



APRIL 1, 2025 - MARCH 31, 2026

# Employee Benefit Guide

Hogan & Associates Construction

PROVIDED BY:  
 MORETON & COMPANY

**HOGAN**  
CONSTRUCTION MANAGER • GENERAL CONTRACTOR



## TIME TO ENROLL IN BENEFITS

# Enrollment Dates & Reminders

Welcome to your benefits! Take a moment to read through this guide to see your offerings for the 2025–2026 plan year.

### Dates to Remember

- **Open Enrollment:** Open enrollment is your annual opportunity to enroll in or change your benefit elections. Once the enrollment period has ended, you may not add, change, or drop coverage unless you experience a qualifying event. The open enrollment period is: March 1 - 31, 2025.
- **New Hire Enrollment:** Welcome! If you are eligible for benefits, you have **30 days from your date of hire** to enroll in your benefit elections. Past that time period, you will need a qualifying event to make any changes.

### Have Questions?

We are happy to help answer your questions on coverage, enrolling, forms, or anything else related to your benefits. Reach out to Lantzen Toomer and we will work to resolve your question.

**Phone:** 801-951-7000

**Email:** [LToomer@hoganconstruction.com](mailto:LToomer@hoganconstruction.com)

*Note: This publication is only a partial summary of benefits and is provided for informational purposes only. It does not describe all elements of the summarized programs. For complete information regarding the benefits, plan provisions, limitations and exclusions, and for a description of claims procedures, refer to the formal benefit documents that will be provided to you after enrollment. In the event of a discrepancy or conflict between the information contained in this publication and the official benefit plan provisions, the official plan documents and insurance contracts will govern. Copies of these documents are available for your review from your Human Resources department. No rights shall accrue to you and/or your dependents because of any statement, error, or omission in this publication.*

WELCOME TO YOUR BENEFITS

# Benefits Overview & Important Contact Information

This guide provides an overview of your benefit options as an employee of Hogan & Associates Construction. We are committed to providing you affordable, quality benefits to help you have financial assistance for life's ups and downs.

Benefit	Name	Number	Website or Email
<b>Hogan &amp; Associates Construction</b> Human Resources	Lantzen Toomer, HR Recruiter Jared Morgan, Vice President, Safety and HR	801-951-7000	LToomer@hoganconstruction.com jmorgan@hoganconstruction.com
<b>Wellness Program</b>	Orriant	888-346-0990 801-266-0990	www.myorriant.com
<b>Medical</b> (Group #804624)	Aetna	Medical: 888-802-3862 Pharmacy: 800-238-6279	www.aetna.com
<b>Employee Assistance Program (EAP)</b>	Blomquist Hale	800-926-9619 801-262-9619	www.blomquisthale.com
<b>Reimbursement Account</b>	National Benefit Services	855-399-3035	www.nbsbenefits.com/ Email: service@nbsbenefits.com Mailing Address: P.O. Box 6980, West Jordan, Ut., 84084
<b>Dental</b> (Group #3860)	EMI Health	800-662-5850 801-262-7476	www.emihealth.com
<b>Vision</b> (Group #HOG01012025)	Samera Health	435-563-0613	www.samerahealth.com
<b>Life, AD&amp;D, &amp; Disability</b> (Group #984990 and 984991)	Unum	Life: 800-421-0344 Disability: 888-673-9940	www.unum.com
<b>401(k)</b>	NuVista Wealth	385-338-3131	marv.ellis@nuvistawealth.com
	Wasatch Wealth (Broker)	Marv Ellis Jr.: 801-295-7373	marv.ellis.jr@raymondjames.com
<b>Moreton &amp; Company:</b> Account Manager, Claims Assistance	Chelsea Chapman	801-746-8469 Toll Free: 800-594-8949	cchapman@moreton.com

## Digital Plan Documents & Carrier Materials

The benefits illustrated are in summary form only. They should not be construed as complete in and of themselves. For a complete description of benefits, coverages, limitations, and exclusions, consult your plan documents available from Human Resources or online: <https://online.flippingbook.com/view/21768787/>



# Guidelines & Important Notices

## Enrollment Frequently Asked Questions

<p><b>Why is open enrollment so important?</b></p>	<p>Open enrollment is your annual opportunity to enroll in or change your benefit elections. Once the enrollment period has ended, you may not add, change, or drop coverage unless you experience a qualifying event.</p>
<p><b>Who is eligible to enroll?</b></p>	<ul style="list-style-type: none"> <li>• Employees who work 30+ hours per week;</li> <li>• Employees' legally married spouse, domestic partner, and/or dependent(s) (dependents are generally children who are less than 26 years of age). See your Benefits Summary's definition of legally married spouse and/or dependent(s).</li> <li>• For benefit coverage criteria and additional information on domestic partnership coverage, please see your Human Resources department. Please note you may be required to provide a Domestic Partnership Affidavit to qualify for Domestic Partner Coverage. Domestic partnership coverage has certain tax implications.</li> </ul>
<p><b>When do benefits begin?</b></p>	<ul style="list-style-type: none"> <li>• Eligible employees can receive benefits either the first of the month following your hire date or the first of the month after 60 days depending on your benefit eligibility classification and the company's benefit policy (provided forms are properly submitted);</li> <li>• Employees hired after the plan year begins will select their coverage choices for the remainder of that plan year at the time of eligibility. All the necessary enrollment and change forms are available through the Human Resources department.</li> </ul>
<p><b>How do I make changes during the year?</b></p>	<p>Benefits that are paid for on a pre-tax basis through the cafeteria plan are subject to cafeteria plan IRS regulations, and elections cannot be revoked or changed during the plan year without a qualifying event. However, you must contact Human Resources to determine if your plan and circumstances allow such a change. If so, you must complete and submit changes through ADP, generally within 30 days.</p>
<p><b>What are possible qualifying events?</b></p> <p>All changes (other than adding a new child or new employee elections made within 30 days of the event) will be implemented prospectively, generally at the beginning of the month following the change notification.</p>	<ul style="list-style-type: none"> <li>• Marriage, divorce, or legal separation;</li> <li>• Change in number of dependents (e.g., Birth or adoption of a child);</li> <li>• Change in employment status of employee, spouse, or dependent that causes loss of eligibility;</li> <li>• Dependent ceases to satisfy eligibility requirements;</li> <li>• Change in residence that causes loss of eligibility;</li> <li>• Significant changes in company benefit plan(s), including cost change, significant coverage curtailment, and additional or significant improvement of company-offered benefits;</li> <li>• Change in coverage under another employer plan (including mandatory or optional change initiated by your spouse's employer or a change initiated by your spouse or domestic partner);</li> <li>• Loss of coverage from government plans/programs or educational institution;</li> <li>• COBRA qualifying event (termination/reduction of hours, employee death, divorce/legal separation, ceasing to be a dependent);</li> <li>• Judgments, Decrees, or Orders;</li> <li>• Medicare or Medicaid entitlement;</li> <li>• FMLA leave of absence;</li> <li>• Loss or gain of CHIP or Medicaid subsidy eligibility (60 Days).</li> </ul>
<p><b>How long do I have after a qualifying event to make changes?</b></p>	<p>You generally have 30 days after the event to notify Human Resources of a change in status. <i>Note that all changes (other than the addition of a new baby or new employee elections if made within 30 days of the event) will be implemented prospectively, generally at the beginning of the month following the change notification.</i></p>

