



2020-2021 Benefits Guide

Welcome to your 2019-2020 Benefit Enrollment Guide



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Dear Employee,

Duggin Construction is proud to offer you a comprehensive benefits package this year with two medical plan options. This enrollment guide will assist you in determining the coverage levels that will provide you and your family with the protection that gives you peace of mind.

This guide explains each type of coverage, give suggestions about how to effectively use your benefits, and provides examples to help you determine your benefit amounts.

We encourage you to take the time to review the enrollment guide prior to enrollment.

Participation in enrollment is mandatory this year.

Who can Enroll?

You are eligible to participate in the Duggin Construction plans if you are a regular, full-time employee, and are scheduled to work 40 hours or more per week. Certain dependents of eligible employees can enroll in the medical, dental, vision. Eligible dependents are:

- Spouses
- Children under the age of 26



About your Payroll Deductions

Your premiums for the Medical, Dental, Vision plans will be deducted on a pre-tax basis because they are covered under your Cafeteria plan under Section 125 of the Internal Revenue Service code. This means that once you elect to enroll in any of these plans, you will not be allowed to drop or change your election until the Company's next Open Enrollment unless you have a qualifying event. Your Life and disability insurance premiums will be deducted on a post-tax basis.

Qualifying Life Events

No changes are allowed to your Medical, Dental and Vision elections during the plan year, except for a "qualifying life event."

Qualifying life events that could result in changes to your coverage include the following:

- Marriage or Divorce
- Birth or adoption of a child
- Death of a dependent
- Medicare entitlement
- End of a dependent's coverage to age 26
- Termination of your spouse's employment that affects benefits and/or loss of other group coverage

If you have a qualifying life event, you must notify Duggin Construction Company, LLC.. and provide the necessary documentation within 30 days of the change. If you do not do so within 30 days, you must wait until the next open enrollment to make medical, dental or vision benefit plan changes.

Special Enrollment Rights

If you are declining enrollment for yourself or your dependents because of other health insurance coverage you may in the future be able to enroll yourself and your dependents in Duggin Construction's medical, dental, or vision plans within 30 days after your other coverage ends.

Your Medical Benefit Choices



*DID YOU KNOW: MCKNIGHT PROVIDES
A PATIENT ADVOCATE TO HELP YOU
RESOLVE YOUR CLAIMS?*

McKnight Advisory Group, Inc., is not responsible for typos or errors. See Carrier quotes, master contracts and certificates of insurance for details. Final rates and benefits are based on underwriting and may change from what is presented here. Discussions regarding any law or tax code do not constitute legal, tax or accounting advice. Review all literature before making a final choice. Do not cancel existing insurance prior to written approval and acceptance of final rates and benefits. Not complete without Carrier Quote(s).

Medical Summary of Benefits for HDHP/ HSA Plan (Option 1)

	In Network Benefits
Individual Deductible	\$3,000
Family Deductible	\$6,000
Individual Out of Pocket	\$4,000
Family Out of Pocket	\$8,000
Coinsurance	50%
Office Visit Copay	50% after Deductible
Specialist Copay	50% after Deductible
Emergency Room Copay	50% after Deductible
Well Care Service	100% in Network
Prescription Coverage	Preventative RX: \$10/\$35/\$60
Telemedicine	Yes
Life Time Maximum	Unlimited
Medical Cost per payroll <i>(Does not include the \$85 Duggin Construction Contribution)</i>	
Employee Only	\$90.33
Employee/Spouse	\$189.68
Employee/Child(ren)	\$165.30
Full Family	\$274.14

Medical Summary of Benefits for HDHP/ HSA Plan (Option 2-Shared)

	In Network Benefits
Individual Deductible	\$2,500
Family Deductible	\$5,000
Individual Out of Pocket	\$2,500
Family Out of Pocket	\$5,000
Coinsurance	100%
Office Visit Copay	100% after Deductible
Specialist Copay	100% after Deductible
Emergency Room Copay	100% after Deductible
Well Care Service	100% in Network
Prescription Coverage	Preventative RX: \$10/\$35/\$60
Telemedicine	Yes
Life Time Maximum	Unlimited
Medical Cost per payroll <i>(Does not include the \$85 Duggin Construction Contribution)</i>	
Employee Only	\$116.63
Employee/Spouse	\$228.13
Employee/Child(ren)	\$198.74
Full Family	\$329.61

Preventative Care Services

We encourage you to obtain preventative care services and health screenings, as appropriate for your age., to help maintain or improve your health and achieve your health and wellness goals. Regular preventative care visits and health screenings may help to identify potential health risks for early diagnosis and treatment, helping you to live a healthier life.

