and compare costs for providers and services in your network

- Access your health plan ID card
- Compare prescription costs
- See what's covered
- Access claim details
- Access wellness programs
- 24/7 Virtual Visits
- Find and price care
- Check your plan balances
- Get and stay healthier



Welcome to BCBS of Alabama
[Watch Video](#)



Mobile App Overview
[Watch Video](#)



Register with BCBSAL
[Watch Video](#)

Create or Access Your Online BCBSAL Account: [Click Here](#)

PREVENTIVE CARE

Preventive care includes various services focused on helping you maintain good health. Regular medical care focuses on treating illness, while preventive care aims to keep you from getting sick in the first place. Preventive care is generally focused on the following:

- Evaluating your health when you are symptom-free
- Receiving checkups and screenings
- Decreasing the risk of developing health issues even if you are in the best shape of your life

These services include the following:

- Annual checkups
- Health screenings
- Lab tests
- Immunizations
- Counseling

NOTE: The preventive benefits are covered differently for each of the medical plans. Check the benefits summary for your medical plan for more information on what preventive care services are covered.



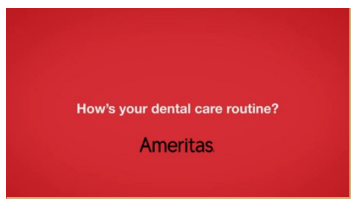
Preventive Care
[Watch Video](#)

This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Most dental issues can be avoided with regular checkups and preventive care. Of course, good dental hygiene plays the biggest role. It can be costly if you or one of your dependents experience a major dental problem. If you have dental insurance, the cost to you is less. Our dental plan provides both in and out-of-network benefits.

| Plan Features | | In and Out of Network Benefits Listed Below | |
|--|---|---|--|
| Network Name | | Classic PPO | |
| Find a Provider | | Link - Find a Dental Provider | |
| Calendar Year Deductible (CYD) | | | |
| • Per Individual | | \$50 | |
| Calendar Year Maximum <i>(per member)</i> | | \$1,500 | |
| Type 1: Preventive Services <i>(Deductible Waived)</i> | | Plan pays 100% | |
| <i>Exams, Cleanings, Bitewing X-rays</i> | | | |
| Type 2: Basic Services | | You pay 10% after CYD | |
| <i>Fillings, Simple Extractions</i> | | | |
| <i>Endodontics, Non-Surgical Periodontics</i> | | | |
| Type 3: Major Services | | You pay 40% after CYD | |
| <i>Surgical Periodontics, Crowns, Dentures, Implants</i> | | | |
| Dental Rewards® | | Included - Learn More | |
| Orthodontics <i>(Child Only to age 30)</i> | | | |
| • Benefits | | 50% | |
| • Lifetime Maximum | | \$1,000 | |
| Reimbursements: | | | |
| • In Network | | Discounted Fee | |
| • Out-of-Network | | 90% of UCR | |
| <i>Late Entrant Penalty: If you do not enroll when you are first eligible, and enroll at a future open enrollment, you are only eligible for exams, cleanings and fluoride treatments for the first 12 months of coverage.</i> | | | |
| For details refer to the Plan Summary | | Click Here | |
| One VSP Eye Exam | One eye exam per year is 100% covered when administered by an ophthalmologist or optometrist VSP provider. The 100% coverage is based on what is considered a reasonable and customary fee. | | |



4 Reason to Visit the Dentist
[Watch Video](#)

| Weekly Premiums | |
|-----------------------|---------|
| Employee Only | \$5.66 |
| Employee + Spouse | \$12.26 |
| Employee + Child(ren) | \$13.89 |
| Employee + Family | \$20.49 |

Your Ameritas Dental Plan Gives You a Lot to Smile About



- Ameritas Dental Network Overview: [Watch Video](#)
- Ameritas Mobile App: [Click Here](#)
- Dental Wellness: [Click Here](#)
- Access Your Ameritas Online Account: [Click Here](#)



This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Hearing benefits are included to all employees enrolled in either one of the dental plans.

