



BUILDING HISTORY

Open Enrollment Benefits Guide 2024

DBMG

Phoenix Shop Employees



BANKER
STEEL



Graywolf®

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CONSTRUCTORS





BUILDING HISTORY

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Welcome

Each year I look back on the successes that we've enjoyed, the challenges we've faced and the progress that we've made. Without fail, I am humbled by the efforts of our men and women and recognize that each of you are what makes our Company what it is today. Your dedication, innovation, and hard work makes success possible, challenges achievable and the overall journey worthwhile.

Two years ago, we began a process to harmonize our benefits offerings, with the goal of offering the same benefit options to all employees across our family of companies. This endeavor allows us to continue providing robust coverage, minimize cost increases for employees and offer additional coverage options. We have made significant progress towards this goal and last year we fully harmonized our medical plan offerings to our employees across the platform. For 2024, we are continuing our harmonization efforts focusing on the other aspects of benefits such as life insurance, and short-term and long-term disability.

As with most things, the cost of insurance has also increased this year. We appreciate the efforts of all our employees, and we are committed to providing solid, affordable coverage options. Therefore, the Company has chosen to shoulder the bulk of the cost increase to minimize the increase of these insurance premiums. Overall, the Company covers over 75% of the cost of medical benefits.

There are no carrier or coverage changes for medical, dental or vision this year. However, I am thrilled to share that we are expanding the benefit package to include the following:

- Employer paid life insurance for both office and shop employees
- Employer paid short-term disability for both office and shop employees
- Employer paid HSA contribution (\$400 employee / \$800 family)

This year our enrollment process is **active** for Graywolf employees, meaning that your elections will not carry forward and you must enroll to have coverage in 2024. Graywolf employees will now be able to elect benefits directly through ADP. Our benefits team is available to help Graywolf employees through this process.

For all other employees, it's a passive enrollment meaning that your elections will carry forward into 2024. Employees can make benefit changes using the same platforms that were used last year. Please note that you must enroll in Health Savings Account and Flexible Spending Account as enrollment in these plans cannot carry forward.

As I look ahead to 2024, I want to thank each of you for your continued commitment to making DBM Global and our platform of companies the best in class. I truly believe that people are the backbone of any business, and simply put - we have best people in the business.

Sincerely,



Rustin Roach

Benefits Overview

DBMG is committed to providing you a comprehensive benefit program. That is why a large portion of your monthly premium is paid by the company and you share the cost for others, as shown below:

Benefit	Who Pays	Tax Treatment
Medical Coverage	DBMG and You	Pre-Tax
Dental Coverage	DBMG and You	Pre-Tax
Voluntary Vision Coverage	You	Pre-Tax
Health Savings Account	DBMG and You	Pre-tax
Basic Life and AD&D	DBMG	N/A
Voluntary Life and AD&D	You	Post-Tax
Company Paid Short-Term Disability (STD)	DBMG	N/A
Voluntary Long-Term Disability (LTD)	You	Post-Tax
Ancillary Coverage: Accident Critical Illness Hospital Indemnity Universal Life	You	Post-Tax
Flexible Spending Accounts Healthcare Flexible Spending Account Limited Flexible Spending Account Dependent Flexible Spending Account	You	Pre-Tax
Business Travel Accident Insurance	DBMG	N/A
InfoArmor Identity Theft & Credit Protection	You	Post-Tax
Pet Insurance	You	Post-Tax

About this Guide

This guide highlights your benefits. Official plan and insurance documents govern your rights and benefits under each plan. For more details about your benefits, including covered expenses, exclusions, and limitations, please refer to the individual summary plan descriptions (SPDs), plan document, or certificate of coverage for each plan. If any discrepancy exists between this guide and the official documents, the official documents will prevail.

Medicare Part D Notice

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please see your legal notices for more details.

Open Enrollment Instructions

How to Enroll on Your Own

If you need to take action at this year's enrollment, be sure to visit Paycom via your computer or smart phone. Paycom is the portal for your benefit information including your Summary Plan Descriptions, Summary of Benefit Coverages, and allows you to make benefit elections. To enroll, follow these steps:

1. Log into the Paycom app. From the Notification Center or from the Benefits section, click the current year's Benefits Enrollment.
2. Review the initial instructions and click "Start Enrollment". Then, enter your personal information and any dependents or beneficiaries.
3. After reading each benefit plan, choose your coverage, and then elect either to enroll or decline.
4. To complete enrollment, click "Finalize", then "Sign and Submit."