Some Preventative services may change from Preventative to Diagnostic depending on the service. If this happens you may be responsible for the cost of the procedure and/or the appointment.

The following is a list of services (Not all-inclusive) that are covered as Preventative care:

All Members:

- One preventative health exam per annual benefit period; more frequent preventative exams are covered for children up to age 3.
- All standard immunizations adopted by the CDC
- Screening for colorectal cancer (age 50-75), high cholesterol and lipids (age 45 and older for women; age 35 and older for men), high blood pressure, obesity, diabetes and depression (age 12 and up)
- Screenings for lung cancer for adults (age 55-80) who have a 30 pack a year smoking history and either currently smoke or have quit within the past 15 years, per annual benefit period.
- Screenings for HIV and certain sexually transmitted diseases and counseling for the prevention of sexually transmitted disease.
- Dietary counseling for adults with hyperlipidemia, hypertension, type 2 diabetes, obesity, coronary artery disease and/or congestive heart failure; limited to 12 visits per annual benefit period.

Preventative Care for Men:

- Prostate cancer screening (age 50 and older)
- One-time abdominal aortic aneurysm screening (age 65-75 for men who ever smoked)

Preventative Service for Women

Well-woman visit, including annually sexually transmitted infections (STI) counseling and annual domestic violence screening & counseling per annual benefit period.

- Cervical Cancer Screening per annual benefit period.
- Screening of pregnant women for anemia, iron deficiency, bacteriuria, hepatitis B virus, Rh factor incompatibility, gestational diabetes.
- Breastfeeding support/counseling and supplies, including lactation support and counseling by a trained provider and one manual breast pump per pregnancy
- Counseling women at high risk of breast cancer for chemoprevention, including risks and benefits
- Mammography screening (age 40 and older) and genetic counseling and, if indicated after counseling, BRCA testing for BRCA breast cancer gene.
- Osteoporosis screening (age 60 and older)
- HPV testing once every 3 years, beginning at age 30
- FDA-approved contraceptive methods and counseling

Preventative Care for Children:

- Newborn screening for hearing, phenylketonuria (PKU), thyroid disease, sickle cell anemia and cystic fibrosis
- Iron deficiency screening

PHYSICIANS ON DEMAND 24/7

PhysicianNowSM saves money and increases productivity by connecting your employees with doctors by phone or secured video, on their schedule.*



Use PhysicianNow for:

- Allergies
- Cold and flu
- Fever
- Sinus infections
- Respiratory issues
- Skin conditions (rashes or insect bites)
- Sore throat
- Urinary tract infections

Common Pediatric Conditions Include:**

- Cold and flu
- Constipation
- Ear aches
- Diarrhea
- Nausea and vomiting
- Pinkeye

Our doctors can diagnose your symptoms and if a prescription is needed, send it to your pharmacy.***

How It Works

With PhysicianNow, your employees have access to doctors all day, every day via their choice of video consultation, secure messaging or telephone.

All they have to do to participate is:

- Complete and confirm their medical history (this can be completed before their consultation)
- Request a consultation with a physician via phone or video
- Stand by for a doctor to contact them for their consultation

All your employees have to do to get started is log on to BlueAccessSM and click on the My Health and Wellness tab.

Register 1 of 3 ways



Visit bcbst.com/blueaccess and select the My Health and Wellness tab. Click on the PhysicianNow tile.

OR



Call 1-844-658-4825.

OR



Download the PhysicianNow app at the App Store* or Google Play*.



Dental Coverage (Principal)

Dental Benefits are available to you and your eligible dependents to cover routine care such as exams, x-rays, and cleanings, as well as fillings, dentures, bridge work and periodontal care. In order to receive the highest level of benefits and pay the least amount out of your pocket, you need to access care from the providers who are in your network.

Please review the brief summary of benefits and payroll deductions for the Dental plan below.

