

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 five 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.

Lynda Holthus, Chairman
Star Aggregates, Inc.
PO Bo x 20150
Cheyenne, WY 82003
307-634-5455

Chad Connell, Co-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

Charles Gilmore, Trustee
McGarvin-Moberly Construction Co.
PO Box 1166
Worland, WY 82401

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

Claims Administrator:

MBA of Wyoming
809 S. Railway
PO Box 98
Worland, WY 82401
PH: 307-347-6151 or 800-246-4622
Fax: 307-347-6227

Payroll Reporting Office:

Sims & Sims CPA
William L. Sims
PO Box 2893
Casper, WY 82602
PH: 307-234-7325
Fax: 307-234-1298

Plan Advisor & Broker:

George Bryce
Lincoln Financial Advisors
The Insurance Agency
125 West Second Street
Casper, WY 82601
PH: 307-232-5822
Fax: 307-473-1077

Wyoming Contractors Association
PO Box 965
Cheyenne, WY 82003

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

Wyoming Contractors Association



Group Benefit Trust

Trust Summary

Wyoming Contractors Association, Group Benefit Trust offers 2 different plans. Each of the Plans are outlined to the right.

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

Both plans have different monthly charges.

✓ Plan A is \$3.20/hour for hourly employees and \$500 per month for each salaried paid employee.

✓ Plan B is \$2.70/hour for hourly employees and \$425 per month for each salaried paid employee.

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 month you are in.

Hourly employees are set up on a hourly banked system. 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 A

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

\$500 Deductible
(2 Per Family)

80% to \$10,000

100% Thereafter

Annual Maximum Out of Pocket Costs
Single—\$2,500
Family—\$5,000

\$2,000,000 Lifetime 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)

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

Wellness Benefit—Health Fair

100% to \$250 per Year

Dental

\$50 Deductible
(2 Per Family)

Preventive Services—Paid at 100% (No Deductible)
Basic Services—Paid at 80%
Major/Restorative/Endodontics—Paid at %50

\$1,000 Maximum

Plan B

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
(2 Per Family)

80% to \$10,000

100% Thereafter

Annual Maximum Out of Pocket Costs
Single—\$4,500
Family—\$9,000

\$2,000,000 Lifetime 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)

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

Wellness Benefit—Health Fair

100% to \$250 per Year

Dental

\$50 Deductible
(2 Per Family)

Preventive Services—Paid at 100% (No Deductible)
Basic Services—Paid at 80%
Major/Restorative/Endodontics—Paid at %50

\$1,000 Maximum