2025 Benefits

At Moroso Construction, you and your family's health and wellbeing are our top priority. Our 2025 benefits package is designed to protect you physically and financially.

We are pleased to offer the 2023 Moroso Construction Benefits Program.

Employee Eligibility

Any active, regular, full-time employee working a minimum of 30 hours per week is eligible for benefits. Benefits are effective first of the month following 30 days

Dependent Eligibility

- Your legal spouse or domestic partner
- Your dependent children (including your stepchildren and legally adopted children) up to age 26
- A child which includes your natural child, adopted child, a child placed with you for adoption, stepchild, domestic partner's child, or a child for whom you, your spouse, or domestic partner are the legal guardian
- Any dependent child who reaches the age limit and is incapable of self-support because of a mental or physical disability

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Medical

	Kaiser Bronze 60 HDHP HMO 6650	Blue Shield Bronze Full PPO Savings 7500	
	Network Only	Network	Non-Network
Annual Deductible (Individual / Family)	\$6,650 / \$13,500	\$7,500 / \$15,000	\$10,500 / \$21,000
Out-of-Pocket Max (Individual / Family)	\$6,650 / \$13,300	\$7,500 / \$15,000	\$15,000 / \$30,000
Primary / Specialty Care Office Visits	No charge after deductible	No charge after deductible	50% / visit
Preventive Care	No charge	No charge (deductible waived)	Not Covered
Inpatient Hospital	No charge after deductible	No charge after deductible	50%
Emergency	No charge after deductible (copay waived if admitted)	No charge after deductible (copay waived if admitted)	
Retail Prescriptions	No charge after deductible	No charge after deductible Not Covered	

 $^{^{\}rm 1}\,{\rm Annual}$ deductible applies unless otherwise indicated.

Dental and Vision

Dental	Guardian NAP Plan Network Non-Network		Guardian Value Plan	
			Network	Non-Network
Deductible (Individual / Family)	\$50 / \$150		\$50 / \$150	
Preventive (Deductible Waived)	100% 100%		100%	100%
Basic	80% 80%		100%	80%
Major	60% 50%		60%	50%
Calendar Year Maximum	\$1,000		\$1,000	
Orthodontia (Adult and child)	Not Covered		Not Covered	

Vision	Guardian VSP Choice Network			
	Network Non-Network			
Service Frequency	Exams & lenses every calendar year Frames every other calendar year			
Examination	\$10 \$10			
Materials	\$25 \$25			
Frames	\$130 allowance then 20% off Up to \$46 remainder			
Elective Contacts	Amount over \$130	Amount over \$100		

Health Reimbursement Account

Workterra

Eligible Medical Care Expenses (partial list):

Acupuncture
Laboratory fees
Ambulance
Chiropractors' fees
Physical therapy fees
Coinsurance
Prescription drugs
Contraceptive prescriptions
Psychiatrists' / Psychologists' fees
Co-payments
Routine physicals
Diabetic supplies
Health insurance deductibles
Smoking cessation treatments & prescriptions
Immunizations / vaccinations

Treatment for substance addiction

Moroso Contributes Annually if you are enrolled in the Kaiser Plan				
Employee Only	\$6,550			
Employee + Family \$13,200				
	ually if you are enrolled in Shield Plan			

Visit your doctor.	Present your	You will receive an	The provider will	You pay the provider bill
	insurance card.	Explanation Of	send you a bill for	using your HRA debit
		Benefits (EOB) to	the amount not	card.
		explain what's	covered. (Tip: Do	You can also pay out of
		covered and what	not pay the invoice	pocket then reimburse
		you owe.	until you verify	yourself at any time in
			what has been paid	the future.
			by your insurance)	
1	2	3	4	5

