2027 OCI Craft Benefits Guide

Empowered Well-Being

PHYSICAL ▪ MENTAL HEALTH ▪ WEALTH ▪ SOCIAL

OC
OVERLAND CONTRACTING®
A BLACK & VEATCH CONSTRUCTION COMPANY

Table of contents

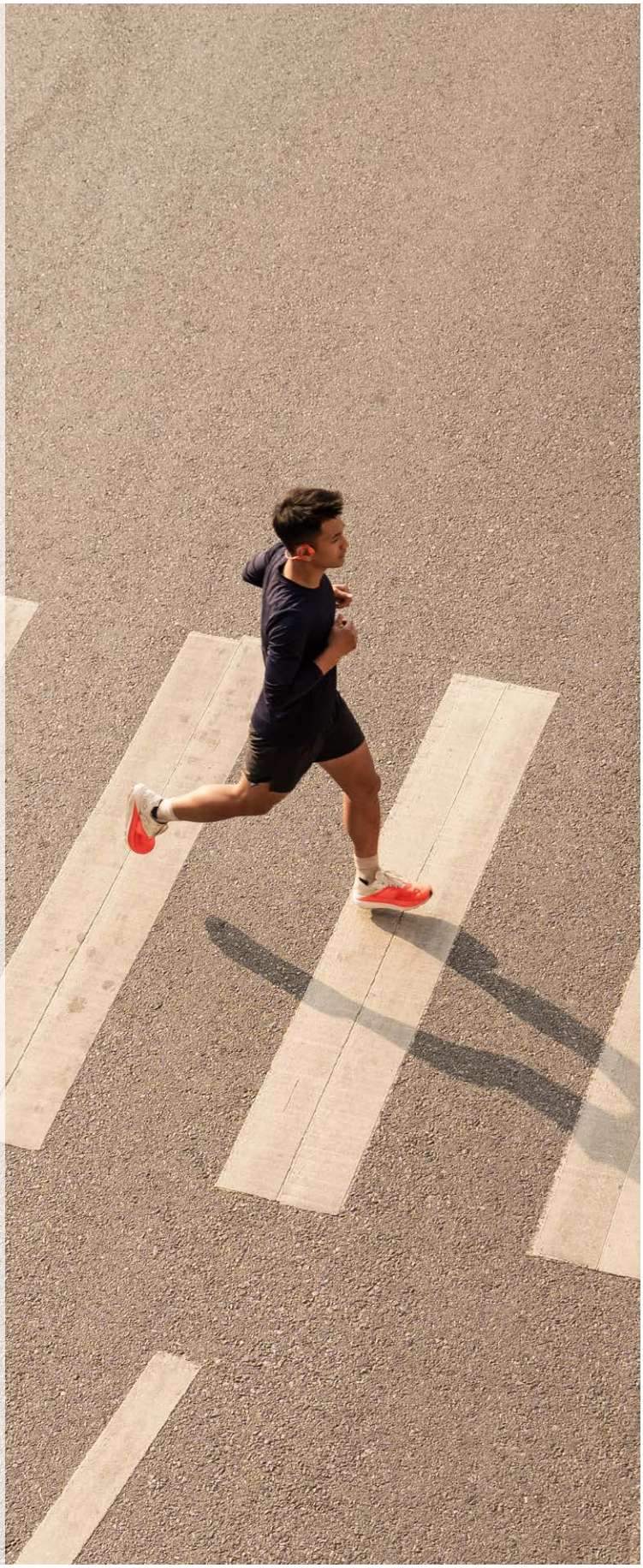
Stretch your physical **3**
Medical 4
Prescription drug 8
Dental 10
Vision 11
Savings and spending accounts 12
Other benefits 14

Nurture your mental health **18**
Employee Assistance Program 19
Mental health resources 20

Build your wealth **22**
Life insurance 23
Credit Union 23
PerkSpot 23
Retirement plan 24
Accidental death & dismemberment insurance 26
Voluntary short term disability income insurance 26
Business travel accident insurance 26
Legal plan 27
Identity theft and cyber protection services 27
Student loan assistance 27

Cultivate your social **28**
Time off 29
Pet insurance 29

Resources **30**
Who's eligible for coverage 30
When you can make changes 30
Important notices 31
Contacts 32



Stretch your **physical**

Empowering you to select benefits that fit your and your family's physical well-being.

Medical

BlueCross BlueShield (BCBS)

Choose from three BCBS plans: HDHP A, HDHP B or PPO Plan

How the plans are the same:

- You must meet the annual **deductible** before the health plan begins to cover non-preventive care expenses. You are responsible for 100% of non-preventive care expenses until you meet your deductible.
- After you reach your deductible, then **coinsurance** begins. Coinsurance is your share of the costs of a covered health care service, calculated as a percentage of the allowed amount for the service.
- You have a cap on what you pay for covered expenses in a plan year, called your **out-of-pocket limit**. For covered expenses, you pay coinsurance up to the out-of-pocket limit. Once you reach the out-of-pocket limit, the plan pays 100% of covered expenses for the rest of the plan year. The amount you pay toward your annual deductible and your coinsurance count toward your out-of-pocket limit.
- **Preventive care** is covered at 100% when you use a network provider.

Want more information? Visit MyHealthToolkitKC.com.

How the plans are different:

	HDHP A	HDHP B	PPO Plan
Your in-network deductible	Individual: $1,850 Family: $3,700*	Individual: $3,000 Family: $6,000*	Individual: $1,450 Family: $2,900**
Your in-network out-of-pocket limit	Individual: $3,500 Family: $7,000*	Individual: $6,000 Family: $12,000	Individual: $3,500 Family: $7,000**
Your in-network coinsurance	Your plan pays 85% You pay 15%	Your plan pays 70% You pay 30%	Your plan pays 80% You pay 20%
Your payroll contributions	$$	$	$$$
Health Savings Account (HSA)	Yes	Yes	No

**Aggregate: Full amount has to be met by one or more family members.*
***Embedded: No one individual pays more than the individual amount.*

Monthly medical payroll contributions

PLAN	PROFESSIONAL	PROFESSIONAL + SPOUSE OR DOMESTIC PARTNER (DP)	PROFESSIONAL + CHILD(REN)	FAMILY
HDHP A	$119	$366	$272	$512
HDHP B	$84	$250	$205	$364
PPO Plan	$304	$754	$618	$1,093

Medical benefit highlights

	HDHP A — *You pay:*		HDHP B — *You pay:*		PPO Plan — *You pay:*	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Office visit						
Primary care physician	Deductible+15%	Deductible+35%	Deductible+30%	Deductible+50%	Deductible+20%	Deductible+40%
Specialist	Deductible+15%	Deductible+35%	Deductible+30%	Deductible+50%	Deductible+20%	Deductible+40%
Preventive care — limited services	0% (no deductible)	Deductible+35%	0% (no deductible)	Deductible+50%	0% (no deductible)	Deductible+40%
Deductible						
Professional	$1,850	$5,000	$3,000	$6,000	$1,450	$2,750
Professional plus one or more	$3,700*	$10,000*	$6,000*	$12,000*	$2,900**	$5,500**
Coinsurance						
	15%	35%	30%	50%	20%	40%
Out-of-pocket maximum						
Professional (includes deductible)	$3,500	$10,000	$6,000	$12,000	$3,500	$7,000
Professional plus one or more (includes deductible)	$7,000*	$20,000*	$12,000	$24,000	$7,000**	$14,000**

**Aggregate: Full amount has to be met by one or more family members.*
***Embedded: No one individual pays more than the individual amount.*

Getting started with BCBS

Get easy access to your benefits information by downloading the My Health Toolkit® mobile app today! It's free at: MyHealthToolkitKC.com.

Register through the app using your member ID number.