## Social Security Numbers

You must provide a valid Social Security Number for each person to be covered by any medical plan sponsored by your employer (yourself, your spouse, and all dependent children).

## Medicare Part D

If you have Medicare or will become eligible for Medicare in the next 12 months, federal law gives you more choices about your prescription drug coverage. See Human Resources for more information.

## HIPAA Privacy Notice

The Health Insurance Portability and Accountability Act (HIPAA) requires employers to adhere to strict privacy guidelines and establishes employees' rights with regard to their personal health information. If you have any questions regarding HIPAA, please speak with your Human Resources.

## IRS Regulations

**Failure to meet IRS deadlines will affect your insurance coverage!** IRS regulations govern how and when an employee may make cafeteria plan elections and changes to those elections.

These rules require that employers enforce firm deadlines with respect to employee benefit enrollment and related cafeteria plan elections. This means that changes made after open enrollment ends cannot be accepted. Furthermore, if you experience a qualifying event allowing you to add, drop, or modify your coverage and related cafeteria plan election mid-year, HR must be timely notified of such event. The required enrollment generally must be completed within 30 days of such event, or you cannot make the change. Note that all changes (other than the addition of a new child or new employee elections if made within 30 days of the event) will be implemented prospectively, generally at the beginning of the month following the change notification.

In addition, please be aware that with the exception of the birth, adoption, or placement for adoption of a child, any plan or a plan election changes can only be implemented prospectively, meaning on the first paycheck or period of coverage following HR's receipt of the form or online change. Therefore, if you are making a change based on a qualifying event other than a new child, and you want changes implemented as of the date of the event, you must inform HR of the change in advance.

***If you do not enroll on time, you will not receive coverage or be able to change your elections mid-year unless you have an IRS qualifying event.***

# Definitions & Glossary of Key Insurance Terms

## Co-pay

Typically refers to a fixed dollar amount a member must pay for a particular service (such as a physician visit or ER visit).

## Coinsurance

Typically refers to a member's share of covered costs after any deductible has been satisfied.

## Deductible

Amount that must be paid by the member before an insurance carrier will pay a claim; benefits offered after deductible are indicated with AD.

## Out-of-Pocket Maximum (OOPM)

The maximum amount members pay for covered network essential health benefit expenses during the benefit year, including co-pays, coinsurance, and deductibles.

## Network (In Network)

Providers who have agreed to accept contracted rates from an insurance carrier.

## Non-Network (Out-of-Network)

Any non-contracted providers. The services from these providers are subject to balance billing, meaning members can be billed for the difference between the insurance carrier's fee schedule and the billed charges.

## Preferred Provider Organization (PPO)

This type of plan utilizes both network and non-network benefits.

## ADDITIONAL RESOURCES

# Wellness Program

The Hogan & Associates Construction Wellness Program is designed to create an environment that promotes healthy lifestyles, decreases the risk of disease, and enhances the quality of life. New hire employees must complete their biometric assessment within 30 days of their insurance eligibility date. Do the following to sign up for the wellness program:

### 1. Assessment

- **Option A:**

You can schedule a biometric assessment at our main office by calling Orriant at 888-346-0990 or chatting live with an agent at [www.myorriant.com](http://www.myorriant.com). Please arrive to your assessment hydrated.

- **Option B:**

Visit a certified health professional to complete an "independent assessment form" (see attached). A downloadable version is available in your wellness portal under the assessment tab. Send the completed independent assessment form to Orriant within 30 days of your insurance eligibility date. You may fax, e-mail, or mail the form to Orriant. Contact Orriant at [info@orriant.com](mailto:info@orriant.com) or 888-346-0990 with any questions.

- **Option C:**

Schedule and attend your biometric screening through LABCORP. Refer to carrier materials for directions.

### 2. Health Standard Check

For those whose Orriant Health Assessment scores do not meet the established Health Standard and have not previously worked with an Orriant Health Coach<sup>sm</sup>, the following additional enrollment requirements include:

- At your assessment, you will be scheduled for an Orriant Health Plan - an initial phone conversation with your coach. **This must be completed within 30 days of you insurance eligibility date.**
- Compliance will be based on action plans created between the coach and the participant.
- You and your coach will schedule for follow-up contact.

### 3. Complete Snapshot

Access your online Orriant Wellness Portal after your Orriant Health Assessment at [www.MyOrriant.com](http://www.MyOrriant.com) and complete the Orriant Snapshot. Must be completed within 30 days of your insurance eligibility date. Paper copies of the Orriant Snapshot are available upon request at your Orriant Health Assessment.

### 4. Incentives

The greatest benefit of participating is your own personal health and well being. Benefited employees and spouses are invited to participate. **Employees and Spouses who choose not to participate will each pay 20% more per month on their health insurance premiums.** In order to qualify for the 100% employer paid health insurance, employees and spouse, if applicable, must complete 30 points of qualified health activity each quarter and log those points in their Wellness Portal at [www.MyOrriant.com](http://www.MyOrriant.com).

- The incentive takes effect assuming the participants have met the steps of "Enrollment" above.
- The incentive will discontinue for the remainder of the quarter for those who do not complete all "Enrollment" steps and/or requirements of "Continued Participation."
- Re-enrollment in the wellness program can only occur at the beginning of the each quarter.
- Individuals questioning their ineligibility in the wellness program are welcome to request an appeal form from Orriant. Please see carrier materials.