LiveWise

We encourage you to check out our benefits website at <http://LiveWise.Info>. This site was designed with you in mind and provides you and your family with great information on all benefits DBMG offers!



Improved member experience makes benefits information convenient and simple.



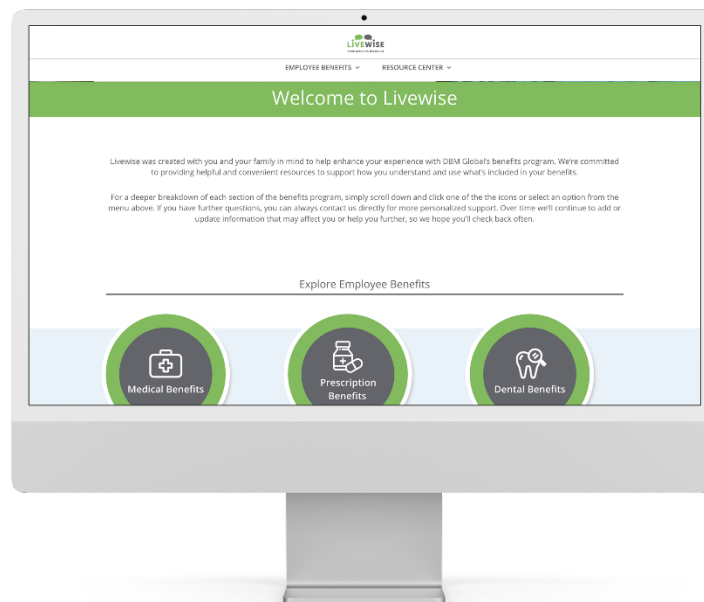
No password needed spouses and dependents can access the site, as well.



Access important websites, all from one central, easy-to-read page.



Learn more about your benefits and find helpful resources.



Eligibility and Enrollment

Eligibility

Employees: eligible for DBMG benefits if a full-time employee who is working 30 or more hours per week.

Dependents: eligible based on the following guidelines:

- Your legal spouse.
- You or your legal spouse's eligible children up to age 26 regardless of marital or student status.
- Dependent children including natural children, stepchildren, foster children, adopted children, dependent children placed with you for adoption, and other children, for whom the courts have granted you legal custody of.
- Disabled Dependent Children – an unmarried child of any age who is incapable of supporting themselves due to a mental or physical disability and who are dependent on you.

What Happens If You Become Eligible for Benefits

When you are a newly hired/eligible employee:

You will receive an enrollment announcement with the opportunity to enroll in benefits that are available to you.

You must enroll in benefits within 30 days of your eligibility date. You are eligible for benefits the 1st day of the month following 60 days of employment/eligibility. Additional documentation may be required to process your benefit elections.

Qualifying Life Events

You have 30 days from the date of any Qualifying Life Event to make a change to your current benefits.

Qualifying Events include:

- Birth / Adoption
- Child Status Change
- Death of a Dependent
- Marriage or Divorce
- Spouse Gains / Loses Coverage
- Team Member Loses Coverage

Important Terms

Health care can be difficult to navigate, and the jargon can further complicate your understanding of benefits. Here's a break down to help you better understand your benefits, bills and coverage.

Deductible

The amount you must pay out-of-pocket for medical expenses before the insurance company will cover any benefit costs for the year. If your deductible is \$2,000, your insurance plan will begin to help with payments once you've reached that amount. Review your plan to see which expenses count toward your deductible.

Remember, in-network preventive care visits are always 100% covered.

Out-of-Pocket Maximum

The most you would possibly pay out-of-pocket for covered services in a year. Once you reach your out-of-pocket maximum, your plan covers all eligible expenses. **This does not include your monthly premium contribution.**

Premium

This is the base amount you pay every month through a payroll deduction for health care coverage, whether or not you use the insurance.

Coinsurance

The cost share between you and the insurance company. Coinsurance is always a percentage totaling 100%. For example, if the plan pays 80%, you are responsible for paying the remaining 20% of the cost. The coinsurance applies only once the deductible has been met.

Copay

A flat fee paid to your provider at the time of service. You may spend more once you're there (as an example, additional tests, labs, etc.), but regardless, you still have to pay the flat fee. You might also pay copays for prescription drugs.

Claim

A medical IOU. When you visit providers, they will submit claims to your insurance company for the services you received (remember the tests and labs mentioned above?). Once your insurance pays its share, you'll receive a bill for the rest.