Monthly Costs

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Kaiser Bronze HMO 7000	Moroso Construction covers 80% of the monthly premium cost for employees. Medical plan rates are based on the age of each enrolled member. Please refer to our Ease			
Blue Shield Bronze PPO 7000	benefit portal to view your total monthly contribution. Employees are responsible for 100% cost for dependents			
Dental NAP	\$9.66 \$19.62 \$25.24 \$37.59			
Dental Value	\$9.66 \$19.62 \$25.24			\$37.59
Vision VSP	\$2.12	\$3.58	\$3.65	\$5.78

Carrier Contacts

Medical			
Kaiser	701077	1-800-464-4000	www.kp.org
Blue Shield	W0106177	1-800-393-6130	www.bcbs.com
Dental & Vision			
Guardian Dental & Vision	00506126	1-800-527-8485	www.guardianlife.com
HRA			
Workterra HRA	MOROSO	1-888-327-2770	www.workterra.com

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Appendix

When and How You Can Enroll

EASE

New hires can enroll at any time within 30 days of their hire date. Benefits become effective on the first of the month following 30 days. Current employees can make enrollment changes only during the annual Open Enrollment period, unless a qualifying life event occurs. All enrollments and changes are completed on the Ease portal at www.moroso.ease.com

Changes in Benefit Elections

Changes can be made to your health benefit elections only during the annual medical re-enrollment period to become effective the first day of the new plan year, January 1st; however, you can make some limited changes to all benefit elections during the year due to a Qualified Life Event, such as:

Marriage Moving part-time to full-time

Birth/adoption Medicare

Loss of coverage Death of a spouse

Divorce

Coverage Start and End Dates

New Hire: Your benefit coverage begins on the first of the month following 30 days.

Qualified Life Events: Mid-year changes are effective the 1st of the month following submission of all documentation required as long as it is received within 30 calendar days of the event.

Exception: Changes made due to the birth or adoption of a child are effective on the date of birth or adoption.

Plan	Benefits Begin	Benefits Terminate
Medical, Dental & Vision	FOM following 30 days	End of month of Termination

DEDUCTIBLE

This is the amount that you will have to pay before your insurance coverage kicks in. In many plans, things such as doctor's visits and annual testing such as mammograms do not apply toward the deductible, but that's not always the case, so be sure to read the plan description carefully.

CO-PAYMENT

This is the amount that is paid for certain services, such as doctor's visits, lab work, urgent care or emergency room services.

CO-INSURANCE

Coinsurance is the amount that you are responsible for out-of-pocket. Most plans have levels such as 80/20 which means that once you have met your deductible, you are responsible for 20 percent of all medical costs incurred until you reach your out-of-pocket maximum.

OUT-OF-POCKET MAXIMUM

Most plans have an annual out-of-pocket limit, so once you reach that limit you no longer pay co-insurance costs.

This is an important number to pay attention to, because this is the most money you will have to pay in any given year.

Preventive Services

STD Screenings	Cancer screenings	Prenatal care	Tests
Sexually Transmitted Infections	Mammograms and Colonoscopies	For healthy pregnancies	Blood pressure Diabetes Cholesterol
Regular visits	Vaccinations	In	tervention
Well-Woman	Flu	Quit smoking	Identity depression
Well-Baby Well-Child	Pneumonia Measles Polio Meningitis Other diseases	Lose weight Eat healthy	Reduce alcohol use Avoid sexually transmitted diseases

This guide highlights the main features of the plans in the Moroso Construction Employee Benefits Program. It is intended to help you choose the benefits that are best suited for you. It does not include all plan rules and details, including limitations and exclusions. The plans are governed by plan documents, insurance contracts and company policies. Should there be any inconsistencies between this guide and those materials, the plan documents, insurance contracts and company policies will govern. These documents are available to employees upon request. Moroso Construction reserves the sole and exclusive right to alter, reduce or eliminate any pay practice, policy or benefit at any time, without advanced notice, except for those provisions required by law. Employees and eligible former employees will be entitled to only those benefits in place at the time of termination of employment. Health and welfare benefits are not vested benefits.