Dental Weekly Deductions	
Employee Only	\$5.31
Employee/Spouse	\$11.17
Employee/Child(ren)	\$11.40
Full Family	\$18.00

Preventative Services

- ◇ Oral Exams
- ◇ Routine Cleanings
- ◇ Bitewing X-rays
- ◇ Full Mouth X-Rays
- ◇ Panoramic X-Rays
- ◇ Fluoride X-Rays

Basic Services

- ◇ Basic Restorative Services
- ◇ Basic Endodontics
- ◇ Basic Periodontics
- ◇ Basic Oral Surgery

Major Services (12 Month Waiting Period Applies)

- ◇ Major Endodontics
- ◇ Major Periodontics
- ◇ Major Oral Surgery
- ◇ Major Restorative
- ◇ Prosthodontics & Implants
- ◇ Coinsurance-50%

Dental Summary of Benefits

Calendar Year Deductible Individual/Family <i>(no deductible on Preventative Services)</i>	\$50/\$150 (Maximum of three per family)	
Benefits	In-Network Provider	Out-of-Network Provider
Preventative Services	100%	100%
Basic Services	80%	80%
Major Services	50%	50%
Children's Orthodontia	0%	0%
Annual Benefit Maximum <i>(per covered member)</i>	\$1,500 annually	

DENTAL Option 2

Dental Coverage (Principal)

Dental Benefits are available to you and your eligible dependents to cover routine care such as exams, x-rays, and cleanings, as well as fillings, dentures, bridge work and periodontal care. In order to receive the highest level of benefits and pay the least amount out of your pocket, you need to ac-

Preventative Services

- ◇ Oral Exams
- ◇ Routine Cleanings
- ◇ Bitewing X-rays
- ◇ Full Mouth X-Rays
- ◇ Panoramic X-Rays
- ◇ Fluoride X-Rays

Basic Services

- ◇ Basic Restorative Services
- ◇ Basic Endodontics
- ◇ Basic Periodontics
- ◇ Basic Oral Surgery

Major Services (12 Month Waiting Period Applies)

- ◇ Major Endodontics
- ◇ Major Periodontics
- ◇ Major Oral Surgery
- ◇ Major Restorative
- ◇ Prosthodontics & Implants

Children's Orthodontia

- ◇ Covered to Age 19
- ◇ 12 month Waiting Period

Dental Weekly Deductions

Employee Only	\$6.27
Employee/Spouse	\$13.20
Employee/Child(ren)	\$16.22
Full Family	\$24.35

Dental Summary of Benefits

Calendar Year Deductible Individual/Family <i>(no deductible on Preventative Services)</i>	\$50/\$150 (Maximum of three per family)	
Benefits	In-Network Provider	Out-of-Network Provider
Preventative Services	100%	100%
Basic Services	80%	80%
Major Services	50%	50%
Children's Orthodontia	\$1,000	\$1,000
Cosmetic Orthodontia	0%	0%
Annual Benefit Maximum <i>(per covered member)</i>	\$1,500 annually	

Voluntary Vision Coverage (Principal)

Vision benefits are available to you and your eligible dependents to cover lenses, frames, contacts and routine care. Use of an in-Network provider will ensure that you receive the maximum benefit and lower your out-of-pocket expenses.

Voluntary Vision Rates	
Monthly Rates	
Employee	\$1.36
Employee/Spouse	\$2.72
Employee/Child(ren)	\$3.06
Full Family	\$4.24



Vision Summary of Benefits			
	Frequency	In-Network	Out-of-Network
Routine Eye Exam	1 Time a Year	\$10 Copay	Up to \$45
Material	1 Time a Year	\$25 Copay	Up to \$70 Copay
Frames	1 Time a Year	\$150 Allowance	Up to \$70
Contact Lens Exam	1 Time a year	\$150 Allowance	Up to \$120
Lenses			
Single Vision	1 Time a year	\$25 Copay	Up to \$30 Copay
Bifocal	1 Time a year	\$25 Copay	Up to \$50 Copay
Trifocal	1 Time a year	\$25 Copay	Up to \$65 Copay
Frequency Examination	Once every 12 months		
Lenses or Contact Lenses	Once every 12 months*		
Frames	Once every 24 Months*		
	<i>*(You can only get either contact or glasses per plan year, not both)</i>		

HEALTH SAVINGS ACCOUNT

Health Savings Account (HSA)

Health Savings Accounts are savings accounts for your health and medical expenses. Due to IRS regulations, HSAs are only allowed with qualified HDHP medical plans. You can use the money in your account to pay for eligible expenses such as your annual deductible, coinsurance, dental, vision, pharmacy, etc. Your HSA funds can be used to pay for the health expenses of any tax dependent (i.e. spouse, children) even if they are not on your health insurance plan. HSAs are also designed to help you save for upcoming qualified medical and retiree health expenses on a tax-free basis. The maximum HSA contribution is determined annually by the IRS.