Life's getting louder.SM Thanks to the cranked-up volume of modern life, hearing loss has become one of the most common chronic health problems in the U.S. It afflicts more than 30 million of us - about 10% of the population has a significant hearing loss - and the number is growing. Today's Baby Boomers have the most active and noisy lifestyle of any previous generation. And hearing loss is occurring at younger and younger ages, partly because of electronic devices that flood our society.

In addition to the obvious culprits we're sticking in our ears - portable media players, cell phone earpieces, gaming headsets - here's a look at common noises that affect hearing, and the amount of time it can take for hearing loss to occur:

- Stadium football game: two and a half hours
- Tractor: 37 minutes
- Hand drill: 23 minutes
- Snowmobile: 15 minutes
- Leaf blower, smoke alarm, chain saw, airplane cabin: a minute and a half
- Rock concert, ambulance: 9 seconds

With SoundCare®, you can use your hearing benefits at any licensed hearing provider, the choice is yours.

| Hearing Benefit Features | |
|--|----------------------------|
| Access the Tuned website to learn more | Click Here |
| Annual Hearing Exam | Covered at 100% |
| Hearing Aid | Covered at 50% |
| Hearing Aid Maintenance | Covered at 100% |
| Deductible | |
| • Annual Hearing Exam | \$0 |
| • Hearing Aid | \$0 |
| • Hearing Aid Maintenance | \$0 |
| Benefits Year Maximum | |
| • Annual Hearing Exam | Covered 100% up to \$75 |
| • Hearing Aids (Per Ear) | |
| - Year One | Up to \$400 |
| - Year Two | Up to \$600 |
| - Year Three | Up to \$800 |
| • Hearing Aid Maintenance | Up to \$40 |

Late Entrant Penalty: If you do not enroll when you are first eligible, and enroll at a future open enrollment, you are considered a late entrant. Late entrants are only eligible for hearing exams, for the first 12 months of coverage.



Phone
877-359-8346

Learn More About Your Hearing Benefits

- How to Use Your Hearing Benefits: [Click Here](#)
- Hearing Wellness: [Click Here](#)
- Hearing Loss: [Click Here](#)
- Hearing Claim Form: [Click Here](#)



This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

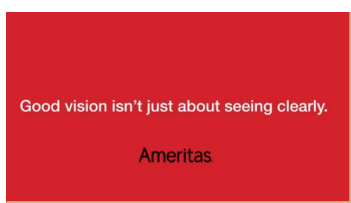
An annual vision exam is essential for overall health. During the exam, an eye doctor will look for vision problems and early signs of other health conditions, such as diabetes, high blood pressure, and high cholesterol. Through Ameritas and Partnered with VSP our vision plan offers benefits through a nationwide provider network that includes private practice and retail optical providers.

| Features | In Network | Out of Network |
|---|---|---|
| Network Name Learn more about the VSP network | VSP Click Here | NA |
| Find a Vision Provider | Link - Find a Vision Provider | NA |
| Benefit Frequency <i>(Based on date of Service)</i> <ul style="list-style-type: none"> • Eye Exams • Prescription Lenses or Contacts • Frames | Once every 12 months Once every 12 months Once every 12 months | |
| Eye Exams | Covered in full | Up to \$45 |
| Prescription Lenses <ul style="list-style-type: none"> • Single Vision • Lined Bifocals • Lined Trifocals • Progressive Lenses | Covered in full after \$25 Copay | \$25 Copay; up to \$30 \$25 Copay; up to \$50 \$25 Copay; up to \$65 Not Covered |
| Frames | \$25 Copay; \$150 Allowance then 20% off remaining frame balance | \$25 Copay; up to \$75 |
| Contact Lenses <ul style="list-style-type: none"> • Elective Contacts • Fit & Follow Up Exams (Standard) • Medically Necessary Contact Lenses* | \$25 Copay; \$150 Allowance Member cost up to \$60 Covered in full after \$25 Copay | \$25 Copay; \$120 Allowance Not Covered \$25 Copay; up to \$210 |
| Shop Online | eyeconic.com | NA |

*Are determined at the provider's discretion for certain conditions.

