



2024 LIFE EVENT CHANGE NON-UNION TRADE





We have designed this packet to help ease you into the transition of your life event and guide you through any applicable changes that you may need to make to your employee record or your current benefit elections. We believe that each employee contributes directly to the company's growth and success and want to make sure you have everything you need to succeed within the company.

VISION

To be the most valued Construction Services Provider in North America.

MISSION

Leading the Construction Services Industry by offering clients the highest level of Internal Expertise, Safety, a Fully Integrated Suite of Services and a Family Approach to Business.

VALUES

The Builder of Choice
The Employer of Choice
Highest Standards of Ethics, Quality, and Safety
Fair Balance of Responsibility, Profitability, and Citizenship.

A Qualifying Life Event, which is defined by the Federal Government, allows you the option to add, change, or cancel benefits. Below are the most common Qualifying Life Event in which this packet would be useful:

- **Marriage or Divorce**
- **Birth of a Child or Adoption**
- **Death of a Spouse or Dependent**

This packet is intended to give you information on your benefits and who to contact to make Qualifying Life Event changes. Your benefit changes must be submitted **within 30 days of the qualifying life event.**

Human Resources Department

[^HR@walshgroup.com](mailto:HR@walshgroup.com)

312-563-5905

312-492-0609 (Spanish)

- Last Name Change
- Tax Changes
- 401 K Beneficiary

Walsh Group Employee Benefit Resource Center (Bswift)

[Benefits.walshgroup.com](https://benefits.walshgroup.com)

844-727-2035

- Medical, Dental and Vision Benefits
- Dependent Verification Documentation
- Optional Life & AD&D Insurance
- Short Term-Term Disability
- Voluntary Benefits
 - Critical Illness Insurance
 - Hospital Indemnity Insurance
 - Cancer Advocate Plus
 - Accident Insurance
 - Universal Life Insurance

Risk Management / Insurance Department

riskmanagement@walshgroup.com

312-492-0620

- Identity Protection Plan

Human Resources Department

Last Name Change

When you are changing your name due to Marriage or Divorce, please provide items listed below in order to make the necessary changes to our system as well as your user account. The HR Department will notify the IT Department of your name change; however, you will need to contact IT directly to change your username and/or email address if you have one.

- Social security card with new last name
- You should have your Regional Human Resources Contact complete an **All About Me** eForm and attach a copy of your new Social Security Card.

Tax Form Changes

When going through a life event, what you claim on your tax forms should be reviewed. You can view your current Federal Tax withholding information by looking at the top on your current pay stub. If you find you need to make a change, please make the necessary changes on the Federal Tax W-4 Form included in this packet. Also, if applicable, please make changes to your state tax form which can be obtained from your regional office. Updated tax forms should be submitted to your Regional HR Contact who will submit them to the Corporate Human Resources Department.



401(k) Beneficiary

If eligible for the 401(k) plan, during this time, you may want to review your beneficiary for your 401k Savings Plan. If you are a married participant, you must select your spouse as sole Primary Beneficiary under this plan unless he/she consents in writing to waive that right. If you are married and you wish to name a beneficiary other than your spouse, your spouse's written consent must be received and witnessed by a representative of the Plan or a public notary. It is also recommended that you establish a primary and secondary beneficiary for your retirement account.

You can view and change your beneficiary information at any time by accessing your John Hancock Retirement Plan Services account. You can call (800) 294-3575 or log onto www.myplan.johnhancock.com

You have the ability to talk to a **Registered Investment Advisor "RIA"** at no additional charge. Our RIA is John Gerken, Wealth Management Advisers, and can be reached at (877) 907-3550 or jgerken@cfiemail.com

Walsh Group Employee Benefit Resource Center (Bswift)

Please contact the Walsh Group Employee Benefit Resource Center “Bswift” at (844) 727-2035, 8 a.m. to 8 p.m.(CT) to process your Qualified Life Event change to your benefit enrollments or log on to website at benefits.walshgroup.com.



