

McCorvey Companies 2024 Open Enrollment Employee Health Insurance Summary

Open enrollment for McCorvey Companies health insurance plans begins July 1st. The last day to make any changes will be July 15th. All elections will go into effect on August 1st, 2024. Please note we are moving our medical, dental and vision plans to BlueCross BlueShield. *Don't worry, anything you have paid towards your deductible is based on the calendar year and will transfer to BlueCross BlueShield*!

During open enrollment, you can:

- Review and compare the different health insurance plans that are available to you.
- Make changes to your current coverage, such as switching to a different plan or adding or dropping dependents.
- Enroll in a new plan if you are not currently covered.

In years past, we have been able to honor a passive enrollment for those employees that did not wish to make any changes. **THIS IS A CHANGE!** Because we are switching carriers, we cannot do this. You <u>MUST</u> follow the steps on the following pages, or you <u>will not</u> have coverage for the 2024 - 2025 plan year. Any requests for changes to your coverage and/or elections cannot be made outside of the open enrollment period unless you are experiencing a qualifying event.

Please submit your inquiries by using the McCorvey Companies Employee Portal. Go to https://employee.mccorvey.com/, select "Human Resources," then "Human Resources Request Form". There you will see "2024 Open Enrollment Help". Here you can view the McCorvey Companies Health Insurance guide, ask a question or arrange an appointment to speak with an HR Representative.

We are here to support you!

 8610 Wallisville Road
 720 Industrial Boulevard
 1077 Central Parkway S
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 8000 Brownleigh Drive
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To begin the open enrollment process, log in to your Paycom account and click on the notification bell on the top right-hand corner. Select the "2024 – 2025 Benefit Enrollment" option.

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Information	Payroll	Documents	Checklists	Benefits	Learning	Company Information			

You will now start your enrollment and view the plan benefits by clicking "Start Enrollment". Remember as you are making your elections, the "Total Cost", highlighted below in yellow, is per pay period and the amount will be updated as you add, change, or delete benefits. This will be your total **weekly deduction** per paycheck. Your elections will not be submitted until you click "Finalize" at the end.

Eligible Years	ACTIONS -	2024 Benefit Enrollment
		Total Cost Per Pay Period
	You have 15 days to complete enrollment.	Contact Information
	Hello	Dependents and Beneficiaries
	Here are tips for enrollment.	Medical \$5.00
	To get starteå, clok Start Errolment.	Vision \$0.00
	3 You also can choose an enrollment section in the progress bar to jump to that particular section.	Sunifie Employee Life Sunifie Short Term Disability
	START ENROLLMENT	Sunlife Long Term Disability
		Sunifie Employee Critical illness
		Accident
		REVIEW

8610 Wallisville Road720 Industrial Boulevard1077 Central Parkway S2701 Gattis School Road5211 Linbar Drive8848 Red Oak Boulevard8000 Brownleigh Drive10221 Rocket BoulevardHouston, TX 77029Suite 200Suite 100Suite 101ASuite 500Suite DRaleigh, NC 27617Orlando, FL 32824Grapevine, TX 76051San Antonio, TX 78232Round Rock, TX 7864Nashville, TN 37211Charlotte, NC 28217Charlotte, NC 28217

"Dependents and Beneficiaries" will be the next section. Please take time to review your dependents that were added previously. You may add new dependents by clicking "add".

Eligible Years								ACTI	IONS ¥	2024 Benefit Enrollment	
2024 Enrollment	Eligibility Profile Preview Date Enrollment Year ALLENPLOYEES 07/01/2024 2024 (ALL)								\$0.00 Total Cost Per Pay Period		
	Pre-Enrollm Corputares species New No O Yes Vour may ad deleted.	ent Questions arto works for this company? d or edit dependents and Relationship Spouse	beneficiaries at ar Dependent	nytime. Only depende Beneficiary	nta and beneficiarie Birth Date	s not associated with Gender	h an activ	e plan can be	ADD V	Contact Information Dependents and Beneficianes Medical Dential Vision Surtife Employee Life Surtife Exort Term Disability Surtife Long Term Disability	50.00 50.00 50.00
		Child	~	~			1	8	¥	Sunife Employee Critical illness Accident	
		Child	~	~		PREVIOUS	/	SAVE AND	₩ NEXT	REVIEW	

Your dependents should be listed as "Dependent and Beneficiary". Depending on the benefit plan you choose, you will be able to add and/or select them as dependent or beneficiary during your election coverage.

Add Dependent		×
* Required Fields		
Add As: * O Beneficiary O Dependent And Beneficiary	Relationship *	•
First Name *	Middle Name	
Last Name *	Suffix	

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You will need to add yourself as a "Beneficiary" for any Sun Life benefit plans you choose for your covered dependents.