Please read the full notice regarding Hogan Construction Wellness Program at [www.MyOrriant.com](http://www.MyOrriant.com).

Website: [www.MyOrriant.com](http://www.MyOrriant.com)

Email: [info@orriant.com](mailto:info@orriant.com)

Phone: 888-346-0990

# Medical

Hogan & Associates Construction offers the following medical plans through **Aetna** for the 2025–2026 plan year. A brief summary of the in-network plan details and coverage amounts for these plans are shown below.

	\$500 Base Plan	\$250 Buy Up Plan
<b>In-Network Plan Details</b>		
<b>Deductible</b> (PCY)	\$500 Individual / \$1,000 Family	\$250 Individual / \$500 Family
<b>Out-of-Pocket Maximum</b> (OOPM)	\$2,000 Individual / \$4,000 Family	\$1,500 Individual / \$3,000 Family
<b>Coinsurance</b> (Carrier Pays / Member Pays)	80% / 20% AD	
<b>In-Network Services</b>		
<b>Preventive Care</b> **	Covered 100%	
<b>Office Visit</b> (Primary Care / Specialist)	\$20 Co-pay / \$40 Co-pay	\$10 Co-pay / \$30 Co-pay
<b>Mental Health</b> (Outpatient - Office Visit / Inpatient & Outpatient Services)	\$20 Co-pay / 20% AD	\$10 Co-pay / 20% AD
<b>Chiropractic</b> (10 Visits PCY)	\$20 Co-pay	\$10 Co-pay
<b>Hospital</b> (Inpatient & Outpatient)	80 / 20 AD	
<b>Diagnostic Imaging &amp; Lab</b> (Minor / Major)	Covered 100% / \$15 Co-pay	
<b>Urgent Care</b>	\$30 Co-pay	\$25 Co-pay
<b>Emergency Services</b>	\$250 Co-pay AD	\$200 Co-pay AD
<b>In-Network Prescriptions</b>		
	Tier 1 / Tier 2 / Tier 3 / Tier 4	Tier 1 / Tier 2 / Tier 3 / Tier 4
<b>Deductible</b> (PCY)	\$100 Individual / \$300 Family	NA
<b>Out-of-Pocket Maximum</b> (OOPM)	\$3,200 Individual / \$9,600 Family	\$3,200 Individual / \$9,600 Family
<b>Pharmacy</b> (Generic Required)	\$10 APD / 20% APD / 35% APD / 20% APD	\$5 / 15% / 30% / 20%
<b>Maintenance or Mail Order</b> (Generic Required)	\$10 APD / 20% APD / 35% APD / NA	\$5 / 15% / 30% / NA
<b>Out-of-Network Plan Details *</b>		
<b>Deductible</b> (PCY)	\$500 Individual / \$1,000 Family	\$250 Individual / \$500 Family
<b>Out-of-Pocket Maximum</b> (OOPM)	\$2,000 Individual / \$4,000 Family	\$1,500 Individual / \$3,000 Family
<b>Coinsurance</b> (Carrier Pays / Member Pays)	60% / 40% AD	

**Deductible:** If any family member reaches the individual deductible then the deductible is satisfied for that family member. If any combination of family members reach the family deductible, then the deductible is satisfied for the entire family.

**Out-of-Pocket Maximum (OOPM):** If any family member reaches the individual out-of-pocket maximum then the out-of-pocket maximum is satisfied for that family member. If any combination of family members reach the family out-of-pocket maximum, then the out-of-pocket maximum is satisfied for the entire family.

**AD:** After Deductible

**PCY:** Per Calendar Year

**APD:** After Pharmacy Deductible

\* Member will be responsible for amounts billed by non-participating providers in excess of eligible medical expense amount.

\*\* Please refer to your provided Aetna materials for a full list of covered preventive services and limitations.

Please Note: Some benefits require pre-authorization and/or limitations may apply. Please refer to your provided Aetna materials for additional information.

The table above illustrates your in-network benefits in summary only. For a complete description of benefits, coverages, limitations, and exclusions, consult your plan documents available from Human Resources or at [www.aetna.com](http://www.aetna.com).



## TAX SAVINGS ACCOUNTS

# Health Savings Account

A Health Savings Account (HSA) is a tax-advantaged account that can be used to pay for eligible healthcare expenses that are not covered by an insurance plan, including deductibles and coinsurance.

### Contribution Limits for 2025

You can fund your HSA with pre-tax dollars. In addition, your employer makes a contribution to your HSA as shown below. The IRS limits how much you can contribute to this account each year, and employer contributions do go towards this maximum.

Contribution Amounts	Individual	Two-Party or Family	
2025 IRS Maximum Contribution	\$4,300	\$8,550	
Age 55+	The IRS allows you to make "catch-up" contributions up to an additional \$1,000 in 2025.		

Employer Contribution	Individual	Two-Party	Family
Annual Contribution	\$1,500	\$2,250	\$3,000

### How a Health Savings Account Works

When you have an eligible healthcare expense, you can use tax-free dollars from your HSA account to pay for it. Here is how the process may typically work for you to apply your HSA funds.

#### Step 1



You and your employer fund an HSA account throughout the year.

#### Step 2



You receive health services and get a bill (following insurance processing).

#### Step 3



After comparing your bill with the carrier Explanation of Benefits (EOB), you can pay using HSA funds via a debit card, electronic transfer or check.

### Reasons to Elect a Health Savings Account

An HSA can be an effective financial tool. When used correctly, it comes with multiple advantages:

#### Tax Benefits

- HSA contributions are excluded from federal income tax.
- Interest earnings may be tax free.
- Withdrawals for eligible expenses are exempt from federal income tax.

#### It's Your Account

- This is your account; you take it with you.
- If you leave your employer, you can keep your current HSA account or transfer your funds to an HSA with your new employer (or another qualifying account) within 60 days.

#### Long-Term Planning

- Save for future medical expenses, including retiree medical
- Funds roll over from year to year, so your account can grow if you do not use the funds in the year they were contributed.