Features of Health Savings Accounts

- HSA's unused funds roll over each year. There is no "use it, or lose it" rule. It is your personal savings account for qualified health expenses.
- Tax Savings: If you choose to contribute to an HSA, contributions are taken out of your paycheck pre-tax, so you pay less taxes.
- Portability: The money in your account is yours, so you can take it with you if you change employers, health plans, or retire.
- Investment: Once your account reaches a minimum balance requirement, you can transfer to money to an investment account and invest in several mutual funds-earning are tax free.
- Savings: Let the funds in your account grow tax-deferred. After age 65, you may withdraw from your HSA for any reason without penalty and taxes as long as you use the funds for qualified medical expenses. Use the savings to pay qualified medical expenses or save the money and invest in various mutual funds.
- You can access your HSA with a debit card, check or ATM

Health Savings Account	
	IRS Annual Limits
Employee Only	\$3,550
Employee+1 or more	\$7,100
Catch-up Contributions (Optional)	
Age 55 through age 64	\$1,000



Principal Employer Paid Life Insurance

This year Duggin Construction is paying for \$50,000 Life & AD&D for all of their full time employees

Coverage During Disability

If you become disabled before age 60, coverage will continue and premium may be waived.

Accelerated Death Benefit

If you are terminally ill, you may be able to receive a portion of your life coverage benefit as a lump sum.

*DID YOU KNOW: PRINCIPAL OFFERS
FREE WILL PREP SERVICES WITH YOUR
COMPANY PAID LIFE POLICY*

VOLUNTARY LIFE

Principal Voluntary Life

Group Voluntary Life is a way for you to get additional Life Insurance for you and your family. You can get any amount between \$10,000 to \$300,000 for you and between \$5,000 and \$150,000 for a spouse. There is also a \$10,000 policy for children between the ages of 14 days and 18 years old for \$2.00 a month (regardless of how many children you have).

The guaranteed issue amount (not having to answer any health questions), is \$100,000. This amount would include the \$50,000 company paid life insurance that Duggin currently pays for.

Your spouse can get half of what you get: i.e. you get \$150,000 in Life Insurance, they can get \$75,000.

Employee Navigator will have your total costs.

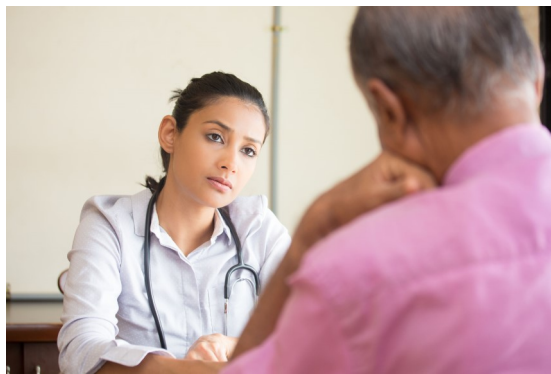
Age (Employee/Spouse)	Rate per \$1,000 Purchased
0-29	\$0.14
30 - 34	\$0.15
35 - 39	\$0.19
40 - 44	\$0.29
45 - 49	\$0.46
50 - 54	\$0.70
55 - 59	\$1.06
60 - 64	\$1.62
65 - 69	\$2.60
70 - 99	\$4.25

Principal Short Term Disability

Group Short Term Disability is designed to provide partial income replacement should you become disabled as the result of sickness or injury.

An employee will be considered disabled if, because of sickness, injury, or pregnancy, on of the following applies

- Unable to preform a majority of the substantial and material duties of his/her own job OR
- Unable to earn 80% of his/her Pre-Disability income while working in his/her own job in a modified capacity or any job



Short Term Disability Cost: \$.45 per \$10 of weekly income.

