



## EMPLOYEE BENEFITS SUMMARY | 50017479 NABHOLZ CONSTRUCTION CORPORATION

FOR CONSTRUCTION EMPLOYEES

GROUP TERM LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT	EMPLOYER CONTRIBUTION: 100%
<p><b>AMOUNT OF COVERAGE:</b> Pays a benefit of \$50,000 without evidence of insurability.</p> <p><i>Benefits reduce, based on your age, to 65% at age 65, to 50% at age 70, and terminate when you are no longer eligible or your retirement, whichever occurs first.</i></p>	
<p><b>GROUP TERM LIFE</b> insurance is designed to provide benefits to your designated beneficiary for loss of life.</p>	
<p><b>ACCIDENTAL DEATH AND DISMEMBERMENT (AD&amp;D)</b> is payable, if within 365 days of a covered accident, you suffer loss of life or dismemberment. AD&amp;D provides protection for losses occurring on or off the job.</p>	
<p><b>GROUP TERM LIFE AND ACCIDENTAL DEATH &amp; DISMEMBERMENT ALSO INCLUDES THE FOLLOWING:</b></p> <ul style="list-style-type: none"><li>• Accelerated Benefit</li><li>• Extended Life Insurance Benefit (Waiver of Premium)</li><li>• Coma Benefit</li><li>• Exposure &amp; Disappearance Benefit</li><li>• Repatriation Benefit</li><li>• Safety Equipment Benefit</li><li>• Total Loss of Use Benefit</li><li>• Travel Assistance</li><li>• *Employee Assistance Program (EAP) - 3 Face to Face Visits</li></ul> <p><i>*Offered through our partnership with New Directions Behavioral Health</i></p>	
SHORT TERM DISABILITY	EMPLOYER CONTRIBUTION: 100%
<p><b>AMOUNT OF COVERAGE:</b> Pays a benefit of 70% of your Basic Weekly Earnings to a maximum of \$1,000 per week, less offsets for other income. Benefits begin on the 8th day of a covered disability resulting from an accident, and on the 8th day of a covered disability resulting from sickness, and are payable up to a maximum of 12 weeks for any one covered disability.</p>	
<p><b>GROUP SHORT TERM DISABILITY (STD)</b> is designed to provide partial income replacement should you become disabled as the result of sickness or injury.</p> <p><i>Benefits terminate when you are no longer eligible or your retirement, whichever occurs first.</i></p>	
<p><b>SHORT TERM DISABILITY ALSO INCLUDES THE FOLLOWING:</b></p> <ul style="list-style-type: none"><li>• Recurrent Disability</li><li>• Return to Work Incentive</li><li>• *Employee Assistance Program (EAP) - 3 Face to Face Visits</li></ul> <p><i>*Offered through our partnership with New Directions Behavioral Health</i></p>	
LONG TERM DISABILITY	EMPLOYER CONTRIBUTION: 50%
<p><b>AMOUNT OF COVERAGE:</b> You may purchase a benefit of 60% of your Basic Monthly Earnings to a maximum of \$8,000 per month, less offsets for other income. Benefits begin on the 91st day of a covered disability and are payable for 2 years if you are disabled from your own occupation, or to your Social Security Normal Retirement Age (SSNRA) if you are disabled from any occupation.</p> <p><i>This plan will not cover any disability which is caused or contributed to by, or results from a pre-existing condition for which treatment was received during the 3 month period immediately preceding the effective date of coverage, and which begins in the first 12 months after the effective date of coverage.</i></p>	
<p><b>GROUP LONG TERM DISABILITY (LTD):</b> is designed to provide partial income replacement for you should you become disabled as the result of a covered sickness or injury.</p>	

**LONG TERM DISABILITY ALSO INCLUDES THE FOLLOWING:**

- Return to Work Incentive
- Survivor Benefit
- Managed Rehabilitation Benefit
- Child Care Benefit
- Progressive Disease Benefit
- \*Employee Assistance Program (EAP) - 3 Face to Face Visits  
\*Offered through our partnership with New Directions Behavioral Health
- Waiver of Premium Benefit

**VOLUNTARY GROUP TERM LIFE**

**EMPLOYER CONTRIBUTION: 0%**

**Employee:** If you are age 69 or younger, you may purchase coverage in units of \$10,000 to a maximum of \$150,000 through age 69, and \$0 after reaching age 70 without evidence of insurability. Coverage over these amounts to a maximum of \$300,000 is available with evidence of insurability. Coverage cannot exceed 5.0 times your Basic Annual Earnings.

*Benefits reduce, based on your age, to 65% at age 65, to 50% at age 70, and terminate when you are no longer eligible or your retirement, whichever occurs first.*

**Spouse:** If you have purchased Voluntary GTL for yourself, you may purchase coverage for your eligible spouse, age 69 or younger, in units of \$5,000 to a maximum of \$30,000 through age 69, and \$0 after reaching age 70 without evidence of insurability. Coverage over these amounts to a maximum of \$300,000 is available with evidence of insurability.