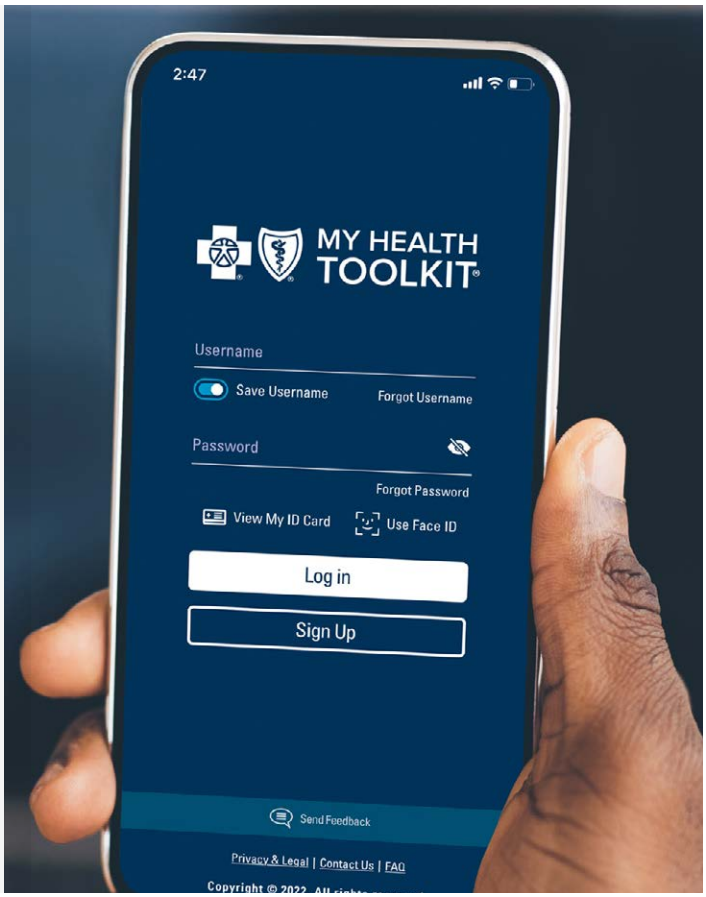
Your GetStarted page will link you to all the helpful resources included with your medical benefits plan.

Now you have anywhere, anytime access to your benefits information, including claims, discounts and how you prefer to be contacted.

Would you rather get your Health Toolkit from a desktop/laptop computer?

Go to MyHealthToolkitKC.com and then:

- Click the Create An Account link on the right side of the page.
- Enter your member ID (from your membership card).
- Follow the instructions to create your profile.

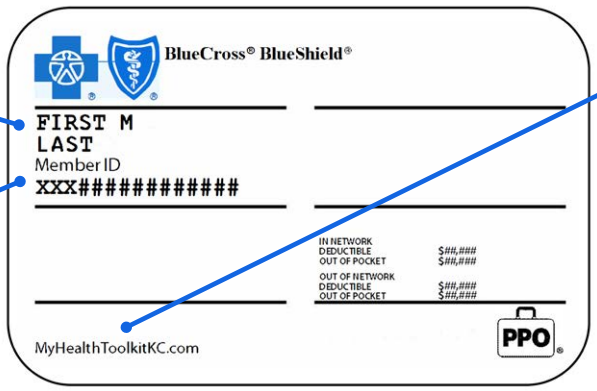


BCBS has you covered with your membership card

Your BCBS membership card contains important information that helps providers apply your benefits correctly. Keep it with you at all times — or download a digital ID card to keep on your smartphone. A health care provider will usually ask to see your insurance card at the beginning of your visit.

COVERED FAMILY MEMBERS CAN ALSO USE THE SUBSCRIBER'S CARD – OR FORWARD THEM THEIR OWN DIGITAL COPY OF IT.

YOUR MEMBER ID CONTAINS A SET OF LETTERS AND NUMBERS UNIQUE TO YOU.



VISIT THE BCBS MAIN WEBSITE OR DOWNLOAD THE MOBILE APP FOR INFORMATION AND TO LOG IN TO YOUR MY HEALTH TOOLKIT ACCOUNT.

Prior authorizations

The company medical plan requires prior authorization, also called preauthorization or precertification, for certain medical tests and treatments. This is an extra step to ensure you receive the appropriate type of care for your condition. If your doctor does not receive authorization before they perform the service, it may not be covered by insurance.

What types of services require prior authorization?

- Inpatient admissions
- Skilled nursing services
- Home health services

What should you do?

Most providers will be knowledgeable about services that require prior authorization. You can ask your doctor to visit the provider area of My Health Toolkit and sign in to My Insurance Manager to request authorization. After the request is submitted and a decision has been made, you can easily check the decision:

- Log in to MyHealthToolkitKC.com, select the Claims & Authorizations tab, then Authorization Status.
- Or call the number on the back of your membership card to speak to a customer service advocate.

Support for your unique health journey

The medical plan includes one-on-one support from a health care professional at no additional cost.

What is a health coach?

The BCBS team of nationally accredited health coaches includes registered nurses, health educators, respiratory therapists, certified diabetes educators, licensed behavioral health specialists, and other health and well-being professionals. Wherever you are in your journey, BCBS can connect you to the right coach. They will work with you to make positive, meaningful changes at your pace. To connect with a coach, enroll at MyHealthToolkitKC.com or call the number on the back of your membership card.

Behavioral and chronic disease coaching

- Attention deficit hyperactivity disorder *(adults)*
- Asthma *(adults and children)*
- Bipolar disorder
- Heart disease
- Heart failure
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Diabetes *(adults and children)*
- High blood pressure
- High cholesterol
- Metabolic health *(metabolic syndrome and prediabetes)*
- Migraine
- Recovery support for substance use disorder

TELADOC®

Any time you need a doctor's care, you've got Teladoc. Teladoc gives you access 24/7 to a U.S. board-certified doctor through the convenience of phone, video or mobile app visits. To get started, visit MyHealthToolkitKC.com, log in, select the Providers & Services tab at the top of the page, then select Telehealth. You can also download the Teladoc app from the App Store® or Google Play™.

Find a Doctor

Is your doctor in the BCBS network? Find out at MyHealthToolkitKC.com by clicking **Find Care** and then **Find a Doctor**.

Connect with an app

The **My Health Planner**℠ app is free for eligible members! It helps you keep track of what you need to do between doctor visits and stay in touch with your care team.

Prescription drug | *Express Scripts®*

When you enroll in a BCBS medical plan, you will have prescription drug benefits through **Express Scripts.**

There is no coverage for out-of-network pharmacies.

With the HDHP A and HDHP B plans, you'll pay the full cost for prescription drugs until you've reached your medical deductible, with the exception of some preventive drugs.

Want more information? Visit express-scripts.com/blackandveatch.

Prescription drug highlights

HDHP A	PREVENTIVE DRUGS – *You pay:*	NON-PREVENTIVE DRUGS – *You pay:*
Retail *(30-day supply; 3x copay for up to 90-day supply)*		
Generic	0%, no deductible	Deductible + 0%
Preferred brand	15%, no deductible ($20 min/$60 max)	Deductible + 15% ($20 min/$60 max)
Non-preferred brand	15%, no deductible ($50 min/$100 max)	Deductible + 15% ($50 min/$100 max)
Mail Order *(90-day supply)*		
Generic	0%, no deductible	Deductible + 0%
Preferred brand	15%, no deductible ($50 min/$150 max)	Deductible + 15% ($50 min/$150 max)
Non-preferred brand	15%, no deductible ($125 min/$250 max)	Deductible + 15% ($125 min/$250 max)

HDHP B	PREVENTIVE DRUGS – *You pay:*	NON-PREVENTIVE DRUGS – *You pay:*
Retail *(30-day supply; 3x copay for up to 90-day supply)*		
Generic	0%, no deductible	Deductible + 0%
Preferred brand	30%, no deductible ($25 min/$75 max)	Deductible + 30% ($25 min/$75 max)
Non-preferred brand	30%, no deductible ($55 min/$110 max)	Deductible + 30% ($55 min/$110 max)
Mail Order *(90-day supply)*		
Generic	0%, no deductible	Deductible + 0%
Preferred brand	30%, no deductible ($55 min/$165 max)	Deductible + 30% ($55 min/$165 max)
Non-preferred brand	30%, no deductible ($130 min/$260 max)	Deductible + 30% ($130 min/$260 max)