NOTE: Insurance covers Lenses for Glasses or Contacts once every 12 months, not both.

For more details refer to Plan Summary: [Click Here](#)



4 Things that Affect Your Vision

[Watch Video](#)

Weekly Premiums

| | |
|-----------------------|--------|
| Employee Only | \$1.61 |
| Employee + Spouse | \$3.17 |
| Employee + Child(ren) | \$3.08 |
| Employee + Family | \$4.64 |

See What Ameritas Vision can do for You



- Vision Wellness: [Click Here](#)
- How to Submit a Vision Claim: [Watch Video](#)
- What to Expect During an Eye Exam: [Watch Video](#)



This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Disability insurance is also known as “Income Protection”. This coverage will provide income to you if you cannot work due to a non-work-related injury or illness. A disability can come from many different sources, and the time that you need to recuperate will vary based on your condition. By having disability insurance, you can receive a portion of your income while you are recuperating.

Employees pay 100% of the cost. The cost is based on your age and income. Access the PlanSource portal for your cost and benefit amount.



Short-Term Disability
[Watch Video](#)

Employee Paid - Short-Term Benefit

| | |
|--------------------------------|--|
| Elimination Period: | If you become disabled, there is an elimination period (number of days) before benefits are payable. The elimination period is 7 days. |
| • Injury | Benefits begin on day 8 |
| • Sickness | Benefits begin on day 8 |
| Benefit Amount: | Your benefit is equivalent to 60% of your before-tax weekly earnings. |
| Maximum Benefit Amount: | Up to \$1,000 per week |
| Duration of Benefits: | Up to 13 weeks, or until you no longer meet the definition of disabled. |
| Benefits Reductions: | Your benefits may be reduced if: <ul style="list-style-type: none"> You are receiving benefits from any compulsory benefit, act, or law, such as a state disability plan You are receiving sick leave pay from your employer, refer to the certificate for additional information. |
| *Pre-Existing Clause: | 3 months prior, 12 months after |

For more info refer to the Plan Summary: [Click Here](#)

**The STD policy contains the following pre-existing condition limitation: any injury or sickness that has been diagnosed, consulted or treated, to include prescribed medication, three (3) months prior to your effective date will NOT be covered until you have been insured twelve (12) months by the plan.*

This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Some conditions require a more extended recovery period; that's when long-term disability insurance can help. The long-term benefits work seamlessly with the short-term benefits.

Employees pay 100% of the cost. The cost is based on your age and income. Access the PlanSource portal for your cost and benefit amount.



Long-Term Disability
[Watch Video](#)

Employee Paid - Long-Term Benefits

| | |
|---------------------------------------|--|
| Elimination Period Definition: | If you become disabled, there is an elimination period (number of days) before benefits are payable. Elimination period: 90 calendar days |
| Injury & Sickness | Benefits begin on day 91 |
| Benefit Amount: | 60% of your monthly earnings |
| Maximum Benefit Amount: | Up to \$10,000 per month |
| Own Occupation: | 24 months |
| Duration of Benefits: | Up to Normal Social Security Retirement Age (SSNRA) |
| Benefits Reductions: | Your benefits may be reduced if: <ul style="list-style-type: none"> • You are receiving benefits from any compulsory benefit, act, or law, such as a state disability plan • You are receiving sick leave pay from your employer |
| *Pre-Existing Clause: | 3 months prior, 12 months after |

For more info refer to the Plan Summary: [Click Here](#)

**The LTD policy contains the following pre-existing condition limitation: any injury or sickness that has been diagnosed, consulted or treated, to include prescribed medication, three (3) months prior to your effective date will NOT be covered until you have been insured twelve (12) months by the plan.*

This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

BASIC LIFE AND AD&D INSURANCE

LFG

Having life insurance can help your family manage expenses and make a difficult transition less painful. Life insurance provides the people you love with financial support when you can't be there - and when they need it most. This coverage is provided by **C.W. Roberts Contracting, Inc.** at no cost to you!

Please designate your beneficiaries in the PlanSource portal.