### HSA vendor contact information:

#### National Benefit Services

- By Phone: 800-274-0503
- By Website: [www.my.nbsbenefits.com](http://www.my.nbsbenefits.com)

Frequently Asked Questions: Health Savings Accounts

<p><b>Who is eligible for a Health Savings Account?</b></p>	<p>Anyone who satisfies all of the following:</p> <ul style="list-style-type: none"> <li>• Covered by a Qualified High Deductible Health Plan (QHDHP);</li> <li>• Not covered under another health plan;</li> <li>• Not enrolled in Medicare A or Medicare B benefits; and,</li> <li>• Not eligible to be claimed on another person's tax return.</li> </ul>
<p><b>What is the difference between an HSA and a Flexible Spending Account (FSA)?</b></p>	<p>HSA funds can accumulate and roll over from year to year. In addition, FSA contribution limits are typically lower than an HSA.</p> <p>Also, <b>you must be enrolled in a qualified high-deductible health plan (QHDHP)</b> and have no disqualifying coverage to qualify for an HSA. You cannot contribute to an HSA while enrolled on a traditional plan.</p>
<p><b>When do I use my HSA?</b></p>	<p>After visiting a physician, facility, or pharmacy, a claim will be sent to your insurance to be processed. If there is an outstanding balance that you are responsible for covering, <b>you can use your HSA to pay for it.</b> You have three options:</p> <ul style="list-style-type: none"> <li>• Use your HSA debit card or HSA check to pay for any out-of-pocket expenses.</li> <li>• Pay for it using your personal funds, and receive reimbursement at a later date.</li> <li>• Save your HSA dollars for future medical expenses.</li> </ul> <p>You should always ask that your claim be submitted to the health plan before you use funds from your HSA to ensure that provider discounts are applied. Also, remember to keep all medical receipts and Explanations of Benefits (EOBs) to support your personal tax record. You should keep these records for at least seven years.</p>
<p><b>Can I use my HSA for non-eligible expenses?</b></p>	<p>Money withdrawn from an HSA account to reimburse non-eligible expenses is taxable income and is subject to a tax penalty. If the account holder is over age 65 OR disabled, the amount (if for a non-eligible expense) is still considered taxable income; however, the tax penalty IS waived.</p>
<p><b>When can I start using my HSA funds?</b></p>	<p>You can use your HSA dollars for <b>any qualifying expense</b> incurred after your HSA account activation and once contributions have been made.</p>
<p><b>What if I am a new hire or have a special enrollment and enroll in an HSA in the middle of a year?</b></p>	<p>So long as you enroll by December 1, you may still contribute the maximum amount allowed for the calendar year (see the chart on the previous page). However, the IRS requires you to participate in the QHDHP during a subsequent testing period (generally through the end of the following year). Failure to do so will result in adverse tax consequences.</p>
<p><b>Can my HSA dollars be used for retirement health care costs?</b></p>	<p>Yes, for expenses eligible for reimbursement and Medicare and other health coverage premiums after age 65.</p>
<p><b>Can I use the money in my HSA to pay for my dependents' medical expenses?</b></p>	<p>Yes, you can use the money in the account to pay for medical, dental, and vision expenses for yourself, your spouse, or your dependent children. You can pay for expenses for them even if they are not enrolled on your QHDHP.</p>

## ADDITIONAL RESOURCES

# Rx Discount Services

With this free service, provided by **Aetna Member Rx Plan**, you can save on your prescription costs.

### How it Works

Log in to your member website at [www.aetna.com](http://www.aetna.com) to compare the costs of generic and brand name drugs, to estimate the cost of a drug from your local pharmacy versus the cost of the same drug from our mail-order pharmacy, and see how much you can SAVE!

If a generic is available and you choose to get the brand instead, you'll pay the difference in cost between the brand and the generic and the applicable plan co-pay. This could result in a significant increase in your out-of-pocket expenses. If you want to try a generic version, talk to your doctor about changing your prescription. If you can't tolerate the generic or have had an adverse reaction, talk to your doctor about requesting an exception.

### Pharmacy Customer Service:

- By Phone: 888-792-3862
- By Website: [www.aetna.com](http://www.aetna.com)

---

## ADDITIONAL RESOURCES

# \$0 Rx Co-pay Program

Save on name-brand maintenance & specialty medications through ScriptSourcing.

### How to save with ScriptSourcing:

- Employees and their dependents pay a \$0 co-pay for their medication(s).
- ScriptSourcing saves the health plan money and lowers premiums and deductibles.
- Prescriptions are shipped directly to the member.

### How to Enroll:

1. Search for your medication: Use the Med-Finder tool or call directly and ask for a member advocate.
2. Submit Your Enrollment Forms: A member advocate will walk you through the entire enrollment process.
3. \$0 Co-pays: Once enrolled you receive your medication(s) at no cost.

### ScriptSourcing Customer Service:

- By Phone: 410-902-8811
- By Website: [www.scriptsourcing.com/med-finder](http://www.scriptsourcing.com/med-finder)

## ADDITIONAL RESOURCES

# Imaging Center MRIs

You can elect where to have an MRI from multiple in-network facilities. You have a choice.

### Save Money on Your Next MRI

The Hogan & Associates Construction medical plan benefit can dramatically help with the cost of an MRI provided certain conditions are met.

It is important to note if you get your MRI completed at a hospital or other facility not considered a stand-alone Imaging Center, your cost will be 20% more after the deductible has been met.

Please confirm the in-network status of a provider with Aetna prior to visiting a facility/provider. Standard pre-authorizations will apply. Refer to your medical plan documents for details or call Aetna at 877-204-9186.

Additional imaging reading costs may apply through the Stand-alone Imaging Center or through your Primary Care Physician.

---

## ADDITIONAL RESOURCES

# Teladoc Telephone Doctor Access with Aetna

Whether you're at home, traveling for work, or just need a convenient way to see a doctor, you can get care anytime and anywhere. Through this service, doctors are able to treat a wide range of non-emergency medical conditions.

### Get Care Anytime From Anywhere

Talk to a doctor anytime, anywhere by phone or by video. Set up your account today to talk to a U.S.- licensed physician for non-emergency medical conditions like the flu, sinus infections, bronchitis and much more.

**Create an Account** – use your phone, the app or the website to create an account and complete your medical history.

**Talk to a doctor** – request a time and a Teladoc doctor will contact you.

**Feel better** – the doctor will diagnose symptoms and send a prescription if necessary.

### How to talk to a doctor:

Visit [Teladoc.com/Aetna](https://www.teladoc.com/Aetna)

2. Call 1-855-TELADOC (835-2362)

3. Download the app from the Apple App Store or Google Play

# Employee Assistance Program

Life is full of ups and downs, and sometimes the challenges we face can feel overwhelming. During these difficult times, seeking the guidance of a licensed professional can make all the difference. That's where our Employee Assistance Program (EAP) through **Blomquist Hale** can help.