*Benefits reduce, based on spouse's age, to 65% at age 65, to 50% at age 70, and terminate when you are no longer eligible or your retirement, whichever occurs first.*

**Child:** If you have purchased Voluntary GTL for yourself, you may purchase coverage for your eligible children between the ages of 6 months and 26 years from \$5,000 to \$10,000 in increments of \$5,000. Benefits reduce to \$1,000 for children from 15 days - 6 months.

*Benefits terminate when they are no longer eligible, or at the termination of your eligibility, whichever occurs first.*

**VOLUNTARY GROUP TERM LIFE (VGTL)** If you need additional term life protection for you and your eligible family members, think about US Able Life's low cost VGTL coverage. You select the benefit amounts to suit your specific situation and premium payments are made through payroll deduction.

**VOLUNTARY GROUP TERM LIFE ALSO INCLUDES THE FOLLOWING:**

- Accelerated Benefit
- Portability
- Extended Life Insurance Benefit (Waiver of Premium)

**VOLUNTARY ACCIDENTAL DEATH AND DISMEMBERMENT**

**EMPLOYER CONTRIBUTION: 0%**

**Employee:** You may purchase coverage in units of \$10,000 to a maximum of \$300,000 without evidence of insurability. Coverage cannot exceed 10.0 times your Basic Annual Earnings.

*Benefits reduce, based on your age, to 65% at age 65, to 50% at age 70, and terminate when you are no longer eligible or your retirement, whichever occurs first.*

**Spouse:** If you have purchased Voluntary AD&D for yourself, you may purchase coverage for your eligible spouse in units of \$10,000 to a maximum of \$300,000 without evidence of insurability.

*Benefits reduce, based on spouse's age, to 65% at age 65, to 50% at age 70, and terminate when you are no longer eligible or your retirement, whichever occurs first.*

**Child:** If you have purchased Voluntary AD&D for yourself, you may purchase coverage for your eligible children between the ages of 6 months and 26 years from \$5,000 to \$10,000 in increments of \$5,000. Benefits reduce to \$1,000 for children from 15 days - 6 months.

*Benefits terminate when they are no longer eligible, or at the termination of your eligibility, whichever occurs first.*

**VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT (VAD&D)** coverage allows you to purchase benefits to provide protection in the event of an unexpected loss of accidental death or dismemberment. Protection is issued on a 24-hour basis for you and your eligible family members and covers you as the result of a covered accident anywhere in the world.

**VOLUNTARY ACCIDENTAL DEATH AND DISMEMBERMENT ALSO INCLUDES THE FOLLOWING:**

- Coma Benefit
- Exposure & Disappearance Benefit
- Repatriation Benefit
- Safety Equipment Benefit
- Total Loss of Use Benefit

GROUP ACCIDENT RECOVERY (24 HOUR COVERAGE)	EMPLOYER CONTRIBUTION: 0%
<p>If you are age 69 or younger, you may purchase Accident Recovery benefits, which provide comprehensive coverage for accidental injuries including hospitalization, rehab and physical therapy. Benefits are paid directly to you and there is no coordination of benefits with your medical plan. Coverage is also available for your spouse and children.</p>	
<p><b>HIGHLIGHTS OF THE BASIC PLAN INCLUDE:</b></p> <ul style="list-style-type: none"> <li>Physician Office Visit: \$125/2 visits</li> <li>Initial Hospitalization: \$1000</li> <li>Ambulance (Air/Ground): \$1250/\$200</li> <li>Physical Therapy: \$100/ 6 visits</li> <li>Transportation (for non-local treatment): \$400/5 Trips</li> <li>*Wellness Benefit: \$60</li> </ul>	
<p><b>HIGHLIGHTS OF THE SELECT PLAN INCLUDE:</b></p> <ul style="list-style-type: none"> <li>Physician Office Visit: \$150/2 visits</li> <li>Initial Hospitalization: \$1200</li> <li>Ambulance (Air/Ground): \$1500/\$240</li> <li>Physical Therapy: \$140/ 6 visits</li> <li>Transportation (for non-local treatment): \$600/5 Trips</li> <li>*Wellness Benefit: \$75</li> </ul>	
<p><b>HIGHLIGHTS OF THE ULTRA PLAN INCLUDE:</b></p> <ul style="list-style-type: none"> <li>Physician Office Visit: \$225/2 visits</li> <li>Initial Hospitalization: \$1600</li> <li>Ambulance (Air/Ground): \$2000/\$320</li> <li>Physical Therapy: \$160/ 6 visits</li> <li>Transportation (for non-local treatment): \$700/5 Trips</li> <li>*Wellness Benefit: \$105</li> </ul>	
Important Note	
<p>If you are not actively at work on the date your insurance or any increase in insurance is scheduled to take effect, the coverage or increase in coverage will take effect on the day you return to active work. This benefit summary provides a very brief description of USABLE Life's insurance products. This is not an insurance policy and only the actual provisions of an issued policy control. USABLE Life's policies set forth the rights and obligations of covered persons and USABLE Life. Please be aware that certain participation requirements, limitations, or exclusions may apply, and certain coverage may reduce or terminate due to age or lack of eligibility. If you enroll and are approved for coverage, you will be furnished with a certificate of insurance. Please read your insurance documents carefully.</p> <p>This benefit summary was generated by USABLE Life on 2/28/2022 at 3:43 PM and may not reflect changes recently submitted to USABLE Life.</p>	