PPO Plan	30-DAY SUPPLY – *You pay:*	90-DAY SUPPLY – *You pay:*
Retail		
Generic	$10 copay	$30 copay
Preferred brand	20% ($25 min/$50 max)	20% ($75 min/$150 max)
Non-preferred brand	30% ($40 min/$100 max)	30% ($120 min/$300 max)
Mail Order *(90-day supply)*		
Generic	$20 copay	
Preferred brand	$75 copay	
Non-preferred brand	$120 copay	

Smart90

Smart90 makes it easy to fill prescriptions for maintenance medications (drugs you take regularly) at a lower cost. With Smart90, **you must fill a 90-day supply of your maintenance medication through one of these two options:**

1. **Express Scripts home delivery**
   - Safe and secure delivery
   - Free standard shipping
   - Express Scripts contacts your doctor to order a new prescription I express-scripts.com or 866-890-1419

2. **Participating retail pharmacy**
   - Transfer maintenance medications to a participating retail pharmacy
   - The participating retail pharmacy contacts your doctor to order or transfer prescriptions

Copayment for your 90-day supply will be the same through Express Scripts home delivery or at a Smart90 participating retail pharmacy.

Teladoc Health*

Teladoc Health Cardiometabolic Health programs provide support for four common health conditions, and it's easy to access. You'll connect with experts and tools online. Features may range from health coaching to goal-planning tips to helpful devices you can use at home.

Diabetes management

Custom support is important if you're living with diabetes. You can get:

- An internet-connected blood glucose meter.
- Unlimited strips and lancets.
- Tips, action plans and one-on-one coaching.
- Real-time support when blood glucose readings are too high or too low.

Diabetes prevention program

Reduce your risk for Type 2 diabetes. You'll benefit from:

- A team of expert coaches to support you.
- A smart scale that syncs to the app and the web.
- An all-in-one program that tracks weight, activity and food.

Hypertension management

Take control of your heart health and make managing your blood pressure easier. You'll get:

- A connected blood pressure monitor.
- Step-by-step action plans based on your personal goals.
- Tips on nutrition and activity.
- One-on-one support from expert coaches.

Weight management

This interactive program helps you reach your goals. You'll get:

- A smart scale that syncs to the app and web portal.
- An app to log food and set goals.
- One-on-one support from a team of expert coaches.
- Ability to share progress with a doctor.

How to enroll

1. Visit MyHealthToolkitKC.com and log in to your account.
2. From the Wellness & Care Management tab, select Wellness Program, and then Cardiometabolic Health.

**Available to professionals and their eligible dependents who are enrolled in the BlueCross BlueShield (BCBS) medical plans: HDHP A, HDHP B, or PPO Plan. Additional eligibility requirements may apply.*

Dental | *Delta Dental of Missouri*

Want more information? Visit deltadentalmo.com.

Monthly dental payroll contributions

PROFESSIONAL	PROFESSIONAL + SPOUSE OR DP	PROFESSIONAL + CHILD(REN)	FAMILY
$21	$47	$36	$67

Dental benefit highlights

DENTAL PLAN FEATURES	PPO DENTIST *You pay:*	PREMIER DENTIST AND NON-PARTICIPATING DENTIST* *You pay:*
Diagnostic and preventive services ▪ Oral exams (all types), twice per calendar year** ▪ Cleanings (including periodontal maintenance), twice per calendar year** ▪ Bitewing and periapical X-rays, as needed ▪ Full-mouth X-rays, once every 36 consecutive months ▪ Fluoride, once per year for dependents under age 19 ▪ Sealants, once per tooth every five years, limited to non-decayed first and second permanent molars ▪ Emergency palliative treatment ▪ Space maintainers, once in five years for dependents up to age 16	0%	0%*
Basic services ▪ Restorative services using synthetic porcelain, amalgam and plastic material, including composite (white) fillings on all teeth ▪ Periodontics ▪ Endodontics: root canal filling and pulpal therapy ▪ Extractions: simple and surgical	15%	20%*
Major services ▪ Oral surgery, except for extractions covered under Basic Services ▪ Prosthetics: bridges and dentures; replacements will be covered once in five years but not during the first year of coverage ▪ Implants and bone grafts, once in five years ▪ Crowns, jackets, labial veneers, inlays and onlays when required for restorative purposes, once in five years ▪ Occlusal guards, once every five years	45%	50%*
Orthodontic services	50%	50%*
Calendar year deductible *(basic and major services only)*	$50 per person/$100 family limit	
Calendar year benefit maximum* **	$2,000 per person	
Separate lifetime orthodontic maximum	$2,000 per person	

*Non-participating dentist services are subject to reasonable and customary limitations.
**Patients that are pregnant, diabetic, have a suppressed immune system, or have a history of periodontal therapy are eligible for up to two additional cleanings and exams per calendar year.
***Preventive exams, cleanings, X-rays and fluoride treatments do not count toward the calendar year maximum.

Vision | *VSP*

Want more information? Visit VSP.com.

Monthly vision payroll contributions

PLAN	PROFESSIONAL	PROFESSIONAL + SPOUSE OR DP	PROFESSIONAL + CHILD(REN)	FAMILY
Standard Plan	$8.32	$16.56	$18.72	$29.40
Premium Plan	$17.36	$33.36	$40.80	$63.40

Vision benefit highlights

VSP CHOICE NETWORK PROVIDERS		
BENEFIT	**STANDARD PLAN**	**PREMIUM PLAN**
Exam *(every 12 months)*	Covered in full	Covered in full
Retinal screening *(every 12 months)*	$39 copay, or $0 copay at a Premier Program location	$39 copay, or $0 copay at a Premier Program location
Prescription glasses *Lenses (every 12 months)*	▪ Covered in full after $10 copay ▪ Single vision, lined bifocal and lined trifocal lenses ▪ Polycarbonate lenses for dependent children	▪ Covered in full after $10 copay ▪ Single vision, lined bifocal and lined trifocal lenses ▪ Polycarbonate lenses for dependent children ▪ Anti-reflective coating, all types, $25 copay
Frames	▪ Every 24 months, frame of your choice is covered up to $180 plus 20% off any out-of-pocket costs. ▪ KidsCare coverage allows frame replacements for children every 12 months	▪ Every 12 months, frame of your choice is covered up to $230, plus 20% off any out-of-pocket costs ▪ Second pair of prescription glasses or contacts, every 12 months after $10 copay, same copays as first pair benefit
Computer glasses *(frames & lenses)*	▪ Frames every 24 months, covered up to $175 after $25 copay ▪ Lenses prescription specific for computer use, includes anti-reflective and blue light-filtering	▪ Frames every 12 months, covered up to $175 after $25 copay ▪ Lenses prescription specific for computer use, includes anti-reflective and blue light-filtering
Contact lens care *(every 12 months, in lieu of prescription glasses)*	▪ When you choose contacts instead of glasses, your $180 allowance applies to the cost of your contacts ▪ The contact lens exam (fitting and evaluation) is in addition to your vision exam and is covered in full after $60 copay. ▪ If you choose contact lenses, you will be eligible for a frame 12 months from the date the contact lenses were obtained	▪ When you choose contacts instead of glasses, your $230 allowance applies to the cost of your contacts ▪ The contact lens exam (fitting and evaluation) is in addition to your vision exam and is covered in full after $60 copay. ▪ If you choose contact lenses, you will be eligible for a frame 12 months from the date the contact lenses were obtained
LightCare *(in lieu of prescription glasses or contacts)*	Ready-made non-prescription sunglasses or blue light-filtering glasses, every 24 months, covered up to $180 after $10 copay	Ready-made non-prescription sunglasses or blue light-filtering glasses, every 12 months, covered up to $230 after $10 copay

Out-of-network reimbursement *(for both Standard Plan and Premium Plan)*

Get the most out of your plan with a VSP network doctor. Call **VSP's Member Services at 800-877-7195** for out-of-network plan details.