Voluntary Short-term Disability Summary of Benefits

Weekly Benefit	60% of your Monthly income
Maximum Weekly Benefit	\$750
Maximum Benefit	25 Weeks
Pre-Existing Condition Timeframe	Guaranteed Issued at initial enrollment, <u>Evidence of Insurability for Subsequent enrollments</u>
Waiting Period	8th day Accident, 8th day sickness

Principal Long Term Disability

Long Term Disability provides income protection if a serious illness or accident takes you out of work for an extended period of time.

An employee will be considered disabled if, because of sickness, injury, or pregnancy, on of the following applies

- Unable to preform a majority of the substantial and material duties of his/her own job OR
- Unable to earn 80% of his/her Pre-Disability income while working in his/her own job in a modified capacity or any job

An employee will be considered disabled if, after completing the elimination period and own occupation period one of the following applies:

- Unable to preform a majority of the substantial and material duties of any occupation for which he/she is or may reasonably become qualified based on education, training or experience OR
- Unable to 60% of his/her Pre-Disability income while working in his/her own occupation or any occupation in a modified capacity

Long Term Disability Cost: \$.78 per \$100 of Covered Monthly Earnings.

Voluntary Long Term Disability Summary of Benefits

Monthly Benefit	60% of your Monthly income
Maximum Monthly Benefit	\$5,000
Elimination Period	180 days
Pre-Existing Condition Timeframe	12 month waiting period
Waiting Period	1st day Accident, 8th day sickness
Own Occupation	24 months

AFLAC does not coordinate with your health insurance, or any other benefits, which means that AFLAC pays you directly .



ACCIDENT:

The financial impact of an accident is often surprising. Most people have expenses after an accident they never thought of before. From out-of-pocket medical costs to a temporary loss of income, your finances may be strained. If you or a family member suffered an accidental injury, can your finances handle it?

What does the Aflac Accident Advantage policy include?

- A wellness benefit payable for routine medical exams to encourage early detection and prevention.
- Benefits payable for fractures, dislocations, lacerations, concussions, burns, emergency dental work, eye injuries, and surgical procedures.
- Benefits payable for initial treatment, X-rays, major diagnostic exams, and follow-up treatments.
- Benefits payable for physical, speech, and occupational therapy.
- Daily hospitalization benefits payable for hospital stays, and additional daily benefits paid for stays in a hospital intensive care unit.

Why Aflac Accident Advantage may be the right choice for you:

- No underwriting questions to answer²
- No coordination of benefits – we pay regardless of any other insurance you may have
- No network restrictions – you choose your own health care provider
- Portable – take the plan with you if you change jobs or retire
- 24-hour accident insurance

HOSPITAL:

Even a minor trip to the hospital can present you with unexpected expenses and medical bills. And though you may have major medical insurance, your plan may only pay a portion of what your entire stay entails.

That’s how the Aflac group supplemental hospital indemnity insurance plan can help.

It provides financial assistance to enhance your current coverage. So you can avoid dipping into savings, or having to borrow to cover out-of-pocket-expenses health insurance was never intended to cover. Like transportation and meals for family members, help with child care or time away for work, for instance.

In addition to providing you with cash benefits (unless otherwise assigned) during a covered hospitalization, Aflac’s group supplemental hospital indemnity plan has been designed with much more in mind, such as:

- No deductibles.
- No networks, which means you can be treated at the hospital of your choice
- No precertification

Accident Cost

Employee	\$7.14
Employee/Spouse	\$9.51
Employee/Child(ren)	\$11.07
Full Family	\$13.95

Hospital Cost per Pay Period

Employee	See Employee Navigator
Employee/Spouse	See Employee Navigator
Employee/Child(ren)	See Employee Navigator
Full Family	See Employee Navigator

All rates for AFLAC are subject to final AFLAC approval and underwriting.



CRITICAL ILLNESS:

Chances are you may know someone who’s been diagnosed with a critical illness. You can’t help notice the difference in the person’s life – both physically and emotionally. What’s not so obvious is the impact a critical illness may have on someone’s personal finances.

That’s because while a major medical plan may pay for a good portion of the costs associated with a critical illness, there are a lot of expenses that may not be covered. And, during recovery, having to worry about out-of-pocket expenses is the last thing anyone needs.

That’s the benefit of an Aflac Critical Illness insurance plan.

It can help with the treatment costs of covered critical illnesses, such as a heart attack or stroke.