## When do you use an EAP?

You can use EAP resources for a variety of crises and life stress. Here are some examples of reasons to reach out:

- Life Changes
- Birth/Adoption
- Child Care
- Parenting
- Family Conflicts
- Stress
- Depression
- Job Pressures
- Legal Trouble
- Finances
- Elder Care
- Relationships
- Grief
- Aging
- Drugs/Alcohol
- Eating Disorders
- Panic Attacks
- Addictions

*If it's stressing you out, it's worth a call.*

Benefit Details	
<b>Who has access to this EAP?</b>	The EAP is available to you and anyone living in your household.
<b>What is included in this program?</b>	The service includes unlimited in-person counseling sessions per occurrence and unlimited number of phone calls. Available 24 Hours a Day, 7 Days a Week, 365 Days a Year.
<b>Are the appointments confidential?</b>	Yes, all discussions between you and the EAP counselor are confidential. Personal information is never shared with anyone (including Hogan & Associates Construction) at any time without your direct knowledge and approval. Exceptions are made only in cases governed by law to protect individuals threatened by violence.
<b>Do you have to be in crisis to call?</b>	No, the EAP is your resource for everything from the everyday to the unexpected. At times, we can all use help with a personal problem or issue that is interfering with our life or work. Most people experience personal or family challenges in the course of their lives. Our professional counselors are available to discuss the issues you face in your life.
<b>Who pays for this coverage?</b>	100% paid by Hogan & Associates Construction for all employees. All EAP services are free to you with no co-pay or deductible required.

## How to Access This Benefit

Setting up an appointment is as simple as calling the office or requesting an appointment online. You will be offered an appointment time, generally within a couple of working days of your initial call. Crisis cases are seen the same day, generally within two hours. No paperwork or approval is needed and there is no charge.

Seeking help early minimizes the chances of problems escalating and requiring more extensive services. Often, a few visits with a counselor are all you need to gain perspective and regain a sense of control over your life.

- **By Phone:** 800-926-9619 or 801-262-9619
- **By Website:** [www.blomquisthale.com](http://www.blomquisthale.com)

# Health Reimbursement Arrangement (HRA)

## The Health Reimbursement Arrangement (HRA)

Hogan & Associates Construction employees who are enrolled in the \$250 Buy-up or \$500 Base Health Insurance Plans offered by the company, can get reimbursed up to \$100 per family per year toward amounts that you have paid toward your prescription drug deductible.

Employees who elect the High Deductible Health Plan (HDHP) medical plan and Health Savings Account (HSA) option will not be eligible to submit for reimbursement through the HRA.

## To receive reimbursement

Verify your expenses by saving your receipts and submit them together with the Rx voucher to:

Please refer to voucher on page 24.

Hogan & Associates Construction

Attn: Laurie Orchard

Email: [lorchard@hoganconstruction.com](mailto:lorchard@hoganconstruction.com)

Fax: 801-951-7100

Mailing address: 940 N 1250 W Centerville, UT 84014

For questions, contact Laurie at: 801-951-7000

# Reimbursement Accounts

Reimbursement accounts enable you to pay certain qualified expenses using tax-free dollars. These accounts can save you 10–30% or more, depending on your personal tax rate and contribution amount.

## Types of Reimbursement Accounts & Contribution Limits

Depending on your plan design and employer, the following accounts may be available to you. During annual enrollment, you decide how much you want to deposit into your reimbursement account(s). That amount is deducted evenly during the plan year from your paycheck. The IRS limits how much you can contribute to these accounts each year.

Flexible Spending Account (FSA)	Contribution Limit
This account allows you to set aside money in pretax dollars to pay most out-of-pocket medical, dental, or vision care expenses ( <i>Note: You cannot contribute to an FSA and HSA in the same plan year.</i> )	\$3,300
Dependent Care Assistance Plan (DCAP)	
This allows you to set aside tax-free income to pay for qualified dependent care expenses, such as daycare. You must meet the following criteria in order to set up this account: <ul style="list-style-type: none"> <li>• The DCAP expense is incurred to allow both you (and, if you are married, your spouse, unless your spouse is disabled or a full-time student) to work.</li> </ul> Qualified dependents include children under 13 and/or dependents who are physically or mentally handicapped. If your spouse is unemployed or doing volunteer work, you cannot set up a DCAP account.	<p><b>Single:</b> the lesser of your earned income or \$5,000</p> <p><b>Married:</b> the lowest of:</p> <ul style="list-style-type: none"> <li>• Your (or your spouse's) earned income</li> <li>• \$5,000 if filing jointly, or \$2,500 if filing separately</li> </ul>

## Important Information

### Eligibility

Your eligibility to participate in the account(s) is the same as your insurance eligibility date based on the benefits policy (first of the month after date of hire or first of the month after 60 days). Expenses are for services received during the calendar plan year, and expenses are not covered by any health care plan in which you are enrolled.

### Rollover Option

If you do not use all the pre-tax dollars you deposited in your FSA account during the plan year, **you may roll-over up to \$660** into the next plan year. (The roll-over amount does not count toward the \$3,300 yearly maximum FSA contribution limit.) Otherwise, you will forfeit any balance in the account(s) at the end of the plan year.

**Your DCAP account does not roll over.** Any remaining unused balance in either account at the end of the plan year will be forfeited. You have 90 days after the plan year ends to submit claims for expenses incurred during that plan year.

### Submit Claims for Reimbursements

To claim reimbursements, fill out a claim form and attach any supporting information. For healthcare, this will include receipts showing the amount you paid and the date(s) on which you or a dependent received services. For dependent care, this may include any contracts, letters, or receipts. You may send this information to National Benefit Services via email, fax, or standard mail.

- Email: [service@nbsbenefits.com](mailto:service@nbsbenefits.com)
- Fax: 800-478-1528 / 801-355-0928
- Mailing Address: P.O. Box 6980, West Jordan, Utah, 84084

# Dental

Hogan & Associates Construction offers the following dental plans through **EMI Health** for the 2025–2026 plan year. A brief summary of the in-network plan details and coverage amounts for this plan is shown below.