Savings and spending accounts | *WEX*

Want an easy way to save on out-of-pocket health care and commuter expenses? Contributions for these accounts are taken out through pretax payroll deductions, which lowers your taxable income.

Convenient payment options

- **WEX debit card.** New enrollees will receive an email with information about obtaining a new debit card for paying health care providers and health-related services (such as prescriptions).
- **Pay someone else.** Send payment directly to your health care provider.
- **Pay me.** File a claim online, by fax or mail for reimbursement.
- **Pay on-the-go.** Use the Benefits by WEX mobile app to file a claim from a mobile device.

Health Savings Account (HSA)

If you enroll in the HDHP A or HDHP B medical plans, you can:

- Make contributions through convenient pretax payroll deductions to an HSA with WEX.
- Use funds from your HSA to pay for qualifying non-preventive care (such as your deductible and coinsurance costs) and prescription drug, dental and vision expenses.

Who's eligible to contribute to an HSA?

To determine whether you are eligible to open and contribute to an HSA, visit wexinc.com/login/benefits-login.

If you enroll in Medicare and/or Social Security, you may not be eligible to make or receive HSA contributions and may be penalized if you do. Consult your personal tax adviser for more information.

Flexible Spending Accounts (FSA)

The company's Health Care Full Purpose and Limited Purpose FSAs help you save money on health care expenses by reducing your taxable income.

- **Health care full purpose FSA:** Use this FSA to reimburse yourself for certain medical, dental and vision expenses that are not paid by your health care plans. Professionals who enroll in an HSA are not eligible for the Health Care Full Purpose FSA; refer to the Limited Purpose FSA.
- **Health care limited purpose FSA:** If you enroll in the HDHP A or HDHP B medical plans and open an HSA, you can use this FSA to reimburse yourself for certain dental and vision expenses that are not paid by the plans. Professionals who have not enrolled in an HSA are not eligible for this FSA. Instead, they can elect the Full Purpose FSA.

Commuter FSA

Use your Commuter FSA to reimburse yourself for certain work-related transit or parking expenses.

FSA reminders

- **Enrollment required.** You must make a new election each year.
- **Deadline for incurred expense reimbursement:**
  - Current Professionals: Jan. 1 to Dec. 31, 2027.
  - Qualified Events: Effective date through Dec. 31, 2027.
  - New Hires: Date of hire through Dec. 31, 2027.
- **Deadline to submit expenses.** All 2027 claims must be submitted by March 31, 2028.
- **Use it or lose it.** If you do not meet the deadlines for incurring or submitting expenses, any money remaining in your account will be forfeited, according to IRS guidelines.
- **Keep your receipts.** The IRS requires you to provide proof of your expenses. Unsubstantiated claims may become taxable income.

Want more information? Visit wexinc.com.

QUESTIONS	HSA	FULL PURPOSE FSA	LIMITED PURPOSE FSA	COMMUTER FSA
What expenses can be paid from the account?	Medical expenses for you or your dependents, including prescription drugs, dental and vision.*	Medical expenses for you or your dependents, including prescription drugs, dental and vision.*	Dental and vision expenses only.*	Work-related transit or parking expenses.
Who is eligible?	Professionals enrolled in the HDHP A or HDHP B who are not covered by another non-qualifying health plan (e.g., Medicare).	Professionals not enrolled in an HSA.	Professionals enrolled in an HSA.	Professionals who have work-related transit or parking expenses.
Can the account be used with other accounts?	An HSA can be used with a Limited Purpose FSA. It cannot be used with a Full Purpose FSA.	Cannot be used with an HSA.	Designed to work with an HSA.	Yes
What are the tax benefits?	Contributions are tax-free; savings grow tax-free; and reimbursements for eligible health care expenses are tax-free.**	Contributions and reimbursements are tax-free.	Contributions and reimbursements are tax-free.	Contributions and reimbursements are tax-free.
Can unused amounts carry over?	Yes	No	No	Yes. Unused amounts will carry over month-to-month irrespective of plan year.
Can you take it with you if you leave your job or retire?	Yes	No	No	No
Does interest accrue?	Yes	No	No	No
Is there an annual contribution limit?	Professional: $4,500 Professional plus one or more: $9,000	$3,400***	$3,400***	Transit: $340 per month*** Parking: $340 per month***
Are catch-up contributions allowed?	Yes	No	No	No

Eligible expenses for savings and spending accounts are governed by the IRS. For information on what expenses are eligible, refer to IRS Publication 502 (health care expenses) available at irs.gov.
***Certain states do not allow HSA tax breaks.*
****These are the 2026 limits. At the time of publishing this brochure, the IRS had not released all the 2027 FSA contribution limits.*

Other benefits

Accident insurance | *Voya*

Accident insurance pays you benefits for specific injuries and events resulting from a covered accident that occurs on or after your coverage effective date**.

The Premium Plan provides a higher benefit payment compared to the Standard Plan. For a complete listing of payment amounts by plan, view the Schedule of Benefits at presents.voya.com/EBRC/CRAFT.

MONTHLY ACCIDENT INSURANCE CONTRIBUTIONS		
	STANDARD	PREMIUM
Professional	$3.48	$6.92
Professional + spouse/DP	$6.96	$13.88
Professional + child(ren)	$7.84	$15.60
Family	$11.32	$22.56

Hospital indemnity insurance | *Voya*

Hospital indemnity insurance pays a benefit if you have a covered stay in a hospital, critical care unit, or rehabilitation facility on or after your coverage effective date**.

The Premium Plan provides a higher benefit payment compared to the Standard Plan. For a complete listing of payment amounts by plan, view the Schedule of Benefits at presents.voya.com/EBRC/CRAFT.

MONTHLY HOSPITAL INDEMNITY INSURANCE CONTRIBUTIONS		
	STANDARD	PREMIUM
Professional	$9.28	$22.56
Professional + spouse/DP	$22.68	$49.64
Professional + child(ren)	$15.32	$42.16
Family	$28.72	$69.24

***See the product brochure, certificate of coverage and any applicable riders for a complete list of covered conditions, along with complete provisions, exclusions and limitations. These benefits are not health insurance and do not satisfy the requirement of minimum essential coverage under the Affordable Care Act.*

Disability Income Insurance, Accident Insurance, Hospital Confinement Indemnity Insurance and Critical Illness Insurance are limited benefit policies and are issued and underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Policy provisions and product availability may vary by state.

Critical illness insurance | *Voya*

Critical illness insurance pays a lump-sum benefit if you are diagnosed with a covered disease or condition on or after your coverage effective date*.

If you enroll in critical illness insurance coverage, you have access to the Wellness Benefit that provides a yearly benefit if you complete a health screening test, whether or not there were any out-of-pocket costs. The Wellness Benefit helps you maintain your health with tests that screen for a wide range of potential illnesses and diseases.

Coverage amounts:

Standard Plan:

- $15,000 Professional
- $7,500 Spouse or DP
- $7,500 Child(ren)

Premium Plan:

- $30,000 Professional
- $15,000 Spouse or DP
- $15,000 Child(ren)

Monthly critical illness insurance contributions**

YOUR AGE	STANDARD**		PREMIUM**	
	Professional only	Professional + spouse/DP	Professional only	Professional + spouse/DP
< 25	$4.80	$8.40	$9.60	$16.80
25-29	$4.80	$9.60	$9.60	$19.20
30-34	$9.60	$15.00	$19.20	$30.00
35-39	$9.60	$15.60	$19.20	$31.20
40-44	$10.80	$17.40	$21.60	$34.80
45-49	$15.60	$27.60	$31.20	$55.20
50-54	$27.60	$42.60	$55.20	$85.20
55-59	$32.40	$49.20	$64.80	$98.40
60-64	$37.20	$55.80	$74.40	$111.60
65-69	$38.40	$58.20	$76.80	$116.40
70+	$45.60	$69.00	$91.20	$138.00

***Your rate will increase as of your birth date when you move into a new age band throughout the year. All coverage tiers include coverage for eligible dependent children.*

Benefit payments for accident, hospital indemnity or critical illness insurance can be used for any expense you choose. For example, you can use it to help pay for expenses not covered by your insurance, deductibles, lost wages, child care, travel, home health care costs or any regular household expense — it's up to you. Visit presents.voya.com/EBRC/CRAFT for more information.