Medical and Pharmacy

Your medical benefits are administered by UnitedHealthcare (UHC). DBMG will continue to offer two POS plans, as well as a High Deductible Health Plan (HDHP). For complete benefit information, limitations and exclusions, please refer to your UHC Summary of Benefits and Coverage (SBC). The deductible(s), copays and coinsurance shown below are your responsibility.

UHC Medical Benefits			
	UHC \$500 Deductible	UHC \$2,000	UHC HDHP with HSA
	In-Network	In-Network	In-Network
Annual Deductible (Individual / Family)	\$500 / \$1,000	\$2,000 / \$4,000	\$3,200 / \$6,400
Annual Out-of- Pocket Max (Individual / Family)	\$5,500 / \$11,000	\$8,150 / \$16,300	\$5,000 / \$10,000
Preventive Services	No charge, covered 100%	No charge, covered 100%	No charge, covered 100%
Primary Care Office Visit (Designated Network / Network)	\$25 / \$50	No charge, covered 100%	30% after deductible
Specialist Office Visit (Designated Network / Network)	\$50 / \$80	\$95 Copay	30% after deductible
Diagnostic Lab and X-ray	20% after deductible	20% after deductible	30% after deductible
Inpatient Hospital	20% after deductible	20% after deductible	30% after deductible
Outpatient Surgery	20% after deductible	20% after deductible	30% after deductible
Urgent Care	\$50 Copay	\$50 Copay	30% after deductible
Emergency Room	\$400 Copay	\$400 Copay + 20% after deductible	30% after deductible

UHC Pharmacy Benefits			
	UHC \$500 Deductible	UHC \$2,000 Deductible	UHC HDHP with HSA
	In-Network	In-Network	In-Network
Preventive RX	Not Applicable	Not Applicable	Preventive Rx covered at 100%
Generic	\$10 copay	\$10 copay	\$10 copay, after deductible
Preferred Brand	\$35 copay	\$35 copay	\$35 copay, after deductible
Non-preferred Brand	\$70 copay	\$70 copay	\$70 copay, after deductible

UHC Resources

UHC Designated Network

Pay lower copays on the \$500 Deductible Plan Option

Choosing a care provider can impact the quality and cost of care you receive. With UHC, they have made it easier for you to find doctors who are right for you and your family.

Studies show that people who actively engage in their healthcare decisions have fewer hospitalizations, fewer emergency visits, higher utilization of preventive care and overall lower medical costs.

You can take an active part in your health by seeking out and choosing a Tier 1 (Designated Network) provider when you need care. Not only can you be assured you are receiving great care, but you will be saving money while doing so!

The Tier 1 (Designated Network) is designed so you pay less when you see a Tier 1 doctor or specialist. This list of Tier 1 providers is updated annually!

Preventive Rx

Covered in full on the High Deductible Health Plan (HDHP)

Preventive care benefits are an essential part of a comprehensive healthcare plan, including preventive medications. If you are choosing to enroll in the High Deductible Health Plan, effective January 1, 2024, preventive medications are covered in full, beginning on the first day. Below are a few examples of medical conditions for which medications would be included on the Preventive Rx Drug List.

- Breast Cancer Prevention
- Blood Clot/Platelet Therapy
- High Blood Pressure
- High Cholesterol
- Organ Rejection – Immunosuppressant
- Osteoporosis
- Birth Defects – Prenatal Vitamins
- Diabetes
- Asthma/COPD

For a comprehensive list, please see the full preventive care formulary at <http://LiveWise.info>.

TIER
1

Look for the Tier 1 blue dot when searching for a doctor on www.myuhc.com or the UHC app, and you may be surprised by how much you can save. Many of you are already seeing Tier 1 doctors!

UHC Resources (Continued)

UHC Mental Health Assistance

Employee Assistance Program (EAP)

You have unlimited, 24/7 access to EAP specialists who can provide in person referrals to one of UHC's 180,000 network clinicians nationwide. In addition to confidential consultations and counseling, EAP has solutions to help address issues before they escalate, and legal and financial coaching. You can receive an annual referral for up to 3 face to face visits with an in-network EAP provider.

Sanvello

You are eligible to receive premium access at no charge for Sanvello, an app created by psychologists empowering individuals to help engage in activities that improve your mental health anytime, anywhere. The app includes daily mood tracking, coping tools, guided journeys personalized to YOUR NEEDS, and community support.

Live and Work Well

[Liveandworkwell.com](https://liveandworkwell.com) is a UHC site specifically designed to provide behavioral health support. There are 100s of articles, videos, interactive self-help programs, and other tools to assist you with the stresses of everyday life. You can also search to find behavioral health providers and get access to the EAP.