## Choice Indemnity Plan:

In-Network Plan Details	Advantage Plus Network	Premier Network
<b>Deductible</b> (PCY)	\$50 Individual / \$150 Family	
<b>Annual Maximum</b>	\$1,000 Per Individual	
<b>Preventive &amp; Diagnostic Services</b> Exams, Cleanings, Fluoride, X-Rays	Covered 100%	
<b>Basic Services</b> Fillings, Non-Surgical Extractions	80 / 20 AD	
<b>Major Services</b> Bridges, Crowns, Oral Surgery, Implants	50 / 50 AD	
<b>Endodontics &amp; Periodontics Services</b>	Covered Under Basic Services	
<b>Orthodontics Lifetime Maximum</b>	\$1,000 Per Individual	
<b>Orthodontics</b> All Members	50 / 50	
Out-of-Network Plan Details *		
<b>Deductible</b> (PCY)	\$50 Individual / \$150 Family	
<b>Annual Maximum</b>	\$1,000 Per Individual	
<b>Out-of-Network Services</b>	Coverage amounts vary for out-of-network services, please refer to the carrier's materials for specific details.	

**AD:** After Deductible

**PCY:** Per Calendar Year

\* Member will be responsible for amounts billed by non-participating providers in excess of eligible dental expense amount.

The table above illustrates your in-network benefits in summary only. For a complete description of benefits, coverages, limitations, and exclusions, consult your plan documents available from Human Resources or at [www.emihealth.com](http://www.emihealth.com).

# Vision

Hogan & Associates Construction offers the following vision plans through **Samera Health** for the 2025–2026 plan year. A brief summary of the in-network plan details and coverage amounts for these plans are shown below.

In-Network Plan Details	E100 Basic Plan: Reimbursement Network	E120 Premier Plan: Reimbursement Network
<b>Eye Exam</b> (Eyeglass / Contact Lenses)	Once Every 12 Months Up to \$40 Allowance	Once Every 12 Months Up to \$45 Allowance
<b>Frames</b> Allowance Based on Retail Pricing	Once Every 12 Months Up to \$100 Allowance	Once Every 12 Months Up to \$120 Allowance
<b>Lenses</b> Single Vision, Bifocal, Trifocal, Standard Progressive, Premium Progressive	Once Every 12 Months Up to \$60 Allowance (For One Pair of Lens)	Once Every 12 Months Up to \$70 Allowance (For One Pair of Lens)
<b>Lens Options</b> Tint (Solid or Gradient), UV Coating, Standard Scratch Resistance, Standard Polycarbonate, Standard Anti-Reflective, Other Add-ons and Services	Once Every 12 Months Up to \$50 Allowance (Combined Lens Option Benefit)	Once Every 12 Months Up to \$100 Allowance (Combined Lens Option Benefit)
<b>Contact Lenses</b> (In Lieu of Glasses) Conventional, Disposable, & Medically Necessary	Once Every 12 Months Up to \$100 Allowance	Once Every 12 Months Up to \$120 Allowance
<b>LASIK or PRK</b>	Up to \$1,200 Allowance	Up to \$1,200 Allowance
<b>Out-of-Network Plan Details</b>		
<b>Out-of-Network Services</b>	Some out-of-network provider services may qualify for reimbursement. Please refer to the carrier's materials for specific details.	

This is a reimbursement plan. Use any provider.

For a complete description of benefits, limitations, and exclusions, consult your benefits summary, available from Human Resources.

For Reimbursement:

Locate a reimbursement form at [www.samerahealth.com/claim-reimbursement](http://www.samerahealth.com/claim-reimbursement), complete and send in along with your itemized receipt to:

Samera Health  
PO Box 126, Smithfield, UT 84335

Fax: 435-563-4035

Or scan and e-mail the claim to: [vision@samerahealth.com](mailto:vision@samerahealth.com)

Or submit reimbursement through the Samera Health App.  
Download via the App Store or Google Play.

Members may use ANY provider and receive the benefits stated above by submitting an itemized receipt.

Members may also access Cache Premier Vision to find providers who will offer a discount and submit a claim on the member's behalf.

You may locate Cache Premier Vision providers at [www.samerahealth.com/find-care](http://www.samerahealth.com/find-care)

ANCILLARY BENEFITS

# Life and AD&D

Hogan & Associates Construction offers Basic Life and Accidental Death & Dismemberment coverage for all benefit-eligible employees, as well as voluntary life and AD&D plans to supplement the basic coverage. These plans are offered through **Unum**. A brief summary of the plan details and coverage amounts for these plans are shown below.

## Basic Life and AD&D – 100% Company Paid

Basic Life and Accidental Death & Dismemberment (AD&D) insurance is a crucial part of any financial plan. A life insurance policy could help cover costs like medical, funeral, and cost of living expenses if someone passes away unexpectedly. The monthly premium for this benefit is covered 100% by Hogan & Associates Construction.

Each eligible employee can receive basic life insurance for themselves. Basic Life and AD&D benefits reduce to 65% at the insured's age 65, to 50% at age 70, to 35% at age 75, and terminate at retirement. Basic term life insurance includes a waiver of premium coverage which does not apply to any AD&D benefits.

Employee Basic Life and AD&D Plan Details	
Life Insurance	\$10,000
Accidental Death & Dismemberment	\$10,000
Seatbelt Benefit (Seatbelt benefits are paid for a death resulting from an auto accident while properly wearing a seatbelt.)	10% of Principal Sum, up to \$25,000
Airbag Benefit	5% of Principal Sum, up to \$5,000

## Voluntary Supplemental Life and AD&D – 100% Employee Paid

Your basic life insurance amount may not be enough to cover all that you need it to. You have the option to purchase additional life and Accidental Death & Dismemberment (AD&D) coverage for you, your spouse, and dependent children. Employee must enroll in voluntary supplemental life in order to enroll spouse or dependents in this coverage. This coverage is in addition to the company-provided amounts and the premiums are 100% employee paid through payroll deduction.