**See the product brochure, certificate of coverage and any applicable riders for a complete list of covered conditions, along with complete provisions, exclusions and limitations. These benefits are not health insurance and do not satisfy the requirement of minimum essential coverage under the Affordable Care Act.*

Accident Insurance, Hospital Confinement Indemnity Insurance and Critical Illness Insurance are limited benefit policies and are issued and underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Policy provisions and product availability may vary by state.

Hinge Health*

Hinge Health is a digital musculoskeletal (MSK) program, offering tools to help participants conquer back and joint pain, recover from injuries, prepare for surgery, and stay healthy and pain-free. They will assess the member's current condition and match them to a care team to personalize a treatment plan. This program is free for eligible participants.

A personalized treatment plan could include:

- A physical therapist
- A health coach
- Access to the Hinge Health app
- Virtual visits with the care team
- A kit with a tablet and tools to assist in guiding exercise therapy

To learn more, visit hinge.health/blackandveatch, call Hinge Health at 855-902-2777 or scan the QR code.

PathFinder*

PathFinder allows eligible members to complete their annual physical through a Virtual CheckUp with a doctor anytime throughout the year. The CheckUp screens for important health risks, ensures that members understand their results and are provided with preventive counseling on ways to promote a healthy lifestyle.

Completing a Virtual CheckUp with PathFinder is easy:

1. Visit portal.pfhcheckups.com/BVH-2027 to get started with your PathFinder Virtual CheckUp.
2. Sign up for a virtual visit and select where you want to complete your labs. You can complete your labs at a LabCorp service station or have a kit shipped to your home. Labs include A1c (blood sugar) and a complete lipid panel (total cholesterol, LDL, HDL, triglycerides).
3. Log into the secure patient portal using the link in your confirmation email to complete your personal health information (health history, biometrics, and vitals).
4. After completing steps two and three, access the patient portal to schedule a virtual appointment with a PathFinder doctor to review your lab results and discuss health options.

For more information, contact PathFinder at 847-686-7284 or via email at help@pathfinder-health.com.

Progyny*

Progyny is a comprehensive fertility and family-planning benefit, leveraging the latest technologies and treatments through a premier network of fertility specialists. Whether you want to learn more about your options, are trying to conceive, or are exploring fertility treatment, Progyny can support you each step of the way. Progyny removes barriers to care so you and your doctor can create the customized treatment plan that is best for you.

In addition to traditional fertility services, members have access to:

- Fertility and family building education
- A digital emotional support program
- Personalized emotional support and guidance from dedicated Patient Care Advocates (PCAs)

Members also have access to the Progyny member portal that provides access to:

- Educational resources
- View coverage details
- Review appointments
- View account and claims information
- Communicate directly with their PCA

For more information, contact Progyny at 866-988-5259.

TouchCare

TouchCare is your personal, concierge benefits assistant. They provide free, confidential assistance to help take the stress out of benefit navigation — all at no cost to you! TouchCare provides support for all your company benefits, not just health care.

TouchCare can help with:

- Finding in-network providers and scheduling appointments
- Getting health care cost estimates
- Reviewing claims and resolving billing challenges
- Explaining your benefits and answering questions in plain language
- And more

**Available to professionals and their eligible dependents who are enrolled in the BlueCross BlueShield (BCBS) medical plans: HDHP A, HDHP B, or PPO Plan. Additional eligibility requirements may apply.*

As part of TouchCare's commitment to helping professionals navigate the complexities of their benefit programs, all newly hired professionals are eligible to receive an individualized, one-on-one consultation of company benefits with a TouchCare Health Assistant.

For more information, contact TouchCare a 866-486-8242, log in to your member portal at touchcare.com, send them an email at assist@touchcare.com, or download the TouchCare mobile app by scanning the QR code.

Milk Stork

Breast milk delivery service

If you're a working, breastfeeding mom, let Milk Stork make your life easier by getting your breast milk safely home to your baby while you travel for company business.

SimpliFed

SimpliFed provides tele-lactation support to help new moms get access to breastfeeding support and infant nutrition support from the comfort and safety of their own homes from board-certified lactation consultants.

Visit milkstork.com/bv or call 510-356-0221 to use this benefit.

Nurture your **mental health**

Nurture your emotional and psychological health, and live your life with a sense of purpose and meaning.

Mental health resources

Employee Assistance Program | *SupportLinc by CuraLinc*

We know life can get tough sometimes, and we want you to know you're never alone. That's why the company has partnered with CuraLinc to bring you SupportLinc — a holistic employee assistance program. SupportLinc is a no-cost resource that helps professionals deal with life's challenges and the demands that come with balancing home and work. The program provides confidential services for a wide array of personal and work-related concerns, such as:

- Short-term counseling for depression, anxiety, relationship challenges, stress management, substance abuse, grief, anger management, family counseling, marital concerns, etc.
- Work-life benefits such as legal assistance, financial and ID theft consultation, and expert dependent care referrals.

SupportLinc's experts are available 24/7, day or night, by phone, video, email, text and live chat.

Eligibility for SupportLinc includes you, your spouse/DP and your dependents up to age 26 living in the same household.

SupportLinc is always by your side: Call, text, email or live chat with a SupportLinc expert 24/7. For more information, visit supportlinc.com and use username: bv.

Teladoc Mental Health Services

Not feeling like yourself? Teladoc Mental Health Services can get you back to feeling like yourself.

Professionals and their eligible dependents enrolled in the BCBS medical plans: HDHP A, HDHP B, or PPO Plan have the opportunity to build a relationship with an experienced therapist or psychiatrist of their choice by phone or video. Teladoc's experts provide support for:

- Anxiety, stress, depression
- Mood swings
- Not feeling like yourself
- Relationship conflicts
- Trauma and PTSD
- Medication management

Start making progress

1. Set up your account and fill out a brief medical history
2. Choose the expert you think will be the best fit for you
3. Pick the preferred dates and times that fit your schedule
4. Make progress from wherever you're most comfortable

Visit TeladocHealth.com/go, call 866-789-8155 or download the Teladoc app.

My Health Novel*

My Health Novel matches members to third-party, helpful resources based on their risk factors, interests, and engagement preferences. It helps members reach their health goals using digital tools, resources and programs customized to meet their needs, all at no cost to the member.

My Health Novel provides a spectrum of resources targeting behavioral health, weight management and women's health.

- **Behavioral health:** Includes best-in-class mindfulness and digital cognitive behavioral therapy offerings, addressing a continuum of mental health conditions, helping members reduce stress, improve sleep quality and increase happiness. Members may be eligible for behavioral health coaching, on-demand and live session programs, and mindfulness and meditation resources.
- **Weight management:** Whether a member is interested in starting new healthy habits or maintaining their weight, My Health Novel provides access to the best nutrition, physical activity and weight management tools, programs and apps available. Members may be eligible for health coaching, nutrition guidance, digital tools, group support and more.
- **Women's health:** Whether a member is dealing with pelvic pain, fertility challenges, breastfeeding or menopause, My Health Novel can provide help and solutions. Members may be eligible for virtual coaching, physical therapy advice and support from health care experts.

How it works:

1. Log in to your BCBS MyHealthToolkitKC.com account.
2. Select 'Wellness & Care Management,' then 'Wellness Programs,' then 'My Health Novel.'
3. Take a quick, one-minute assessment.
4. You'll receive your recommended program and resources available to you.

For more information, contact BCBS at **866-400-8941** or log in to your MyHealthToolkitKC.com account.

NOCD*

Obsessive Compulsive Disorder (OCD) is a severe and misunderstood chronic condition that affects 1 in 40 people.

NOCD offers effective and convenient OCD therapy. NOCD's licensed ERP-trained therapists help you get better; they have 24/7 support to make sure you stay better.

To schedule your live virtual sessions with a NOCD Network ERP Therapist and get support between sessions from peer communities and self-help tools, visit nocd.com.