UHC Perks and Programs

UHC Rewards

You can earn up to **\$300** for completing health and wellness activities. With UHC Rewards, a variety of actions – including many things you may already be doing – lead to rewards. The activities you go for are up to you – same goes for ways to spend your earning. Here are some ways you can earn:

Reach daily goals

- Track 5,000 steps or 15 active minutes each day, or double it for an even bigger award
- Track 14 nights of sleep

Complete on-time reward activities

- Go paperless
- Get a biometric screening
- Take a survey
- Connect a tracker

Cancer Support Program

With the Cancer Support Program, dedicated cancer nurses will help you find information and emotional support for you and your family. They will work with you throughout your cancer journey. Call the member services phone number on your ID card for more information.

Tobacco Cessation Program

Quit for Life has helped more than 3.5 million tobacco users quit for good. It's a personal support program available at no additional cost to you. Choose from a variety of online tools and get access to a Quit Coach and a mobile app to customize a quit plan to help you break free from tobacco.

Sign in to your myuhc.com account or visit the UnitedHealthcare app to register.



Contact your EAP 24/7 at
(888) 887-4114



2024 Employee Medical Rates

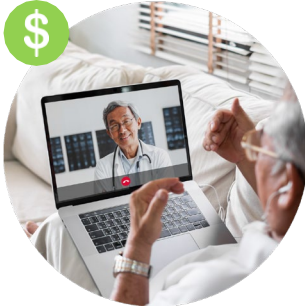
The medical rates for active, full-time employees are effective from January 1, 2024, through December 31, 2024. Benefits are not available to part-time employees, except employees who average 30 or more hours per work week who are considered full-time for the purposes of the Affordable Care Act (ACA).

If paid bi-weekly, your rates will be adjusted accordingly.

DBMG Employee Contribution (Per Pay Period) UHC \$500 Deductible Plan	
Employee	\$32.00
Employee + Spouse	\$69.00
Employee + Child(ren)	\$66.00
Family	\$106.00
DBMG Employee Contribution (Per Pay Period) UHC \$2,000 Deductible Plan	
Employee	\$28.00
Employee + Spouse	\$61.00
Employee + Child(ren)	\$57.00
Family	\$93.00
DBMG Employee Contribution (Per Pay Period) UHC HDHP with HAS	
Employee	\$27.00
Employee + Spouse	\$58.00
Employee + Child(ren)	\$55.00
Family	\$89.00

Know Where to Go

Take control of your health care spending by using the best resources for your health concern or condition. Know when to see your primary care physician, visit a convenience clinic, or when to head to the emergency room. Make sure you're getting the most for your money and time when it comes to your health care.



Telehealth

Use telehealth when you have a minor medical concern and need to see a doctor quickly from anywhere. With telehealth, you can speak to a doctor in just a few clicks on your smart phone or tablet. While your health care should always start with your primary care provider, telehealth is available when your doctor may not be and is less expensive than a typical office visit. Telehealth is designed for non-emergent medical problems such as cold or flu symptoms, allergies, sinus infections, or sprains.



Primary Care

Visit your primary care physician annually for a check-up, for treatment of a chronic condition, and any time you want to see a doctor who knows your history and has access to your medical records. Primary care physicians typically require appointments and are not available nights and weekends, so you'll need to plan ahead. Remember, annual preventive care screenings with your primary care doctor are covered at no cost to you.



Urgent Care

Visit urgent care when you have a pressing medical concern, but not an emergency. Urgent care is the best fit for sprains, strains, minor broken bones, minor infections, small cuts that need a few stitches, minor burns and x-rays. Urgent care facilities are commonly open on nights and weekends. Plan ahead and find an urgent care close to you so that you have a plan for problems like these before they arise.



Emergency Room

Emergency rooms are designed to treat life-threatening incidents. However, the most-commonly diagnosed condition in ER patients is the common cold. This causes emergency rooms to become overcrowded and deliver care less efficiently because they are busy with patients who have routine illnesses and not emergencies. If you visit the emergency room when you are not having an emergency, you'll have a long wait and you'll pay the most out-of-pocket. So, make sure you only use this option when you are experiencing an emergency.