Learn more about updating your beneficiaries: [Click Here](#)

| Life and AD&D Benefit | | Benefit Summary |
|--|---------------------------------------|----------------------------|
| Class 1: Full-Time Salaried | 1x Annual Earnings up to \$250,000 | Click Here |
| Class 2: Full-Time Hourly | \$50,000 | Click Here |

Refer to the benefit summaries for the age reductions.



Life Insurance
[Watch Video](#)

Life Insurance

Included in your life insurance are [LifeKeys](#) & [Travel Connect](#)

VOLUNTARY LIFE AND AD&D

LFG

C.W. Roberts Contracting, Inc. offers you the opportunity to purchase additional life insurance for yourself and your dependents. The amount of additional life insurance you need is based on your individual and family needs. Calculate the amount of life insurance you may need: [Click Here](#).

The cost of the additional life insurance is based on the amount you elect and your age. Employee must enroll in the supplemental life to enroll a spouse or children.

The PlanSource portal will provide the amounts that may be purchased and the costs.

| | Benefit Amount | Guarantee Issue Amount |
|---|--|----------------------------------|
| Employee | \$10,000 increments up to a maximum of \$500,000 (not to exceed 5x annual earnings) | (New Eligible Only) \$300,000 |
| Employee must satisfy all active employment requirements to qualify for benefits | | |
| Spouse | \$10,000 increments up to \$500,000 (cannot exceed 100% of the employee amount) Spouse rate is based on employee age | \$50,000 |
| Child(ren) | Birth to 6 months \$1,000, 6 months to age 26 \$10,000 | \$10,000 |

Coverage for dependents may be delayed if they are confined or disabled on coverage effective date

For details and age reductions refer to the plan summary: [Click Here](#)

Note: Employees are responsible for notifying HR when a covered child turns age 26 or if they experience a life qualifying event that involves a covered spouse.

Note: If you elect any amount over the guaranteed issue amount or do not enroll when first eligible, you and/or your spouse must complete and submit an Evidence of Insurability (EOI) to LFG. The amount of insurance requested above the guaranteed issue amount or the entire amount if you or your spouse are late entrants will not be in effect until LFG receives the completed form, processes it, and either approves or declines the request. **Learn about the Online EOI Process: [Watch Video](#)** **Company Code: PENDING**

This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Eventually, you may make an unexpected trip to your local emergency room. And that could add a set of unforeseen bills into the mix. This plan covers accidents that occur on or off the job.

The **wellness benefit provides a \$50 annual benefit** if you complete a health screening test. Make sure to file your claim within a year of the date of service.

This policy includes a Child Organized Sport Benefit. This benefit increase the covered benefit by 25%, and is paid if the covered accident occurred while your covered child (under age 18) is participating in an organized sport that is governed by an organization and requires formal registration to participate.

Employees pay 100% of the cost for the accident coverage.

| Wellness Screening Benefit | |
|--|----------------------------|
| Employee & Enrolled Dependents <i>(Paid once per benefit year)</i> | \$50 each |
| Some Benefits are Listed Below | |
| Hospital Admission | \$1,000 |
| Hospital Confinement <i>(up to 365 days)</i> | \$200 per day |
| Major Diagnostic Exam <i>(CT, CAT, EEG, PET or MRI)</i> | \$300 |
| Physician Follow-up <i>(up to 6 visits)</i> | \$140 |
| X-Ray <i>(at initial visit)</i> | \$250 |
| Ambulance | \$450 - \$1,875 |
| Emergency Care Treatment | \$250 |
| Emergency Dental Treatment | \$250 - \$350 |
| For details refer to Plan Summary | Click Here |



Accident Coverage

[Watch Video](#)

| Weekly Premiums | |
|-----------------------|--------|
| Employee Only | \$3.01 |
| Employee + Spouse | \$4.99 |
| Employee + Child(ren) | \$5.49 |
| Employee + Family | \$7.43 |



Phone
800-423-2765

Learn More about LFG Accident Coverage

- Why Accident Coverage: [Click Here](#)
- All about the Wellness Benefit: [Click Here](#)
- All about the LFG Member Portal: [Watch Video](#)
- Create or Access Your LFG Online Account: [Click Here](#)
- How to File a Claim: [Click Here](#)

This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Hospital Indemnity insurance provides a lump sum payment to help cover the costs if you or a covered dependent is hospitalized. This plan pays regardless of any other insurance plans you may have. Coverage is available for employees, spouses, and dependent children.