Meru Health*

Meru Health is a groundbreaking mental health program that blends one-on-one therapist support with helpful digital tools and interactive practices to transform the way you think about your mental health.

Fast effective therapy

This personalized treatment program has been clinically proven to help people feel better in a matter of weeks.

Continuous care

Life happens between therapy appointments. So does Meru Health. That's why your therapist will be available via both scheduled video-call sessions and unlimited in-app chat.

Your dedicated therapist

You'll receive personalized support from a dedicated, licensed therapist who will customize feedback to your specific needs and circumstances.

Scan this code or visit meruhealth.com/cba.

*Available to professionals and their eligible dependents who are enrolled in the BlueCross BlueShield (BCBS) medical plans: HDHP A, HDHP B, or PPO Plan. Additional eligibility requirements may apply.

Equip

Professionals and their eligible dependents enrolled in the BCBS medical plans: HDHP A, HDHP B or PPO Plan have access to Equip. Equip provides virtual, evidence-based eating disorder treatment for children, teens, and adults across all 50 states. Their multidisciplinary team treats all eating disorder diagnoses and co-occurring conditions like anxiety, depression, and OCD — right from home, allowing patients to maintain daily routines. With personalized care and proven outcomes, Equip helps families achieve real recovery: 80% of patients report reduced symptoms, and many experience fewer school or work absences and less need for higher levels of care.

Scan the QR code or visit equip.health/treatment-now.

Bend Health

Professionals and their eligible dependents enrolled in the BCBS medical plans: HDHP A, HDHP B or PPO Plan have access to Bend Health. Bend Health offers personalized mental health care for children, teens, and young adults, with services ranging from general behavioral support to specialized treatment for conditions like ADHD, anxiety, depression, trauma, and more. Their care includes LGBTQIA+ affirming support, parenting guidance, and help with school, sleep, and technology-related stress. For more intensive needs, they provide a Virtual Intensive Outpatient Program (IOP) for ages 7–25, designed to address severe anxiety and depression over a 6–12 week period. Neuropsychological evaluations are also available to help families better understand and support their child's unique strengths and challenges.

Get started today by scanning the QR code.

Youturn Health

For professionals and their eligible dependents enrolled in the BCBS medical plans: HDHP A, HDHP B, or PPO Plan, Youturn Health is a confidential, virtual support program that helps you and your family manage stress, anxiety, and other behavioral health challenges that can lead to substance misuse. It offers peer coaching, resources, and an online learning library to guide you through triggers and promote healthier coping strategies.

Scan the QR code to learn more.

Within Health

Professionals and their eligible dependents enrolled in the BCBS medical plans: HDHP A, HDHP B or PPO Plan have access to Within Health. Within Health provides eligible members a personalized remote eating disorder treatment. The science-backed program embraces intuitive eating, body image restoration, radical self-love and acceptance, social and emotional therapy, and trauma-informed healing to bring patients virtual treatment that works. Within Health uses technology, connectivity, and therapeutic groups to enhance treatment and promote long-term recovery.

To learn more, visit within.health/cba, call Within Health at **866-559-3073** or scan the QR code.

MetLife grief counseling services

MetLife grief counseling services, offered through TELUS Health, provides confidential, no-cost support to professionals and their families during difficult times such as loss, serious illness, divorce, or job loss. The program includes up to five counseling sessions per event, available in person or by phone, and offers legal and financial consultations, funeral assistance, and online self-help resources. Services are available to help navigate grief and life changes with professional guidance and care.

Contact a TELUS health counselor by calling **888-319-7819** or visit one.telushealth.com: Username 'metlifeassist', password 'support'.

Build your **wealth**

Building your knowledge of finances while empowering you to make decisions for your future.

Life insurance | *MetLife*

Basic life insurance

The company provides you with basic life Insurance of one times your annual salary (rounded up to the next $5,000 increment), up to $500,000. If eligible, you have the opportunity to select more life insurance protection for you, your eligible spouse/DP and dependent child(ren) up to age 26.

Supplemental life insurance

You have the opportunity to enroll in amounts equal to one, two, three, four or five times your basic life insurance amount. The combined basic and supplemental life insurance maximum is $2,000,000.

As a new hire, if you elect supplemental life coverage for yourself in excess of three times your basic life insurance amount, you must complete and submit a Statement of Health form to MetLife for approval.

If you request to increase your existing supplemental life coverage by more than one increment, or make a late request for supplemental life coverage, you must complete and submit a Statement of Health form to MetLife for approval.

Dependent life insurance

- You may enroll in coverage for your spouse/DP, your dependent child(ren) or both.
- For spousal/DP coverage, monthly premiums are calculated on the amount of insurance selected and are based on your age, not the age of your spouse/DP.
- You must complete and submit a Statement of Health form to MetLife for approval if you enroll in insurance coverage for your spouse/DP in excess of $50,000. Your spouse/DP will be enrolled at up to $50,000 until you receive notice of approval or denial.
- You may choose life insurance for your child(ren) in the amounts of $10,000 or $20,000 without completing a Statement of Health form.

Monthly supplemental and dependent life insurance rates*

YOUR AGE:	RATE PER $1,000 OF COVERAGE:
< 30	$0.034
30-34	$0.034
35-39	$0.044
40-44	$0.059
45-49	$0.093
50-54	$0.147

YOUR AGE:	RATE PER $1,000 OF COVERAGE:
55-59	$0.230
60-64	$0.407
65-69	$0.715
70+	$1.648
Child: $10,000 or $20,000	$0.152

You may choose spouse/DP life insurance amounts in increments of $25,000, ranging from $25,000 to $250,000.

Credit Union

The BV Credit Union provides convenient, high-quality, competitive, personalized financial services that are responsive to the changing needs of its members. The Credit Union offers superior loan and savings products, while operating in a financially prudent and efficient manner. Call 913-458-2739 or 800-348-0119 for more information.

Bank of America

The BofA Rewards Preferred Plus program offers benefits, resources and rewards based on the ways you save, spend and borrow.

More details can be found at go.bofa.com/14755_BV.

PerkSpot

Provides you with exclusive discounts and perks. Access at work, home or on the go.

Visit blackandveatch.perkspot.com to take advantage of this benefit.

To learn more about the Statement of Health form requirement, scan this QR code to view this helpful video from MetLife.

Retirement plan | *Schwab*

The Construction 401(k) Plan is a convenient way to save for your retirement.

The Construction 401(k) Plan benefits include:

- Pre-tax and after-tax Roth 401(k) savings options
- Company matching contributions (made quarterly)
- A broad selection of quality investments
- Automatic payroll deductions
- Convenient account access

In-plan Roth rollover

Convert all or **part** of your **eligible balances to Roth savings** while leaving the funds in your plan account.

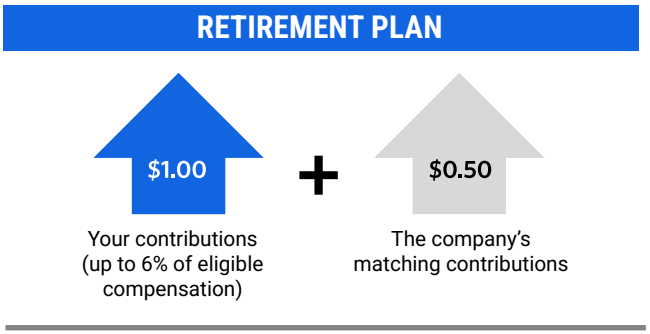
Converted pre-tax amounts are taxable in the year of conversion. Consult a tax advisor to determine whether an in-plan Roth rollover is right for you.

How the plan works

You are immediately eligible to participate in the plan on your date of hire unless you are:

- A leased professional
- Represented by a collective bargaining agreement
- A non-resident alien with no U.S. source income
- An independent contractor or contract worker
- An intern
- Not employed in a craft job classification

How matching contributions work



You can contribute 1% to 60% of your eligible compensation, and bonus payments, up to the annual IRS limits, via separate base and bonus deferral elections. You may choose to make pretax or Roth contributions or a combination of the two. The company will match your retirement plan contributions 50 cents on the dollar (or 50%) on the first 6% of your own contributions.