Health Savings Account

How It Works

If you enroll in the UHC HDHP plan, a Health Savings Account (HSA) will automatically be opened for you through **HealthEquity**. Contributions, earnings and withdrawals that are used for qualifying expenses are tax-free. Here's how the account works:

Make Contributions

You can set aside pre-tax money through payroll deductions up to IRS limits. The 2024 IRS contributions limits are \$4,150 for employee-only and \$8,300 for all other coverage, plus \$1,000 annual catch up contribution for those over age 55.

DBMG will be making an annual employer contribution of \$400.00 (Employee only coverage) and \$800.00 (Employee + dependents or Family coverage). The employer contribution will be split with deposits being made in January and in July. You must take this into consideration when determining your maximum annual contribution. Total contributions (employee and employer) cannot exceed the IRS maximum.

Use Your Funds

You can use your funds to pay for eligible medical, dental and vision costs now or in the future. View a full list of eligible expenses at www.irs.gov. You can pay for eligible expenses out-of-pocket and reimburse yourself from your HSA savings later or, you can pay with an HSA debit card.

Save your Funds. You can also use your account as a savings account. The account is yours, even if you leave the company, and your funds will roll over each year accruing interest tax-free. When your account balance reaches a specific threshold, you can invest your funds.

Are you eligible?

You are eligible to contribute to an HSA if:

- You are enrolled in the HDHP medical plan
- You are not covered by your spouse's health plan or flexible spending account (FSA)
- You are not eligible to be claimed as a dependent on someone else's tax return
- You are not enrolled in Medicare, TRICARE, TRICARE for life or received Veterans Administration Benefits

Wondering how much to save?

What you save in your HSA is up to you and your budget. Here are a few strategies:

- **To see the biggest tax advantage**, max out your contributions up to the 2022 federal IRS limits.
- **To be prepared for a rainy day**, set aside enough each month to fund the annual deductible or out-of-pocket maximum. That way, you have funds available should you be faced with big medical bills.
- **To simplify your savings**, set aside \$10 per paycheck per enrolled family member. For a family of four, that will give you about \$1,000 set aside each year to help you cover the cost of an unexpected doctor's visit or a monthly generic medication.

Flexible Spending Account

The Flexible Spending Accounts (FSAs), administered through **HealthEquity**, enable you to set aside money, on a pre-tax basis, into an account to pay for eligible health or dependent care expenses. By setting aside money pre-tax, which you would normally be spending post-tax, you save between 25% and 40% on your everyday expenses.

You must re-enroll in this program each year.

	Health Care FSA	Limited Medical FSA	Dependent Care FSA
Eligible Expenses	Most medical, dental and vision expenses (such as health plan deductibles, copays, coinsurance, prescriptions, and other eligible healthcare expenses).	Most dental and vision expenses that are not covered by your health plan (such as copays, coinsurance, deductibles and eyeglasses). Available to those enrolled on the HDHP with HSA plan.	Child daycare or after-school care expenses for a child under age 13 or care for a spouse, or adult dependent, incapable of caring for him or herself.
Annual Contribution Limits	\$3,050* Must contribute at least \$150, not to exceed \$3,050. Funds are available to use as of January 1.	\$3,050*	\$5,000 If you are married and file separate tax returns, the maximum you can contribute is \$2,500.
Benefit	Reduces your taxable income.	Saves on eligible expenses not covered by insurance. Reduces your taxable income.	Allows you to allocate savings towards daycare while reducing your taxable income.

Make Contributions Your set aside pre-tax money through payroll deductions up to the IRS limits, which helps to reduce your taxable income.

Use Your Funds You can pay for eligible expenses out-of-pocket and reimburse yourself from your FSA savings at a later date or, you can pay with a convenient FSA debit card. View a complete list of eligible funds at [irs.gov](https://www.irs.gov).

Don't Lose Your Funds The money you set aside must be used during the plan year – it will not roll over into your account. Any money left in the account will be forfeited.

- In order to receive pre-tax dependent care benefits, both employee and spouse must be employed, be seeking employment or attending school full-time. If your spouse does not work or attend school full time, you are not eligible for this benefit.
- Your elections cannot be changed during the plan year, unless you experience a qualifying life event.
- If you have an open HSA, you are not eligible for an FSA, only the Limited Purpose FSA.
- Keep your receipts as proof that your expenses were eligible for IRS purposes.

**2023 limits. The 2024 IRS indexed amounts have not yet been released. The annual contribution limit is projected to increase to \$3,200. Please monitor communications from DBMG for updated amounts.*

Voluntary Worksite

We are excited to continue, in partnership with Trustmark, offering Voluntary Worksite benefits. All offerings are available for election via PayCom. Please see your LiveWise benefit site for full coverage details and rates.