Voluntary Supplemental Life and AD&D Plan Details	
Who is eligible for this coverage?	Coverage is available to you and your eligible dependents covered under the basic group term life insurance provided by Hogan & Associates Construction.
What is the coverage amount?	<p><b>Employee:</b> 5x Annual Salary Up to \$500,000 (in increments of \$10,000)</p> <p><b>Spouse:</b> Up to \$500,000 (in increments of \$5,000). <i>Note: Spouse coverage is up to 100% of employee coverage.</i></p> <p><b>Unmarried Dependent Child(ren) Up to age 26:</b> \$10,000</p>
What is the guaranteed issue amount?	<p>This is the maximum you can purchase when you are first enrolling as a new hire without filling out a health assessment or Evidence of Insurability Form (EOI). If you wait to purchase additional coverage, or if you want to purchase above the guaranteed issue amount, you will likely need to fill out an EOI form and wait for approval from the carrier. For this plan, the guaranteed issue amounts are:</p> <p><b>Employee:</b> \$150,000</p> <p><b>Spouse:</b> \$50,000</p> <p><b>Unmarried Dependent Child(ren) 15 Days to Age 26:</b> \$10,000</p>

All late entrant applicants will need to complete a personal health application. All supplemental insurance amounts can be purchased at any time and are subject to evidence of insurability. Benefits will reduce to 65% at the insured's age 65, to 50% at age 70, to 35% at age 75, and terminate at retirement. Spousal coverage will terminate when employee turns age 70. Supplemental life offers a right of conversion. **Rates for this benefit are based on age (spouse rates are based on the employee's age band). Please see your enrollment platform to find a premium that's specific to you.**

ANCILLARY BENEFITS

# Disability

Disability plans offer paycheck protection by replacing a portion of your income during your time off work due to an illness or injury. Hogan & Associates Construction offers the following disability plans through **Unum** for the 2025-2026 plan year.

## Short-Term Disability - 100% Employee Paid

Short-Term Disability (STD) insurance replaces a percentage of your income on a weekly basis in the event that you are unable to work due to an accident or illness.

Plan Details	
Weekly Benefit	60% of your weekly salary up to \$2,000.
Maximum Benefit Duration	11 Weeks
Elimination Period	14 Days (Injury Or Illness)
Definition of Earnings	Base Salary Only (Overtime, bonuses, and commissions are excluded.)
How does this apply to maternity?	6 weeks or 8 weeks for c-section.
Pre-Existing Condition Restrictions	3 Months Look-back / 12 Months On Plan

Please see your enrollment platform to find a premium that's specific to you.

## Long-Term Disability - 100% Employee Paid

Long-Term Disability (LTD) insurance replaces a percentage of your income on a monthly basis in the event that you are unable to work due to an accident or illness.

Plan Details	
Monthly Benefit	60% of your monthly salary up to \$8,000.
Maximum Benefit Duration	Social Security Normal Retirement Age (SSNRA)
Elimination Period	90 Days (Injury Or Illness)
Definition of Disability	<ul style="list-style-type: none"> <li>You are limited from performing the material and substantial duties of your regular occupation due to sickness or injury and;</li> <li>You have a 20% or more loss in your indexed monthly earnings due to the same sickness or injury</li> </ul>
Mental, Nervous, or Substance Abuse	24 Months
Definition of Earnings	Base Salary Only (Overtime, bonuses, and commissions are excluded.)
Pre-Existing Condition Restrictions	6 Months Look-back / 12 Months On Plan

Please see your enrollment platform to find a premium that's specific to you.

## Important Terms to Know

### Elimination Period:

An elimination period works a little bit like the deductible on your medical plan. Once you're considered disabled, you have to continue to meet that definition for the full elimination period before the plan begins to pay.

### Pre-existing Condition:

Places some restrictions on your disability plan. If you've received treatment (including taking prescription medication) for any condition within the plan's look-back period, it's considered a pre-existing condition.

# Retirement Benefits: 401(k)

Our 401(k) Plan is a great way to save money for your retirement years. The plan allows you to contribute a dollar amount or a percentage of your annual earnings. Contributions can be pre-tax, post-tax, or both. Hogan & Associates Construction, upon meeting the 401(k) requirements, will notify **Fidelity Investments** of your eligibility and you will receive an email to enroll.

*Note: This plan is subject to IRS rules and regulations and annual limits.*

## Eligibility & Contribution Information

All employees age 18 and older are eligible to enroll in the 401(k) plan effective their first day of employment. Employees may enroll through Fidelity Investments once eligible and may make changes to their contributions or investment elections at any time.

In addition to the income you set aside, Hogan & Associates Construction will match a portion of your contributions. Hogan & Associates Construction will match dollar for dollar up to 3% of your plan compensation deferred for the year; plus 50% of the next 1% of your plan compensation deferred for the year; plus 50% of the next 1% of your plan compensation deferred for the year. This means that if you defer 5% of your income for the year, Hogan & Associates Construction will match up to 4%.

## To enroll in the Hogan & Associates Construction 401(k) Profit Sharing Plan you will need to do the following:

### To Create Your Fidelity Account

1. Go to [www.netbenefits.com](http://www.netbenefits.com)
2. Click on "Register as a new user."
3. Follow the prompts to create your account, where you will then make elections for your contribution amount and investment strategy.

Please note: Employees must first be added by the employer in Fidelity's system before enrollment is available. This process may take 1–2 business days following your date of hire. If you are unable to locate your information when attempting to enroll, please allow additional time and try again.

## Additional Plan Components

### Investment Options

The 401(k) account offers investment options for the funds in the account. You can view the options, or change your selections at any time, on the Fidelity Investments website, [www.401k.com](http://www.401k.com). If you do not make an investment election, your account will be invested in a default fund.

### Vesting

Employee and employer contributions from all three components of the Retirement Plan are 100% vested upon their deposit.

### Loans

As a participant in the Hogan & Associates Construction Retirement Plan, you may borrow from your 401(k) account balance and make loan repayments at a fixed interest rate. You pay back the principal and interest to your own account. There are limits on the number of loans you may have and the total amount you may borrow.

This summary is only a brief description of some aspects of the Retirement Plan. For additional details of the plan, please contact Marv Ellis Jr. of Wasatch Health by calling 801-295-7373. The formal Retirement Plan document details and controls the plan's operations and will govern if there is any conflict between these summaries and the plan document.

## TIME TO ENROLL IN BENEFITS

# Enrollment Instructions, Dates, & Reminders

You made it to the end! Now that you're armed with knowledge, it's time to take the next step and enroll in your benefits. Below you will find all the information you need to complete enrollment and select your benefits for the 2025–2026 plan year.