IMPORTANT: This is a fixed indemnity policy, NOT health insurance. This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care. The payment you get isn't based on the size of your medical bill. There might be a limit on how much this policy will pay each year. This policy isn't a substitute for comprehensive health insurance. Since this policy isn't health insurance, it doesn't have to include most federal consumer protections that apply to health insurance.

The **wellness benefit provides a \$50 annual benefit** if you complete a health screening test. Make sure to file your claim within a year of the date of service.

Employees pay 100% of the cost.

| Wellness Benefit <i>(Paid once per year)</i> | |
|--|----------------------------|
| Employee & Enrolled Dependents | \$50 each |
| Benefits | |
| Hospital Admission <i>(up to 4 days per year)</i> | \$1,000 |
| Hospital Confinement <i>(up to 30 days per year)</i> | \$200 per day |
| Intensive Care Unit (ICU) Admission <i>(Limited to 1 day per year)</i> | \$2,000 |
| Intensive Care Unit (ICU) Confinement <i>(up to 30 days per year)</i> | \$400 per day |
| Newborn Care <i>(up to 1 day per year)</i> | \$500 |
| For details refer to Plan Summary | Click Here |



Hospital Coverage

[Watch Video](#)

| Weekly Premiums | |
|-----------------------|---------|
| Employee Only | \$4.64 |
| Employee + Spouse | \$9.90 |
| Employee + Child(ren) | \$7.04 |
| Employee + Family | \$12.82 |

Learn More about LFG Hospital Coverage

- Why Hospital Coverage: [Click Here](#)
- All about the Wellness Benefit: [Click Here](#)
- Enhanced ICU & NICU Benefits: [Click Here](#)
- All about the LFG Member Portal: [Watch Video](#)
- Create or Access Your LFG Online Account: [Click Here](#)
- How to File a Claim: [Click Here](#)



Phone
800-423-2765

This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Critical illness insurance provides a lump sum payment to help cover the costs associated with specified illnesses.

The **wellness benefit provides a \$50 annual benefit** if you complete a health screening test. Make sure to file your claim within a year of the date of service.

Employee must be enrolled to have coverage for spouse or child(ren). Employees pay 100% of the cost. The cost is based on your age and amount. Access the PlanSource portal for your cost and benefit amount.

| Wellness Benefit <i>(Paid once per year)</i> | |
|--|-----------|
| Employee & Enrolled Dependents | \$50 each |

| Some Covered Conditions Include |
|---|
| <ul style="list-style-type: none"> • End-Stage Kidney Disease • Heart Attack • Stroke • Advanced Alzheimer's Disease • Loss of Sight, Hearing or Speech • AIDS • Major organ Failure • Advanced ALS • Advanced Parkinson's Disease |
| Childhood Conditions |
| <ul style="list-style-type: none"> • Type 1 Diabetes • Down Syndrome • Muscular Dystrophy • Cerebral Palsy |

For details refer to the Plan Summary: [Click Here](#)

| Coverage Amounts Available | |
|----------------------------|---|
| Employee | \$10,000, \$20,000 or \$30,000 |
| Spouse | \$10,000, \$20,000 or \$30,000 (cannot exceed 100% of employee amount) |
| Child(ren) | \$5,000, \$10,000 or \$15,000 (cannot exceed 100% of employee amount) |



Critical Illness Coverage
[Watch Video](#)



Phone
800-423-2765

Learn More about LFG Critical Illness Coverage

- Why Critical Illness Coverage: [Click Here](#)
- All about the Wellness Benefit: [Click Here](#)
- All about the LFG Member Portal: [Watch Video](#)
- Create or Access Your LFG Online Account: [Click Here](#)
- How to File a Claim: [Click Here](#)

This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Help handling life's ups and downs

With an EAP, you and your family have access to **free, confidential** resources to help handle life's everyday-, not so everyday-challenges. You might use your EAP to help: manage stress, handle relationship issues, balance work and life, work through grief, cope with anxiety, and more. Plus, your EAP gives you access to discounts on major brands and everyday needs.

What is a Guide+Thrive?

Guide+Thrive, delivered by BHS, provides you and your household member with free, confidential support to help with personal or professional problems, concerns or challenges that interfere with feeling or performing at your best.

How does it work?

When you reach out BHS will:



CONFIDENTIAL

Guide+Thrive is completely confidential. Information about your use of Guide+Thrive cannot be released without your written permission.



AVAILABLE 24/7

Services are available 24-hours a day, 7-days a week.



FREE

Guide+Thrive is provided at NO COST* to you and is paid for by your employer.

COMMON REASONS TO CONTACT BHS

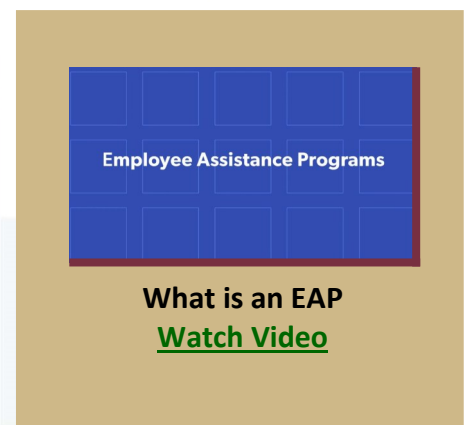
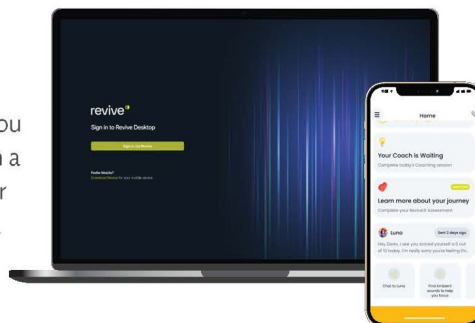
- Anxiety
- Anger
- Burnout
- Career stress
- Crisis support
- Depression
- Financial
- Grief and Loss
- Health/Illness
- Legal
- Life events
- Marriage/Divorce
- Relationships at work
- Struggling with daily responsibilities
- Substance abuse
- Suicidal thoughts
- Work/Life balance
- Work conflicts

Revive & Thrive

Revive & Thrive is your gateway to a more empowered, informed and proactive approach to mental wellbeing. Whether you need to schedule a consultation, chat with a counselor or resources to help you on your wellbeing journey, it's all here in one place.

Features:

- ✓ Self-scheduling counseling
- ✓ Live group support sessions
- ✓ Coaching courses
- ✓ AI chat companion
- ✓ Premium content and videos
- ✓ Wellbeing assessments
- ✓ Interactive journal
- ✓ Manager trainings
- ✓ Ambient sounds & calming space



This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

WORK LIFE RESOURCES



CHILD CARE

BHS provides up-to-date, carefully screened, national resources and referrals for a range of childcare needs including:

- Adoption and Special Needs
- Before and After School Programs
- Family Daycare and Group Homes
- Nanny and Au Pair Services
- Nurseries and Preschools
- Summer Camps



ELDER CARE

BHS provides up-to-date, national resources and referrals for a range of eldercare needs including:

- Home-Based Services: Nutrition, Meals on Wheels, Cleaning and Repair
- Housing: Retirement Communities, Subsidized Housing
- In-Home Care: Medical and Nursing Rehabilitation Services
- Inpatient Services: Nursing Homes, Intermediate Care Facilities, Respite Care and Assisted Living Facilities
- Older Adult Services: Support/ Advocacy Groups, Volunteer Opportunities and Adult Day Care
- Transportation Services



LEGAL

When faced with a legal matter, contact BHS to be connected to an attorney with expertise specific to your needs. Legal benefits include:

- Free 30-minute consultations
- In office or telephonic with local plan providers
- Each consultation must be over a new legal topic
- 25 percent discount on attorney hourly rate/fee, and a 10 percent discount on the flat fee rate



FINANCIAL

You and your household members can access unlimited telephonic financial counseling, information and education from BHS' team of highly-trained financial counselors. Typical financial matters include:

- Budgeting
- College Funding
- Credit Counseling
- Debt Management and Consolidation
- Retirement Funding



CONVENIENCE CARE

With convenience care, finding what you are looking for is just a phone call away. BHS provides up-to-date, national resources and referrals for a range of needs, such as:

- Adult Education Classes
- Airfare, Hotel and Car Rental
- Concert, Sport and Theater Tickets
- Contractors, Handymen, Plumbers and Landscapers
- Party Planning
- Personal Shoppers
- Pet Care
- Spa and Salon Services

Call or text to access services



Phone
800-327-2251

Scan the QR code to get started



This guide does not interpret, extend or change the plan in any way.

The benefits that you receive are based upon the plan's official documents, not this guide or any other written or oral statement.

Saving for retirement is an essential piece of your overall financial wellness. C.W. Roberts Contracting, Inc. offers employees an easy way to save for retirement through our 401(k) Retirement Savings Plan with Principal Financial Group.

The 401(k) plan is a great benefit. Employees who are 18 years of age or older are eligible to participate on the first of the month, following six months of employment.

Enrolling is easy. You can go online at www.principal.com or use the paper forms in your "Three Steps to Retirement" workbook. If you choose paper, please complete both the enrollment form and the beneficiary form, then return them to your office manager.

Step 1: Contribution Election - Employees can elect to contribute through payroll deductions on a pre-tax or after-tax basis.

Step 2: Investment Choices - Employees may choose to build a portfolio from a variety of top notch investment options or select the age-based "Quick Option" - Principal Lifetime Funds.

Step 3: Signature

401(k) Company Match

C.W. Roberts Contracting, Inc. provides a matching contribution equal to 100% of your 401(k) elective deferral contributions up to 3% of your pay, plus 50% of your 401(k) elective deferral contributions of the next 2% to help your savings grow faster. Anything above 5% is not matched by the company but will be an investment towards retirement. Matching Contributions, made on and after January 1, 2017, are Qualified Matching Contributions and are 100% vested when made.

EMPLOYEE STOCK PURCHASE PROGRAM

C.W. Roberts Contracting, Inc. is pleased to offer the Employee Stock Purchase Plan for all active full-time employees. Our parent company, Construction Partners Inc. has established an Employee Stock Purchase Plan that is administered by Bank of America/Merrill Lynch (BAML). With this exciting benefit, you may elect to have an after-tax payroll deduction that will be used to purchase shares of Construction Partners, Inc. stock (Nasdaq: ROAD) at a 15% discount from the lower of the price at the beginning of the quarter and the price at the end of the quarter. The minimum percentage an employee can contribute through payroll deduction is 1% of their total pay per week and the maximum is 15% per week. An employee may purchase no more than \$25,000 in stock in any calendar year.

Please see your office manager if you are interested in learning more about participating in this benefit and receiving enrollment instructions. Employees will be required to enroll themselves through the BAML website.

Please note, there are specific dates designated for enrollment. All enrollment periods will be open the first of the month prior to the start of a new quarter and will be open until the 15th of the month. If the price is lower at the beginning of the quarter, this price will be used to purchase the stock. If the price is lower at the end of the quarter, this price will be used. The 15% discount will be applied to the lower price for the purchase.

The stock is purchased one-time at the end of the quarter using the cumulative funds that have been deducted over the course of the quarter.

Payroll deductions will begin on the first pay date of the quarter, following enrollment. If an employee chooses to stop, increase, or decrease the percentage of their deduction, they can make one change per quarter. All changes must be entered through the BAML website.

Save money on your Verizon Wireless service!

C.W. Roberts and Verizon have a corporate discount agreement. This agreement allows C.W. Roberts employees to qualify for monthly discounts on their personal Verizon Wireless accounts.

Employees can register their lines for an 18% discount. Discount applies to your Monthly Account Access Fees. 1 or 2-yr activation on eligible Calling Plans \$34.99 or higher required.

Employees can register for the discount two different ways:

- Go to <https://www.verizon.com/discounts/>
- Scroll down to “Discounts for corporate partner employees”
- Select “Already have a Verizon account”

Option 1. Validating by using your work email address

1. Enter your current Verizon user ID or mobile number and password.
2. Enter your work email address.
3. Submit

You will receive an email from Verizon with a “Confirm my Discount link” that must be selected within 72 hours to complete the process. If you don’t confirm within the 72 hours, you must begin the process again.

Option 2. Validating by Paystub

NOTE: Have a copy of your paystub already saved on your computer. The paystub must be dated within the last 60 days and legibly display your name, the name of your employer and the date the paystub was issued. Black out any other sensitive information (e.g., salary, tax amounts, banking information, Social Security Number, Employee ID Number).

1. Enter your current Verizon user ID or mobile number and password.
2. Enter your personal email address.
3. Enter your company information
4. Select “Browse” and add your paystub document.
5. After a review, a status notification will be sent to your personal email.

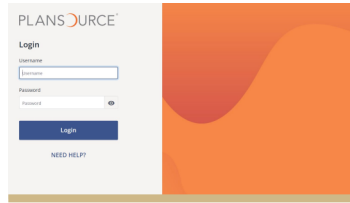
Verizon will periodically request employees to confirm their eligibility by asking them to validate their current employment, this effort applies to all customers that receive employee discounts.

Need assistance?

Employees can call the Verizon Wireless Employment Validation Center directly at 1-800-890-8007. They can also log on to [verizon.com/discounts/](https://www.verizon.com/discounts/) and review the Discounts and Employment Validation FAQs.

After you have reviewed all your benefits, access the PlanSource link to process your elections.

Our PlanSource benefits portal, enables you to make your benefit elections whenever and wherever it is most convenient. This site will guide you, step-by-step, through the enrollment process. For each benefit, you will be able to review your choices, if applicable, select your coverage level, and include any dependents you want to cover for that benefit.



Enroll Now
[Access Link](#)

CONTACTS

| C.W. Roberts Contracting, Inc. <i>Questions about benefits, qualifying events, or general assistance</i> | | |
|---|--|--|
| Contact | Phone | Email |
| Christina Sheets Human Resources | 850-785-4675 Ext. 209 850-879-6655 - Cell | csheets@cwrcontracting.com |
| Amanda Dierksheide Human Resources | 850-756-0773 | adierkshei@cwrcontracting.com |

| Benefit | Phone | Online or Email |
|--|---|--|
| <ul style="list-style-type: none"> • Medical <i>Blue Cross Blue Shield of Alabama</i> | 800-810-2583 | bcbsal.org |
| <ul style="list-style-type: none"> • Dental <i>Ameritas</i> | 800-487-5553 | ameritas.com |
| <ul style="list-style-type: none"> • Vision <i>Ameritas with VSP Network</i> | 800-877-7195 | vsp.com |
| <ul style="list-style-type: none"> • Disability <i>Lincoln Financial Group</i> | 800-423-2765 | lfg.com |
| <ul style="list-style-type: none"> • Accident Coverage • Critical Illness Coverage • Hospital Coverage <i>Lincoln Financial Group</i> | | |
| <ul style="list-style-type: none"> • Life Insurance <i>Lincoln Financial Group</i> | | |
| <ul style="list-style-type: none"> • Employee Assistance Program <i>Guide & Thrive</i> | | |
| <ul style="list-style-type: none"> • 401(k) Retirement Plan <i>Principal</i> | General Info: 800-986-3343 Retirement Info: 800-547-7754 | principal.com |



The information in this Benefits Guide is presented for illustrative purposes and is based on information provided by your employer. The text contained in this Guide was taken from various summary plan descriptions and benefits information. While every effort was taken to report your benefits accurately, discrepancies or errors are always possible. In case of a discrepancy between the Benefits Guide and the actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about this Summary, contact Human Resources.

© 2024 McGriff Insurance Services, LLC.

All rights reserved. McGriff Insurance Services, A Marsh & McLennan Agency LLC Company



10/20/2025 7:41 PM