Please be aware that you have **30 days from the date of your qualifying life event** to make any changes to your benefit elections. If you are adding any dependents to coverage, you will need to provide the dependent verification document.

Dependent Verification document: You must submit a copy of your marriage license for your legally married spouse or state/county/city domestic partnership declaration for domestic partner. To add a child, please submit a copy of birth certificate, adoption papers or other court document showing custody of said child.

Medical Insurance

Medical benefits are provided by BlueCross BlueShield of Illinois (BCBSIL) through a Preferred Provider Organization (PPO). With this plan, you may visit any provider you choose; however, you will realize the greatest cost-savings if you select a provider who is a member of the BCBSIL PPO network. Benefit booklets and identification cards will be provided to you after your coverage becomes effective.

PLAN LEVEL

Employee Only
Employee + 1
Employee + Family

PRE-TAX WEEKLY COST

\$23.06
\$41.00
\$56.37

PPO Benefits Highlight

Lifetime Comprehensive Major Medical Coverage (per individual)	Unlimited	
Deductible – common deductibles for PPO and Non-PPO. Family deductible is on an aggregate basis.	Individual: \$300 Employee + 1: \$600 Family: \$600	
PPO SERVICES	PPO**	Non-PPO***
OUT-OF-POCKET EXPENSE LIMITATION (Cover Charge Maximum): The amount of money Individuals pay toward covered hospital and medical expenses during any one calendar year, including the deductible. Excludes Medical Services Advisory (MSA) benefit reduction for non-compliance, charges more than the Scheduled Maximum Allowance (SMA) and charges for the outpatient prescription drug program.	Individual: \$2,500 Employee + 1: \$3,500 Family: \$5,000	Individual: \$2,500 Employee + 1: \$3,500 Family: \$5,000
Inpatient Hospital Services: Room allowance is based on the hospital's most common semi-private room rate. Pre-Admission Testing, Skilled Nursing Facilities, Hospice and Coordinated Home Health Care are also paid on the same basis.	80%	60%
Outpatient Diagnostic Tests: Includes X-rays, blood/lab tests, CAT scans, MRIs, annual routine and diagnostic mammograms and PSA tests performed at a hospital.	100%+	60%+
Outpatient Hospital/Facility Services: Including Radiation, Chemotherapy and Renal Dialysis.	80%	60%
Outpatient Surgical Services	80%	60%
ER Services: Emergency Medical and Emergency Accident	Covered after \$200 Emergency Room Copay	

PROFESSIONAL SERVICES

Physician Office Visits	80%	60%
Surgical Physician Services: Includes radiologist’s, anesthesiologist’s and surgeon’s charges.	80%	60%
Physician Diagnostic Services	100%+	60%+
Well Care Benefits: Wellness services covered at 100%. Services include physical exams, diagnostic tests and immunizations.	100%+	60%+
Muscle Manipulations	80%	60%
Physical, Speech and Occupational Therapy	80%	60%
MENTAL HEALTH AND CHEMICAL DEPENDENCY		
Inpatient and/or Outpatient	80%	60%
PRESCRIPTION DRUGS		
Retail 30-Day Supply		
Generic	\$10	\$10
Brand (Preferred)	\$30	\$30
Brand (Non-Preferred)	\$50	\$50
MAIL ORDER 90-Day Supply		
Generic	\$20	Not Covered
Brand (Preferred)	\$60	Not Covered
Brand (Non-Preferred)	\$100	Not Covered
OTHER COVERED SERVICES		
- Ambulance - Durable Medical Equipment and Prosthetics (Rental price covered up to purchase price) - Blood and blood components - Leg, arm, and neck braces; casts and splints; and surgical dressings - Private duty nursing - Temporomandibular Joint Dysfunction (TMJ) - Allergy shots - Oxygen (includes administration)	80%	
BASIC PROVISIONS		
PRE-EXISTING CONDITIONS WAITING PERIOD: Pre-Existing Conditions Waiting Period will not apply.		
DEPENDENT ELIGIBILITY: To age 26		
COORDINATION OF BENEFITS: This program coordinates benefits with other group plans.		
Note: Members may be “balance billed” from non-PPO providers. Payment is based on the eligible charge which may be less than the billed charge.		
+ Deductible does not apply.		
This document only highlights the general program. If there are any discrepancies between this document and the Plan Document, the Plan Document will control.		



Dental Insurance

The Company offers the Delta Dental PPO plus and the Delta Dental Premier plan to help you maintain your healthy smile. With this plan, you may visit any provider you choose; however, you will realize the greatest cost-savings if you select a provide who is a member of the Delta Dental network.

PLAN LEVEL

Employee Only
Employee + 1
Employee + Family

PRE-TAX WEEKLY COST

\$2.25
\$3.84
\$5.64

	PPO Network	Premier	Out-of-Network
Annual Deductible			
Individual	\$25	\$25	\$25
Individual + 1	\$75	\$75	\$75
Family	\$75	\$75	\$75
Preventative/Diagnostic Services Covered			
Routine Exams and Cleans (2 per year)	100%	100%	100%
Bitewing X-rays (2 per year)	100%	100%	100%
Full Mouth X-rays (every 3 years)	100%	100%	100%
Emergency Exams	100%	100%	100%
Basic Services			
Fillings	85%	85%	85%
Sealants	85%	85%	85%
IV Sedation	85%	85%	85%
Periodontics	85%	85%	85%
Endodontics	85%	85%	85%
Stainless Steel Crowns	85%	85%	85%
Oral Surgery and General Anesthesia	85%	85%	85%
Major Restorative Services			
Implants	50%	50%	50%
Crowns and onlays	50%	50%	50%
Full/Partial Dentures	50%	50%	50%
Denture Repair	50%	50%	50%
Fixed/Removable Bridges	50%	50%	50%
Bridge/Denture Repair	50%	50%	50%
Orthodontics			
Treatment for proper alignment of teeth	50%	50%	50%
Plan Annual Per Person Maximums			
	\$2000	\$2000	\$2000

*Orthodontia is a lifetime Maximum of \$2000 per person

Vision Insurance

Vision benefits are provided by UnitedHealthcare Vision. This can provide you and your dependents with comprehensive vision coverage, including an allowance for either glasses or contact lenses. Benefit information will be provided to you after your coverage becomes effective.

If you choose a provider from the UHC's vision network, you will receive a higher level of coverage. If you choose to visit a provider who is not a member of the UHC network, you will be required to pay the entire amount due and submit a claim for reimbursement.

PLAN LEVEL

Employee Only

Employee + 1

Employee + Family

PRE-TAX WEEKLY COST

\$0.98

\$1.71

\$2.45

	Frequency	In-Network	Out-of-Network
Exams			
Eye Exam	12 months	No Cost	up to \$40
Frames			
Frames <i>Up to 30% discount on balance after allowance is exhausted</i>	12 months	\$130 allowance	up to \$45
Lenses			
Single Vision	12 months	\$25 copay	up to \$40
Lined Bifocal	12 months	\$25 copay	up to \$60
Lined Trifocal	12 months	\$25 copay	up to \$80
Lenticular	12 months	\$25 copay	up to \$80
Contact Lenses (in lieu of eyeglasses)			
Elective	12 months	\$130 allowance	up to \$130
Medically Necessary	12 months	No Cost	up to \$210



Basic Term Life & AD&D Insurance

Basic Term Life & AD&D Insurance is provided to employees by The Hartford. Employees are provided a \$10,000 term life insurance policy after 90 days of continuous employment. This benefit is 100% paid by the company and eligible to those enrolled in the Walsh Group medical plan.

Disability Insurance

You have the option of purchasing voluntary disability income insurance. This policy can help protect your pay if you become ill or injured off the job. Benefits begin the 8th day of an illness or injury, and benefits would be paid at 60% of your gross weekly salary up to a maximum of \$1,300/week. Keep in mind, this plan does not provide benefits if you become injured or sick while on the job. The cost for this plan is fully paid by the employee.