## Dates to Remember

- **Open Enrollment:** Open enrollment is your annual opportunity to enroll in or change your benefit elections. Once the enrollment period has ended, you may not add, change, or drop coverage unless you experience a qualifying event. The open enrollment period is: March 1 - 31, 2025.
- **New Hire Enrollment:** Welcome! If you are eligible for benefits, you have **30 days from your date of hire** to enroll in your benefit elections. Past that time period, you will need a qualifying event to make any changes.

## How To Enroll

You can enroll in benefits through **ADP**. Login at [www.workforcenow.adp.com](http://www.workforcenow.adp.com) to make your selections and update any personal or dependent information before the enrollment period is up or scan the QR code below.

## ADP Enrollment System

### Enrolling in Benefits

- From the Open Enrollments card, click "**Enroll Now**".
- Review the information.
- Answer the tobacco status questions, if displayed. (Depending on your company setup, these questions may be displayed on a different page.)
- Click Continue.

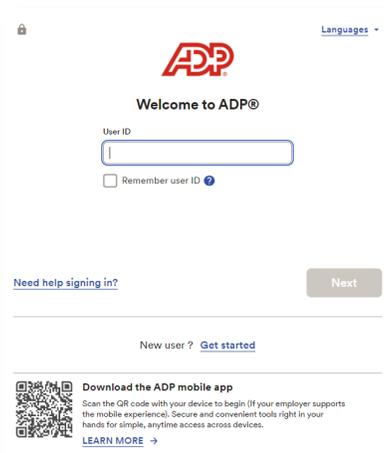
### Selecting Benefits

Visual indicators are displayed to show the remaining steps and current plans for already enrolled employees. From the left navigation pane, you can select the flag icon (plans that need your attention), green check mark (plans you are currently enrolled in), gray X (waived plans) and available benefits.

- Select an indicator from the left navigation pane.
- Choose a **Currently Enrolled** plan or one from **Other Options**.
- Optional: Click the **View Plan Comparison** button to compare plans.
- Complete your **Action Items**.
- After you have selected all of your benefits, click Finished with Benefits. You can **Save for Later** or **Continue to Preview**.

### Benefits Enrollment Summary

- Review the information (The Waived Benefits display below the enrollments).
- To save your entries and return to your enrollment tasks later, click **Save for Later**. When you are ready to continue the enrollment process, click **Select Benefits**.
- Click **Submit Enrollment**.
- Optional: **Download Confirmation**.



## Have Questions?

We are happy to help answer your questions on coverage, enrolling, forms, or anything else related to your benefits. Reach out to Lantzen Toomer and we will work to resolve your question.

**Phone:** 801-951-7000

**Email:** [LToomer@hoganconstruction.com](mailto:LToomer@hoganconstruction.com)

CONTRIBUTION AMOUNTS

# Premium Rates by Plan

This page shows the monthly premiums for access to the medical, dental, vision, voluntary life, and disability benefits provided in this booklet. For the most updated information, refer to each carrier’s plan materials, and remember to also check your costs at enrollment.

## Monthly Employee Medical Rates:

Coverage Type	\$500 Base Plan		\$250 Buy Up Plan		\$3,500 HDHP Plan	
	Compliant	Non-Compliant	Compliant	Non-Compliant	Compliant	Non-Compliant
Single	\$0.00	\$135.45	\$62.52	\$142.98	\$0.00	\$102.94
Two Party	\$0.00	\$284.45	\$131.30	\$277.62	\$0.00	\$216.18
Family	\$0.00	\$406.36	\$187.57	\$428.95	\$0.00	\$308.83

## Dental Monthly Rates:

Coverage Type	Choice Indemnity Plan
Single	\$0.00
Two Party	\$40.50
Family	\$70.00

## Vision Monthly Rates:

Coverage Type	E100 Basic Plan	E120 Premier Plan
Single	\$6.06	\$6.67
Two Party	\$11.47	\$12.62
Family	\$16.86	\$18.55

## Voluntary Life Rates:

Monthly Voluntary Supplemental Life Rates Per \$1,000 of Coverage

Age	Employee & Spouse *
34 & Under	\$0.08
35 to 39	\$0.12
40 to 44	\$0.20
45 to 49	\$0.33
50 to 54	\$0.59
55 to 59	\$0.98
60 to 64	\$1.30
65 to 69	\$2.04
70 to 74	\$3.59
75 to 79	\$5.90
Monthly Dependent Life	\$2.00 per \$10,000 of coverage (Rate is fixed regardless of number of children)

## Disability Insurance Plans:

Age	Short-Term Disability Rates Per \$10 of Coverage	Long-term Disability Rates Per \$100 of Coverage
0 to 24	\$0.23	\$0.12
25 to 29	\$0.24	\$0.21
30 to 34	\$0.23	\$0.34
35 to 39	\$0.27	\$0.40
40 to 44	\$0.27	\$0.70
45 to 49	\$0.33	\$1.34
50 to 54	\$0.43	\$1.81
55 to 59	\$0.52	\$2.35
60 to 64	\$0.63	\$2.55
65 to 69	\$0.70	\$2.79
70 to 99	\$0.70	\$2.12

\* Spouse rates are based on employee's age.

# Rx Voucher

This Voucher good for a one-time reimbursement for deductible amounts required in connection with your Prescription Drug Card benefit.



**MAXIMUM VALUE**  
**\$100.00**

## Qualification

To receive your reimbursement, you must be an employee of Hogan & Associates Construction and enrolled in the \$250 Buy-up or \$500 Base Health Insurance Plans offered by the company at the time you were required to pay amounts toward a prescription drug card deductible. Employees who elect the High Deductible Health Plan (HDHP) medical plan and Health Savings Account (HSA) option will not be eligible to submit for reimbursement through the HRA.

## Instructions:

Verify your expenses by saving your receipts and submit them together with this voucher to:

### Hogan & Associates Construction

Attn: Laurie Orchard

940 N 1250 W

Centerville, UT 84014

Fax: 801-951-7100 | Email: [lorchard@hoganconstruction.com](mailto:lorchard@hoganconstruction.com)

Please complete the following information to process your reimbursement:

Employee Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

To the best of my knowledge, these expenses are not eligible for reimbursement from any other source.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

THIS BENEFIT GUIDE IS PROVIDED BY:

