

Trust Summary

Wyoming Contractors Association, Group Benefit Trust offers 3 different plans. Each of the plans are outlined in this brochure.

Each plan has a \$1,000 one time set up joining fee that is due with first month of premiums.

Effective January 1, 2008, both plans have different monthly charges.

Plan 1—Hour Bank Provisions

When you make your monthly payments for hourly paid employees you will be using the previous months hours. For salaried employees you will be paying for the current month.

Hourly employees are set up on a hourly banked system. Contributions are made for each employee. The employees have to work 300 hours before they become eligible. The 300 hours have to be reported to the Payroll Reporting Office, so each new employee will be eligible for benefits the first of the next month after their 300th hour is reported. For example the employee works the 300th hour in March which is reported in April so the employee is then eligible May 1st.

Salaried paid employees are eligible the first of the next month following the first premium payment.

Plan 2 & 3 Provisions

Coverage for new employees begins as determined by the employer. Options include the 1st of the month following 0, 1, 2, or 3 months of employment.

Employers must cover 100% of employees and 75% of eligible dependents (those without other verifiable coverage).

Plan 3 is a High Deductible Health Plan and may be combined with a Health Savings Account (HSA) for long term funding of health spending.

A little about us...

This trust was established to provide quality health care benefits to the employees of eligible contractor members of the Wyoming Contractors Association. The full cost of participation in the group benefit trust is paid by the employer and covers the employee and all their eligible dependents. During a time of uncertainty regarding the future of health care benefits as well as spiraling health care costs, the Trustees are particularly proud of the health care benefits provided to the hundreds of men and women working in Wyoming in the construction industry.

The Trustees who serve the Group Insurance Trust today are as committed to the success of the Trust as those who had the vision to start the Trust in 1966.

Following is a list of the Board of Trustees and their contact information.

Chad Connell, Chairman
High Country Construction, Inc.
PO Box 930
Lander, WY 82520
307-332-4933

Jim Rice, Secretary-Treasurer
Rice-Kilroy Construction
PO Box 1548
Dubois, WY
307-455-3405

Phil Caines, Trustee
McGarvin-Moberly Construction Co.
PO Box 1166
Worland, WY 82401
307-347-4268

Dale Andreen, Trustee
Andreen Hunt Const., Inc.
PO Box 1175
Mills, WY 82644
307-265-1405

Claims Administrator:

Regional Care, Inc.
905 W. 27th St.
Scottsbluff, NE 69361
PH: 308-635-2260 or 800-795-7772
Fax: 308-635-2018

Payroll Reporting Office:

Edward Hager, CPA
300 S. Wolcott, Ste. 225
Casper, WY 82601
PH: 307-265-2000
Fax: 307-266-4071

Plan Advisor & Broker:

George Bryce, CLU, ChFC, CRPC
Kelli Carmichael, CLU, CRPC
Lincoln Financial Advisors
The Insurance Agency
747 West 1st Street
Casper, WY 82601
PH: 307-235-5822
Fax: 307-473-1077



Group

Benefit

Trust



PO Box 965
Cheyenne, WY 82003

Phone: 307-632-0573
Fax: 307-637-4429

Plan 1

Life Insurance

Employee Basic Life—\$10,000
 Employee AD & D—\$10,000
 Dependent Spouse—\$2,500
 Dependent Child (14 days & older) - \$1,000

Major Medical

\$750 Deductible
 (2 Per Family)

80% to \$10,000

100% Thereafter

Annual Maximum Out of Pocket Costs
 Single—\$2,750
 Family—\$5,500

\$2,000,000 Annual Maximum

Rx Card

Generic—\$10 Co-pay/Prescription
 Preferred Brand name—\$25 Co-pay or 20% (whichever is greater)
 Non-preferred Brand name—\$40 Co-pay or 20% (whichever is greater)
 Specialty (Annual Deductible) - \$250 Deductible or 10%

Mail Order Pharmacy
 90 Supply; 2 co-pays or 20% whichever is greater

Wellness Benefit—Health Fair
 Paid at 100%

Dental INCLUDED

Premiums

Hourly—\$6.42 per Hour
 Salaried—\$963 per Month

Plan 2

Life Insurance

Employee Basic Life—\$10,000
 Employee AD & D—\$10,000
 Dependent Spouse—\$2,500
 Dependent Child (14 days & older) - \$1,000

Major Medical

\$1,500 Deductible
 (2 Per Family)

50% to \$4,000

100% Thereafter

Annual Maximum Out of Pocket Costs
 Single—\$3,500
 Family—\$7,000

\$2,000,000 Annual Maximum

Rx Card

Annual Deductible—\$500
 Generic—\$10 Co-pay/Prescription
 Preferred Brand name—\$25 Co-pay or 20% (whichever is greater)
 Non-preferred Brand name—\$40 Co-pay or 20% (whichever is greater)
 Specialty (Annual Deductible) - \$250 Deductible or 10%

Mail Order Pharmacy
 90 Supply; 2 co-pays or 20% whichever is greater

Wellness Benefit—Health Fair
 Paid at 100%

Dental OPTIONAL

Premiums

Employee Only—\$500
 Employee + Spouse—\$887
 Employee + Child(ren) - \$798
 Full Family—\$1,278

Plan 3

Life Insurance

Employee Basic Life—\$10,000
 Employee AD & D—\$10,000
 Dependent Spouse—\$2,500
 Dependent Child (14 days & older) - \$1,000

Major Medical

\$2,500 Deductible
 (Qualifies as a High Deductible Health Plan)
 \$5,000 Common Family Deductible

50% to \$6,600

100% Thereafter

Annual Maximum Out of Pocket Costs
 Single—\$5,800
 Family—\$11,600

\$2,000,000 Annual Maximum

Rx Card

Prescriptions are processed as any other medically necessary service.

Wellness Benefit—Health Fair
 Paid at 100%

Dental OPTIONAL

Premiums

Employee Only—\$440
 Employee + Spouse—\$768
 Employee + Child(ren) - \$692
 Full Family—\$1,099

Optional Dental for

Plans 2 & 3

\$50 Deductible
 (2 Per Family)

100% Preventive
 Examinations
 Fluoride Treatment
 X-Rays
 Sealants

80% Basic
 Emergency treatment for pain relief
 Extractions
 Fillings

50% Major
 Crowns when teeth cannot be restored with a filling
 Prosthetics

\$1,000 Annual Maximum

Premiums

Employee Only—\$22.70
 Employee + Spouse—\$45.40
 Employee + Child(ren) - \$56.70
 Full Family—\$96.40