Add Beneficiary		×
* Required Fields Add As: * Beneficiary Dependent And Beneficiary First Name *	Relationship * Self	•
Last Name *	Middle Name Suffix	

Next, each screen will take you through each benefit plan. Choose the type of coverage you want by clicking the box next to the plan name. You can also click on "Plan Documents" for further information on coverage details and plan guides (deductibles, coverage amount, copays etc.).

If you would like to elect your preferred benefit plan, you will click "Enroll."

If you would not like to enroll, you will click "Decline Coverage" and proceed.

You will repeat these steps until all available benefits have been selected or declined. Do NOT select "Skip".

*Evidence of Insurability forms may be required for Life Plans provided by Sunlife. See section Additional Information at the end.

						ACTIONS -	1	2024 Bene	efit Enrollment	
8	Eligibility Profile ALL EMPLOYEES (ALL)	Preview Date 07/01/2024	Enrollment Year 2024					\$(To Per P	0.00 tal Cost Pay Period	
Current Ber	nefits						🗸 Con	tact Information		
Plan Name				Coverage Level	Employee Co	ost	🗸 Dep	endents and Beneficiarie	65	
CIGNA - OAP	1 Base \$5k Plan			Employee and Family			Medical			\$0.00
🔪 🗆 ВА	0001 BASE PPO	D PLAN (DED \$	5,000)		F	PLAN DOCUMENTS	Dental			\$0.00
Choose Your C Emplo Emplo Emplo	Coversione syee Only - \$0.00 syee and Spouse - \$119 syee and Children - \$85. syee and Family - \$220.0	65 17 13					Vision Sunlife E Sunlife E	Employee Life Short Term Disability Long Term Disability		\$0.00
BA Choose Vour G Emplo Emplo Emplo Emplo	0002 BUY-UP P coverage yee Only - \$17.89 yee and Spouse - \$158 yee and Children - \$118 yee and Family - \$276.7	PO PLAN (DED 66 1.10 75	\$1,000)			PLAN DOCUMENTS	Sunife E	Imployee Critical Illness t R	ieview	
Decl	line Coverage									

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Once you have elected or declined your benefit plans, you can view your benefit profile by clicking "Review". At this time, you will be able to make your final changes. *Before pressing the "Finalize"* option, <u>double-check your weekly cost</u>!!

REVIEW	FINALIZE

Once you have clicked "Finalize", please download our insurance provider's apps on your smart device. Instructions are included in the next pages. You will need these apps as <u>all of our</u> <u>insurance cards are digital this year</u>. <u>Physical copies will not be mailed to you</u>.

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BlueCross BlueShield

Effective August 1, 2024

- Medical Base Plan (\$5,000 deductible) McCorvey Companies pays the <u>employee only</u> portion of the base plan.
- Medical Buy Up Plan (\$1,000 deductible)
- Dental Low Plan (\$75 deductible)
- Dental High Plan (\$50 deductible)
- Vision

Download the BlueCross BlueShield app after your elections are complete. You will be able to access your digital ID cards, manage your health information, and update your profile <u>after</u> <u>August 1st.</u>



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Go Mobile with BCBSTX

Even on the go members can manage their ID cards and stay on top claims activity, coverage information and prescription refill reminders. It's easy: Log into or create a BAM account at **bcbstx.com** or text BCBSTX to 33633^{*} to download our mobile app.

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Sunlife

Group Policy #: 933322

- Life and AD&D Employee, Spouse, and Child(ren)
- Critical Illness Employee, Spouse, and Child(ren)
- Accident and Critical Illness Employee, Spouse, and Child(ren)
- Short Term Disability
- Long Term Disability

You will need to register with Sun Life to have access to submit and view your claims. Please go to sunlife.com/us. You can also speak to a Sun Life representative by calling 1-800-247-6875.



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Additional Information

Sun Life

If you and your spouse are both employed at McCorvey Companies, Sun Life will not allow you to enroll your spouse in life, AD&D, or accident insurance. Each spouse must select their own benefit life plans in their own benefit enrollment profile on Paycom.

Evidence of Insurability Form (EOI) is an application process through which you provide information on the condition of your health and/or your dependent's health in order to be considered for employee and spouse life insurance plans.

You and your covered dependents may be required to complete an EOI form if you previously declined coverage or if you are increasing your current election amount for life insurance plans, critical illness plans and short term / long term disability plans. Coverage is not effective until your EOI is approved by Sun Life and updated by an HR team member. An HR team member will only reach out to you about the status of your EOI if you are declined coverage by Sunlife.

It is your responsibility to complete an EOI form. You will need to visit <u>https://www.sunlife-usa.net/eoi/</u> and follow the instructions to electronically complete and submit your form directly to Sunlife. Please start this process early as it can take 3-5 business days for Sunlife to update your EOI status. Keep in mind, **open enrollment ends on July 15**th.

Declining Benefits

Should you choose not to enroll in benefits at this time, you will not be able to enroll again until the next open enrollment in July 2025, with an effective date of August 1st, 2026.

Please submit your inquiry through the McCorvey Companies Employee Portal.

Happy health insurance season! 😌