If you will be age 50 or older by year-end, you may be eligible to make catch-up contributions. Employees ages 50-59 and age 64 or older can make the standard catch-up contribution allowed by the IRS. Employees ages 60-63 may be eligible for a higher catch-up contribution limit. IRS limits are updated annually. Visit workplace.schwab.com for current limits. Catch-up contributions may be made on a pre-tax and/or Roth 401(k) basis.

What this means for you

When you contribute at least 6% of your pay to your retirement plan account, you will receive the maximum 3% company match. That means your total savings will equal 9% of earnings annually.

Vesting

Your contributions are always 100% vested, meaning you own them immediately. You are fully vested in company matching contributions as shown below.

YEARS OF SERVICE	THE COMPANY'S MATCHING CONTRIBUTIONS, %
0-1	0
2	0
3	100

Investment options

The Plan lets you decide how best to save for retirement by giving you the option to choose from a variety of investment funds. As always, your investment portfolio should reflect your age, risk tolerance and overall savings goals. As you consider your investment options, think about what level of involvement you'd like to have in managing your account.

A "low maintenance" approach — Target retirement funds

- Offers a diversified portfolio in a single fund based on your target retirement date
- Is automatically managed to invest more conservatively as you get closer to retirement age

A "hands-on" approach — Build your own portfolio

- Offers a choice from individual core funds selected and monitored by the company to create your own unique portfolio

  OR

- Provides even more investment options; contribute up to 95% of your contribution to a self-directed Personal Choice Retirement Account (PCRA) through Schwab

Retirement planning support

Retirement plan advice powered by Morningstar® Retirement Manager℠ is available at no additional cost. This tool can help you:

- Create a personalized retirement strategy
- Set financial goals and identify steps to achieve them
- Consider the right contribution rate and investments for you

Visit workplace.schwab.com to learn more.

You can start, stop or change your contributions at any time through your Schwab account at workplace.schwab.com, via chat or by calling Participant Services at **800-724-7526** Monday through Friday, 8 a.m. to 10 p.m. ET.

You can also download the Schwab Workplace Retirement App for convenient access to your retirement account on the go.

Accidental death & dismemberment (AD&D) insurance | *Zurich*

The company provides you with basic AD&D insurance of one times your annual salary (rounded up to the next $5,000 increment), up to $500,000. If eligible, you have the opportunity to select more AD&D insurance protection for you, your eligible spouse/DP and dependent child(ren) up to age 26.

You can enroll in or change coverage without the need to obtain insurance approval or submit a Statement of Health form.

Supplemental and dependent AD&D insurance

COVERED PERSON	BENEFIT AMOUNT	RATES
Professional	$25,000 increments up to $500,000 *(for amounts above $300,000, up to 10 times annual salary maximum)*	$0.018 per $1,000
Spouse/DP	Your spouse or DP will be insured for 60% of your principal sum if there are no dependent children covered.	$0.030 per $1,000
Child(ren)	If you have no spouse or DP, each dependent child will be insured for 20% of your principal sum.	$0.030 per $1,000
Family	Spouse or DP *(50% of your principal sum)* *PLUS* child(ren) *(10% of your principal sum)*	$0.030 per $1,000

Short term disability income insurance | *Voya*

Life doesn't stop when you're unable to work. If an eligible illness or injury leaves you unable to work, short term disability income insurance provides benefits to replace up to 50% of your weekly earnings for 26 weeks. These weekly benefits help you focus on getting better, and when possible, back to work. Please note that new enrollees are subject to a pre-existing condition limitation. If you received medical treatment, advice, care or services, including diagnostic measures, or took prescribed drugs or medicines in the three months prior to your effective date, any disability for that condition would not apply until you are covered under the plan for 12 months from the effective date.

For additional information visit presents.voya.com/EBRC/CRAFT.

SHORT TERM DISABILITY INCOME INSURANCE RATES*	
Professional's age	**Monthly rate per $10 of weekly benefit**
Under 40	$0.88
40-49	$1.00
50-59	$1.60
60+	$2.52

Coverage Amount Minimum: $15 per week; Coverage Amount Maximum: $750 per week.
**Your rate will increase as of your birth date when you move into a new age band throughout the year*

Business travel accident insurance | *Zurich*

Professionals get $250,000 of business travel accident insurance as additional life insurance protection when traveling for business.

Legal plan | *MetLife Legal Plan*

The company offers MetLife Legal Plan, a MetLife Company.

Choose from two legal plans:

Standard Plan

Enrolling in this plan provides you with convenient access to a wide range of legal services such as:

- Court appearances
- Document review and preparation
- Money matters
- Digital estate planning
- Family law
- Real estate matters
- Will and trust preparation
- Reproductive matters
- LGBTQ+ matters

Premium Plan

Enrolling in this plan provides you with all of the services listed above under the Standard Plan, plus tax preparation services, and caregiving services. Additionally, the following services are available to your parents and parents-in-law:

- Money matters
- Family and personal matters
- Home and real estate matters
- Estate planning documents
- Elder care matters

MetLife Legal Plan provides you with telephone and office consultations for an unlimited number of matters with any attorney, anywhere or anytime. For more information on the legal plans, visit info.legalplans.com.

You pay the full cost of this benefit.

Monthly legal plan contributions:

Standard Plan: $17.24
Premium Plan: $22.44

Identity theft and cyber protection services

Norton LifeLock

The company offers comprehensive identity monitoring, fraud detection, privacy management, cybersecurity protection, financial recovery assistance, and expert restoration services to help individuals and families prevent, detect, and recover from identity theft and online threats through Norton LifeLock. Plan features include identity and credit monitoring and alerts, identity theft insurance up to $5 million, 24/7 customer service and recovery support and much more.

Coverage is available at the following monthly rate:

Benefit Premier Plus:
Professional: $7.96
Family: $14.64

For more information about what's covered, contact Norton LifeLock customer service at 800-543-3562. For more information, visit Norton.com/PremierPlus.

Student loan assistance

MetLife + Savi

Want to minimize your student loan debt? MetLife + Savi Student Loan Assistance is a digital service that can help minimize your student debt. Savi helps borrowers better understand their debt, lower their payments, and enroll in a plan that will help them on their path to student loan freedom.

MetLife + Savi helps you:

- Identify the programs you qualify for.
- Navigate the application process.
- Increase your chances for approval.

How it works:

- **Calculate** – tell Savi about you and your loans to see all available options.
- **Review** – compare all your repayment and forgiveness options side-by-side.
- **Enroll** – pick a plan and quickly enroll to get ongoing advice, tools, and information.

For more information and to get started go to blackandveatch.bysavi.com/metlife.

Cultivate your **social**

Cultivating your sense of belonging and connection with others while empowering you to find balance.

Time off

The company provides professionals with several types of paid time off.

For complete policy details for time away from work and to learn how to schedule time off, refer to your OCI Employee Guidebook.

Holidays

The company recognizes seven days (56 hours) of paid holiday time. All regular, full-time, active professionals become eligible to receive the holidays listed below when they have completed one (1) year of cumulative service.

HOLIDAY	HOLIDAY HOURS
New Year's Day	8
Memorial Day	8
Independence Day	8
Labor Day	8
Thanksgiving Day	8
Christmas Day	8
Floating holiday	8

Vacation

The company provides vacation with pay to certain eligible, regular, full-time professionals. Part-time and temporary professionals are not eligible for paid vacation. Regular, full-time professionals become eligible for vacation when they have completed one (1) year of cumulative service. Vacation shall be granted based on a professional's current Grade Level, as follows:

Grade levels 01, 02 and 03:
Less than five years of cumulative total service: 40 hours of vacation credit after one year of cumulative service, and shall accrue at the rate of 3.33 hours per month thereafter, which equates to 40 hours of vacation per year. Five or more years of total service: vacation shall accrue at the rate of 6.66 hours per month, which equates to 80 hours of vacation per year.