More importantly, the plan helps you focus on recuperation instead of the distraction of out-of-pocket costs. With the Critical Illness plan, you receive cash benefits directly (unless otherwise assigned) – giving you the flexibility to help pay bills related to treatment or to help with everyday living expenses.

CANCER:

Chances are you know someone who’s been affected, directly or indirectly, by cancer. You also know the toll it’s taken on them – physically, emotionally, and financially. That’s why we’ve developed the Aflac Cancer Care insurance policy. The plan pays a cash benefit upon initial diagnosis of a covered cancer, with a variety of other benefits payable throughout cancer treatment. You can use these cash benefits to help pay out-of-pocket medical expenses, the rent or mortgage, groceries, or utility bills – the choice is yours.

And while you can’t always predict the future, here at Aflac we believe it’s good to be prepared. The Aflac Cancer Care plan is here to help you and your family better cope financially – and emotionally – if a positive diagnosis of cancer ever occurs. That way you can worry less about what may be ahead.

**Critical Care Cost
per Pay Period**

Employee	See Employee Navigator
Employee/Spouse	See Employee Navigator
Employee/Child(ren)	See Employee Navigator
Full Family	See Employee Navigator12

Cancer Cost

Employee	\$12.44
Employee/Spouse	\$21.45
Employee/Child(ren)	\$12.65
Full Family	\$21.66



When am I eligible?

- You join the plan as an active participant on the January 1 or July 1 on or after you meet these requirements:
 - You are an employee
 - You have one year of entry service
 - You are age 21 or older

How much can I contribute?

The law limits the amount you may defer in any tax year.

For 2020, the limit under all plans of our type is \$19,500.

If you will be at least age 50 by the end of the year, for 2020 you may contribute an additional \$6,500 for a total of \$26,000.00.

What does Duggin contribute?

We may make a discretionary contribution each plan year. “Discretionary” means we choose the amount of the contribution and whether or not it will be made.

When Can I Join?

You join the plan as an active participant on January 1 or July 1 or after you meet the following requirements:

- You are an employee
- You have one year of entry service
- You are age 21 or older

This date is your entry date.

***DID YOU KNOW: MCKNIGHT PROVIDES
THE FOLLOWING SERVICE TO SUPPORT
YOUR RETIREMENT PLANNING***

OBJECTIONS:

- *Risk Tolerance Scoring*
- *Asset Allocation Guidance*
- *“When Can I Retire?” Collaborative Planner*
- *Info for a Better Life™*
- *Docs for a Better Life™*

To schedule an appointment with our advisor for any of the above, please email: Help@McKnightAdvisory.com

Securities offered through Securities Service Network, LLC. Member: FINRA/SIPC Fee based advisory services offered through SSN Advisory, Inc., Registered Investment Advisor. Services offered only where licensed to do business.

CONTACT INFORMATION

Medical

Member Services/Provider and Eligibility: 1-800-523-1478

Website: www.bcbst.com

Dental/Vision/Life/Short Term Disability/Long Term Disability/Voluntary Life

Customer Service: 1-800-986-3343

Website: www.principal.com

AFLAC Products

Samantha Jackson

Phone: 615-895-8574

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For Eligibility and Enrollment Questions:

Misael Tovar

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Broker, Benefits, and 401(k) Advisor

Edwin McKnight – Broker

Phone: 615-895-8574

E-Mail: ContactUs@McKnightAdvisory.com

Samantha Jackson – Benefit Client & PR Specialist

Phone: 615-895-8574

E-Mail: samantha@mcknightadvisory.com



Medicare Solutions

The Medicare laws and requirements are constantly changing and can be intensely complicated. At McKnight, our Medicare advisor complete training each year to guide our client on their options and advise on best practices.

Following the McKnight Proven Process, we suggest you start the planning conversation at least 90 days from either your 65th birthday or your planned election of Part B.

Check out our Website for regularly posted Medicare Blog

<https://www.mcknightadvisory.com/medicare-insurance-solutions>



NOTES

Are you Puzzled about your benefits and claims?

- * Denied or Delayed Claims
- * Coverage Questions
- * Provider Issues
- * Comprehending your Explanation of Benefits
- * Increased understanding and utilization of existing benefits

Call or e-mail McKnight Advisory Group, Inc. with help with any of these or other issues.

Phone: 615-895-8574

E-Mail: help@mcknightadvisory.com