Accident – Administered by Trustmark

Accident insurance helps you pay for medical and other out-of-pocket costs that you may incur after an accidental injury. This includes emergency treatment, hospital stays, medical exams, as well as other expenses you may face such as transportation and lodging needs. The plan covers all accidents on and off the job.

Critical Illness with Cancer – Administered by Trustmark

This coverage pays a lump-sum benefit following the diagnosis of a critical illness, like a heart attack or stroke. Critical Illness insurance is supplemental coverage that can complement your health insurance and help cover your out-of-pocket expenses.

Hospital Indemnity – Administered by Trustmark

Hospital Indemnity coverage serves as a companion to your medical benefits to take the financial sting out of a hospital stay. It provides you with a lump-sum benefit that can help you pay the costs from a hospital stay, your health plan deductible, or for any other out-of-pocket costs you may incur.

Universal Life with Living Benefit for long-term Care

The Universal Life policy is permanent life insurance that has death protection to age 100 plus a cash value equal to the face amount. It has a unique feature called the Living Benefit for long-term Care Rider that provides coverage for long-term care if an individual is unable to perform two activities of daily living like feeding yourself or bathing yourself. Spouse and child coverage is also available.

Dental

There are no changes to the dental plan, or rates, for the 2024 plan year! Although Delta Dental allows you to visit any provider you like, staying in the **PPO Network** and **Premier Network** will provide you with the highest level of benefits. Non-network providers can balance bill you for an amount above what is considered “Reasonable & Customary.” Find a dentist at deltadentalaz.com or call (800) 352-6132. The deductibles, copays and coinsurance shown below are your responsibility.

Delta Dental PPO	
In-Network	
Annual Deductible (Individual / Family)	\$50 / \$150
Annual Maximum (Includes Preventive, Basic and Major Services)	\$1,500 per person
Diagnostic and Preventive	No charge, covered at 100%
Basic Services	20%
Major Services	50%
Orthodontia (Adults and Children)	50%
Orthodontia Lifetime Maximum	\$2,000 per person

Employee Contributions (Per Week)	
Employee	\$3.00
Employee + Spouse	\$5.85
Employee + Child(ren)	\$5.78
Family	\$9.42



REMINDER!
Our plan allows for 3 FREE cleanings per year!

Vision

There are no changes to the vision plan, or rates, for the 2024 plan year! You will continue to have access to a broad network of independent providers including LensCrafters®, Target Optical®, JCPenney Optical® and most Pearle Vision® locations. For a complete list of providers near you, use the Provider Locator on eyemed.com and choose the **Access Network** or call (866) 4-EYEMED. The amounts shown below are your responsibility.

EyeMed Vision	
In-Network	
Exam	\$10 copay
Frames	\$150 allowance + 20% off balance
Single Vision Lenses	\$10 copay
Bifocal Lenses	\$10 copay
Trifocal Lenses	\$10 copay
Medically Necessary Contact Lenses	\$0 copay
Elective Contact Lenses (In lieu of glasses)	\$150 allowance + 15% off balance
Frequency	
Exam	12 months
Lenses	12 months
Frames	24 months

Employee Contributions (Per Week)	
Employee	\$1.41
Employee + Spouse	\$2.44
Employee + Child(ren)	\$2.57
Family	\$4.05

Life and Disability

LIFE INSURANCE

Company-Paid Basic Life and AD&D – Administered by Mutual of Omaha

DBMG provides a flat Basic Life insurance benefit of \$20,000. If your death is caused by an accident, the plan includes an Accidental Death and Dismemberment (AD&D) feature that pays an additional \$50,000, doubling your benefit amount. DBMG also provides a flat \$5,000 spouse and \$2,500 child benefit.

Voluntary Life and AD&D – Administered by Mutual of Omaha

In addition to the Basic Life insurance coverage provided by DBMG, you may choose to buy additional Voluntary Life and AD&D coverage for you and your family. **As a reminder, Voluntary Life and AD&D is not an Open Enrollment benefit.** If you did not enroll when you were first eligible you will be required to go through medical underwriting. Please see your benefits team to obtain an Evidence of Insurability (EOI) Form. Employees must elect voluntary life in order for dependents to participate.