Grade levels 04 and above:
Full-time professionals hired or rehired into Grade Level 04 or higher shall receive 80 hours of vacation credit after one full year of cumulative service and shall accrue vacation thereafter at the rate of 6.66 hours per month.

Full-time professionals promoted into Grade Level 04 or higher shall accrue vacation at the rate of 6.66 hours per month starting on the effective date of the promotion, once the eligibility period is reached.

Pet insurance* | *Pets Best*

Your pets are a significant part of your and your family's lives, which is why it is important to keep them safe and healthy. Our partnership with Pets Best can help reduce the stress, heartache and uncertainty associated with unexpected events. Pets Best provides flexible pet insurance coverages at a discounted group rate. To get more information and enroll go to petsbest.com/BVPets or call 888-984-8700 reference discount code: BVPets.

**Not available to professionals in Puerto Rico.*

Who's eligible for coverage

Under the company's benefits program, eligible dependents include:

- Your legal spouse
- Your same or opposite sex domestic partner (DP)
- Your children, or children of your spouse or DP, who are under age 26
- Your unmarried children who are over age 26, permanently and totally disabled, do not provide more than 50% of their own support and live with you for more than half the year

Children include biological children; stepchildren; adopted children; children placed for adoption; children whom you, your spouse or DP are legally obligated to support; and children for whom you or your spouse or DP are the legal guardian.

If you and your spouse, DP or dependent child(ren) work at the company, you cannot be covered as both a professional and a dependent under any of the company's benefits plans. More details about eligibility can be found in the benefit plan documents by contacting the OCI HR Support Center at 913-359-1619 or HROCI@hrsupport.bv.com.

Covering a DP and/or DP's child(ren)

If you enroll in DP coverage, you will need to submit a DP Affidavit. During enrollment, you must identify your eligible DP and/or your DP's dependent child(ren) who will be covered under your health plans. Benefits for a DP, or child(ren) of a DP, are purchased after taxes. The total value of your DP's and DP's child(ren)'s benefits is considered imputed (taxable) income.

Dependent verification

After you enroll, you must show proof of eligibility (such as a marriage certificate, birth certificate or DP registration) to HMS, a Gainwell Technologies Company, to provide coverage for your newly enrolled dependents in the medical, dental and/or vision plans. HMS will contact you with details about how to complete the verification process.

If you fail to complete the dependent verification process with HMS, your unverified dependents will not be eligible for coverage under the medical, dental and vision plans, and their coverage under these plans will be terminated.

When you can make changes

Consider your benefit elections carefully. You will not have an opportunity to change your elections until the next Open Enrollment period – unless you have a qualifying event or a change in family status.

Examples of a qualifying event or change in family status include:

- Marriage, divorce or legal separation
- Birth or adoption of a child
- Change in work status for you or your spouse or DP
- Death of your spouse or DP
- Loss of coverage in another group health plan

If you have a change in family status, you must notify your site HR Representative or the OCI HR Support Center within 30 days from the date of the event to make changes to your benefits plan(s). To request more information about a special enrollment (or if you experience a change in family status), contact the OCI HR Support Center at 913-359-1619 or HROCI@hrsupport.bv.com.

Important notices

Plan documents

As a participant in the company's benefit plans and programs, it is your responsibility to read the benefit plan documents and policies and to understand how they apply to you and your family.

If you would like a copy of your plan documents (e.g., Summary Plan Description, Certificate of Coverage, Summary of Benefits and Coverage) or have any questions about the plan options or about any Summary of Material Modification and how it affects your coverage, please contact the OCI HR Support Center at 913-359-1619 or HROCI@hrsupport.bv.com.

Legal notices

If you would like a copy of the following legal notices, please contact the OCI HR Support Center at 913-359-1619 or HROCI@hrsupport.bv.com:

- Children's Health Insurance Program (CHIP)
- Construction 401(k) Plan QDIA Notice
- Continuation Coverage Rights Under COBRA
- Health Insurance Marketplace Coverage Options and Your Health Coverage
- HIPAA Notice of Special Enrollment Rights
- Illinois Consumer Coverage Disclosure
- Medicare Part D Notice
- Newborns' and Mothers' Health Protection Act Notice
- Notice of Privacy Practices
- Women's Health and Cancer Rights Act (WHCRA) Notice
- Your Rights and Protections Against Surprise Medical Bills

Life insurance and AD&D continuation

If you become ineligible for active life insurance and/or AD&D insurance through the company, you may be able to port or convert some or all of your current coverage to an individual plan or policy with the carriers. Information regarding your rights to portability or conversion of coverage may be obtained by contacting the OCI HR Support Center at 913-359-1619 or HROCI@hrsupport.bv.com. Applications for portability/conversion must be submitted to the carriers within 31 days after active coverage ends.

Benefits during extended leave

If you are on a leave of absence of 180 days or longer, all of your active benefits through the company will end. You may have the option of continuing benefits through the Consolidated Omnibus Budget Reconciliation Act (COBRA), portability and/or conversion. Contact the OCI HR Support Center at 913-359-1619 or HROCI@hrsupport.bv.com for more information.

Contacts

OCI HR Support Center
913-359-1619
HROCI@hrsupport.bv.com

Benefits concierge service
TouchCare
866-486-8242 | assist@touchcare.com
touchcare.com/ask

Plan information
bvtotalrewards.com

Employee assistance program
SupportLinc by CuraLinc
888-881-LINC (5462) | supportlinc.com
Username: bv
Text 'support' to 51230

Medical
BlueCross BlueShield
833-644-1298 | MyHealthToolkitKC.com

Prescription drug
Express Scripts
800-398-5164 | express-scripts.com

Pre-enrollment website:
express-scripts.com/blackandveatch

Teladoc Health
866-789-8155 | TeladocHealth.com/go

Digital musculoskeletal program
Hinge Health
855-902-2777 | hinge.health/blackandveatch
hello@hingehealth.com

Dental
Delta Dental of Missouri (Group number: 6945-2000)
800-335-8266 | deltadentalmo.com

Vision
VSP (Group number: 12296989)
800-877-7195 | vsp.com

Identity theft and cyber protection services
Norton LifeLock
800-543-3562 | norton.com/PremierPlus

Health savings account, and health care and commuter FSA
WEX
866-451-3399 | wexinc.com/login/benefits-login
customerservice@wexhealth.com
Pre-enrollment phone: 844-561-1337

Life and FMLA
MetLife (Group number: 139705)

FMLA | 877-638-8262
Life insurance | 800-638-6420 | metlife.com/mybenefits

Retirement plan
Schwab Retirement Plan Services
800-724-7526 | workplace.schwab.com

Accident, critical illness, hospital indemnity and short term disability income insurance
Voya
877-236-7564 | presents.voya.com/EBRC/CRAFT

Legal plans
MetLife
800-821-6400 | info.legalplans.com

BV Credit Union
913-458-2739 | 800-348-0119
bvcreditunion.com | info@bvcreditunion.com

Bank of America
go.bofa.com/14755_BV

Student loan assistance
MetLife + Savi
blackandveatch.bysavi.com/metlife

Fertility & family planning
Progyny
866-988-5259 | progyny.com

Milk Stork
510-356-0221 | milkstork.com/bv

PerkSpot
blackandveatch.perkspot.com

Pet insurance
Pets Best
888-984-8700 | petsbest.com/BVPets
Discount code: BVPETS

Return to table of contents

This brochure provides highlights and is not a complete, detailed description of your benefits plans. While every effort has been taken to accurately reflect your benefits, discrepancies or errors are always possible. In case of discrepancies between this brochure and the actual plan documents, the actual plan documents will prevail. This brochure is not a substitute for the official plan documents nor is it an employment contract. The company does not intend to terminate or change the plans in the near future; however, the company reserves the right to amend or terminate the program in whole or in part at any time. Benefits administered by BVH, Inc. (the company).

© Black & Veatch Corporation, 2026. All Rights Reserved. The Black & Veatch, Diode Ventures and Overland Contracting Inc. names and logos are registered trademarks of Black & Veatch Corporation. REV 2026-10

Empowered Well Being