Universal Life Insurance

Universal Life is a flexible premium insurance underwritten by TransAmerica Life Insurance Company. It is designed to help provide financial protection for an employee's family in the event of death.

The death benefit can be used for any purpose, such as final expenses, college tuition, living expenses, or as an inheritance for beneficiaries. It also provides a potential cash value that can be borrowed from when needed, as well as living benefits.

Rates for TransAmerica Benefit Insurance can be found in Bswift.

Accident Insurance

Accident insurance helps pay for unexpected healthcare expenses due to accidents that occur every day. Accident insurance provides benefits due to covered accidents for initial care, injuries, and follow care. Benefits are paid directly to you, in addition to any other coverage you have.

As an added incentive to staying well after coverage has been in place for 30 days, you will be provided an annual benefit of \$50 per calendar year for taking one of the eligible screenings/preventive measures that take place during your no cost preventive care exam.

Critical Illness Insurance

Critical Illness Insurance provides a cash benefit to members diagnosed with a covered condition such as cancer, stroke, or a heart attack. You may use the money to pay for hospital bills, household expenses, lost wages, and any other expenses. It is up to you to choose how the money will be spent.

Health screening tests can help diagnose a condition early or prevent an illness altogether. This benefit pays you \$50 after you go for an annual health screening test (after coverage is in force for 30 days).



Hospital Indemnity

Even with health insurance, a stay in the hospital can become costly quickly as out-of-pocket charges begin to add up. Hospital Indemnity Insurance can reduce the financial and emotional stress of a hospital stay by providing a lump sum cash benefit directly to you that can be used however you need, whether that's for coinsurance or childcare. And every year that you complete a qualified health screening, you're eligible for a \$50 Health screening benefit.

You may choose between a Low Plan and a High Plan

Example Benefits*	Low Plan	High Plan
Hospital Admission No maximum stays per plan year	\$500	\$1,000
Hospital Confinement Maximum 365 days per plan year	\$100	\$200
ICU Admission No maximum stays per plan year	\$1,000	\$2,000
ICU Confinement Maximum 365 days per plan year	\$200	\$400

Note: All daily inpatient stay benefits begin on Day 2 and count toward the plan year maximum. See summary plan documents for full coverage details.

*This is not a comprehensive list of covered benefits. Speak to a benefit counselor for a complete list of covered events. Limitations may apply.

Cancer Advocate Plus

Cancer Advocate Plus is a first-of-its-kind-genetics-based Cancer Insurance Program that customizes cancer care. More than advocacy – developed to help save lives. Cancer Advocate Plus (CAP) is a personal, precise, and proactive way for you to manage your health. CAP combines Financial Protection and Cancer Care, including Genetic Cancer Screening, to help you determine your risk for cancer and Pharmacogenomic Testing to determine your best treatment based on your own DNA.

Diagnosis and Recovery Payments = \$15,000*

- 1st Payment: \$5,000 upon diagnosis
- 2nd Payment: \$5,000 6 months after diagnosis
- 3rd Payment: \$5,000 12 months after diagnosis

*Spouse's payments are 50% of these amounts and coverage is only available for employees and spouses (coverage is not available for children).

RATES FOR CANCER ADVOCATE PLUS CAN BE FOUND IN BSWIFT

Insurance / Risk Management Department

Identity Protection

The Identity Protection Program is a fully sponsored benefit available at no charge to the employee. This benefit includes identity repair and restoration, identity theft monitoring, phone alerts, \$1M Identity theft insurance policy, lost wallet assistance, and credit monitoring.

To take advantage of IdentityForce ID, visit <http://myidentity.ezshield.com/identityforce> and provide the activation code IDFWALSH812019. Click “Get Started” to complete the activation process and access your Identity Protection Dashboard. Call Member Services at 888-439-7453 with any questions.