- **Employee:** Increments of \$10,000 up to \$500,000, max of 10x Annual Salary
 - Employee Guarantee Issue Amount: \$200,000 for new enrollees
- **Spouse:** Increments of \$5,000 up to \$250,000
 - Spouse Guarantee Issue Amount: \$50,000 for new enrollees
- **Child(ren):** \$5,000 or \$10,000

DISABILITY INSURANCE

Company-Paid Short-Term Disability – Administered by Mutual of Omaha

STD coverage pays you a benefit if you temporarily can't work because of an injury, illness or maternity leave. Benefits may be reduced by income from other income sources such as paid time off. Your doctor and the insurance company will work together to determine how long benefits are payable, based on your condition.

- Weekly Benefit: 50% of your total weekly earnings up to \$500
- Benefits begin on the 8th day of disability
- Maximum Payment Period: 26 weeks

Voluntary Long-Term Disability – Administered by Mutual of Omaha

LTD coverage pays you a certain percentage of your income if you can't work because an injury or illness prevents you from performing any of your job functions over a long period of time. It's important to know that benefits are reduced by income from other benefits you might receive while disabled, like workers' compensation and Social Security. *LTD coverage is a voluntary benefit and is paid in full by you.*

- Monthly Benefit: 60% of your monthly earnings up to \$10,000
- Benefits begin after 180 days
- Benefit Duration (if disabled prior to age 62): Benefits continue until age 65 if you remain disabled.
- Benefit Duration (if disabled at age 62 or older): Benefits continue until your Social Security Normal Retirement Age if you remain disabled.

Mutual of Omaha Resources

Employee Assistance Program

We know you work hard to support yourself and your family. We also know that life doesn't always go according to plan. That's why we are pleased to offer a vitally important benefit called the **Employee Assistance Program (EAP)**.

Employees can receive up to six (6) **FREE** face-to-face counseling sessions in the area you live. It even includes additional services like legal/financial advice and help finding childcare, all to help you manage your busy lifestyle.

Will Preparation

Creating a will is an important investment in your future. It specifies how you want your possessions to be distributed after your death. Whether you're single, married, have children or are a grandparent, your will should be tailored for your life situation.

You have access to the following free documents:

- Last Will and Testament
- Power of Attorney
- Healthcare Directive
- Living Trust

This free online interactive tool helps you and your family members create a will and other legal documents.

Worldwide Travel Assistance

When you travel 100 miles or more from home on company business or vacation, emergency medical and travel services are available. Translation / interpretation services, and emergency medical evacuation assistance are some of the services available to you.

- For Inquiries within the U.S. call toll free: **800-856-9947**
- For inquiries outside of the U.S. call collect: **312-935-3658**



Get help 24/7/365 by calling
(800) 316-2796 or visiting
www.mutualofomaha.com/eap

Additional Benefits

InfoArmor Identity Theft and Credit Protection

InfoArmor is an identity theft protection and credit monitoring service. It detects high-risk activity to alert you at the first sign of fraud. If you fall victim to fraud, InfoArmor will help restore your identity and provides a \$1 million identity theft insurance policy to cover any out-of-pocket expenses, lost wages, or legal fees. The InfoArmor online portal at infoarmor.com allows you to add family members for additional piece of mind.

Weekly Costs

Employee only: \$2.30

Family: \$4.14

Nationwide Pet Insurance

DBMG is pleased to continue offering Nationwide Pet Insurance. This is a great way to demonstrate how much you value every member of your family – even the four-legged ones.

Easy Enrollment

There are three simple ways for you to sign up for the voluntary pet insurance benefit:

1. Go directly to the dedicated website we've created: <https://benefits.petinsurance.com/DBMGGlobal-GrayWolf>
2. Visit PetsNationwide.com and enter the company name: DBMGGlobal-GrayWolf
3. Call (877) 738-7874 and mention you are an employee of DBMG to receive preferred pricing.

You can then select the species (dog or cat)*, provide your zip code and pick your plan!

**To enroll your bird, rabbit, reptile or other exotic pet, please call (888) 889-4874*

GlobalFit

DBMG has partnered with GlobalFit to give you direct access on savings and convenient terms for thousands of gyms across the country. This includes big chains and local favorites. You'll get exclusive member discounts on a variety of nutrition programs and home equipment, including NutriSystem, Total Gym and Zumba DVDs. Visit globalfit.com/DBMGGlobal or call (800) 294-1500.

Business Travel Accident Insurance – Company Paid Benefit

Through Chubb Accident & Health, you have access to 24/7 Business Travel Accident insurance. This coverage can help fill coverage gaps, at home and abroad, by providing travel assistance and services, which range from lost luggage to identity theft to medical and legal referrals, emergency transportation, and even dispatching medical specialists. You also receive services for medical evacuation and repatriation and out-of-country medical coverages.

This insurance also covers the traditional AD&D coverage, which pays a lump sum for accident loss of life, limb, sight, speech or hearing. Visit chubb.com/claims/accident-health.html for more information or call (800) 252-4670. You can find the full plan summary with details on Paycom.

Working Advantage

Working Advantage is a discount program that can help you save up to 60% on tickets, travel and shopping. Exclusive discounts include:

- Entertainment: movie tickets, theme parks, hotels, museums, zoos and more
- Theatre and Events: Broadway shows, family events, concerts and sporting events
- Shopping and Gifts: select online retailers for apparel, books, music, electronics, flowers and more

Visit workingadvantage.com for more information. You must register first by clicking "Employees Click Here" and then enter Member ID # 572475466.

Verizon Wireless

You may be eligible for an 18% discount from Verizon Wireless. Start by logging on to verizonwireless.com/discounts. Verizon requires validation of your employment at DBMG in two ways: your email address or paystub/other proof of employment or affiliation. Visit <http://bit.ly/EmpDiscount> for Discounts and Employment Validation FAQs.

401K Plan

When you join the 401(k) plan, your contributions and investment earnings all work toward the same goal: a secure financial future.

Eligibility

You are automatically enrolled at 6% of your salary in the 401(k) plan, approximately 30 days from your date of hire. You may change your contribution rate at any time. You are fully vested after 2 years of employment.

Growing Your Account Balance

Contributions

You can contribute from 1% - 100% of your pay to the Plan (up to \$23,000 for 2024). If you turn age 50 during the year, you can contribute an additional \$7,500 to the Plan in 2024.

Roth 401(k)

Allows you to save money in your retirement account through payroll deductions on an after-tax basis. This means that you pay current taxes in the year contributions are made, and withdrawals of earnings and contributions are income tax free, provided you are at least age 59 ½ and the account has been open for at least five years.

Profit Sharing

The company will contribute \$0.55 of profit-sharing dollars to your account for every hour worked.

Investments

You have a variety of investments to choose from. You can either “build your own portfolio”, select a “pre-built portfolio,” which is an investment option that is based on your expected retirement age (called “Target Date Funds”), or you can select the plan’s professionally managed investment solution (called “Target My Retirement”).

To Manage Your Account or Enroll

Go to www.principal.com or contact the Principal Customer Service Center at (800) 547-7754.

2024 Holiday Schedule

Observed Holidays

- New Years Day - January 1
- Memorial Day – May 27
- Independence Day – July 4
- Labor Day – September 2
- Thanksgiving – November 28
- Day after Thanksgiving – November 29
- Christmas Eve – December 24
- Christmas Day – December 25

Important Contacts

Navigating your benefits can be confusing, but it doesn't have to be! Your benefits team is here for you. If you have questions about who to contact, call the DBMG Benefits Team first and we will point you in the right direction to get the quality customer assistance you need. Otherwise, you can contact any of the providers listed below.

PROVIDER / BENEFIT	PHONE NUMBER	WEBSITE
UnitedHealthcare Medical and Pharmacy	(866) 633-2446	myuhc.com
Delta Dental Dental	(800) 352-6132	deltadentalaz.com
EyeMed Vision	(866) 723-0513	eyemed.com
Mutual of Omaha Life and AD&D short-term Disability Family Medical Leave Employee Assistance Program	(800) 775-8805 EAP: (800) 316-2796	mutualofomaha.com mutualofomaaha.com/eoi mutualofomaha.com/eap
Trustmark Accident Critical Illness Hospital Indemnity NEW! Universal Life with LTC NEW!	(800) 918-8877	TrustmarkVB.com
HealthEquity Health Savings Account (HSA) Healthcare FSA Limited Medical FSA Dependent Care FSA	(866) 346-5800	myhealthequity.com
InfoArmor Identity Theft Protection	(800) 789-2720	infoarmor.com
Nationwide Pet Insurance	(877) 738-7874	PetsNationwide.com
Principal 401(k)	(800) 547-7754	principal.com
Global Fit Gym Discounts	(800) 294-1500	globalfit.com/DBMGGlobal
Working Advantage Ticket, Travel & Shopping Discounts	(800) 565-3712	workingadvantage.com
Verizon Wireless Discount Program	(800) 775-8098	verizonwireless.com/discounts



DBMG Benefits Team
benefits@DBMGGlobal.com
 (844) 200-7392

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