January 2025 – December 2025

# 2025 BENEFITS ENROLLMENT

## YOUR BENEFITS, YOUR STORY
Benefits to fit your unique situation

## 5 WAYS TO SAVE
On healthcare expenses

## 3 TIPS
For an easy enrollment

VICTORY POWERLINE SERVICES

TRUE NORTH Insurance and Financial Strategies

# YOUR BENEFIT OFFERINGS:

Medical

Vision

Dental

Life Insurance

## THINGS TO KNOW

## 5 WAYS TO SAVE

### 1. THINK ABOUT HOW YOU WILL USE YOUR BENEFITS.

- Do you have a chronic condition?
- Do you have surgery planned for this year?
- Are you adding any new dependents to your plan?

**Consider these questions when choosing a plan.**

### 2. MANAGE MEDICATION COSTS.

Ask your doctor to prescribe you generic medications. They can be just as effective and typically cheaper!

### 3. TRY HEALTHIESTYOU OR URGENT CARE.

Telemedicine and urgent care can cost you much less than going to the ER and usually save you a lot of time.

### 4. STAY IN-NETWORK FOR CARE.

Think of it as an exclusive club. You may pay higher amounts if you go Out-of-Network.

### 5. PREVENTION IS KEY.

Prevention is key to catching disease or illness early on. Plus, preventive exams are often free or cost less than a normal doctor's visit.

## 3 TIPS FOR EASY ENROLLMENT

### 1. DON'T WAIT!

As a new hire this is your one chance to choose your benefits until our annual enrollment period. After this enrollment period, the only way you'll be able to change your plans before the following enrollment period is if you have a **qualifying life event,** such as getting married or having a baby.

### 2. TO ENROLL OR NOT TO ENROLL?

This year you are required to enroll in and/or waive your benefits.

### 3. UP YOUR BENEFITS IQ

Have questions about your benefit options? Not sure what is right for you? Please reach out to the TrueAdvocate Team! They are available from 7:30 a.m. - 5 p.m. CST to answer your benefits questions. Just call 888-655-9980 OR email trueadvocate@truenorthcompanies.com.

The plan information outlined in this enrollment guide is intended to be a snapshot of the benefits and does not provide full plan details. For complete plan information and any policy restrictions, refer to your plan document. If any discrepancy exists between the summary displayed in this guide and the policy, the policy will govern.

# BENEFITS BASICS

## WELCOME TO YOUR 2025 BENEFITS!

Victory Powerline Services benefits add value beyond your paycheck. They can make health care more affordable, provide income during a disability, and help you achieve financial goals.

As an employee of Victory Powerline Services, you have a total compensation package - a combination of pay and benefit programs that is among the best in our industry. This guide describes the key features of our health, life and additional program offerings. They are designed to give you choices about the types and levels of protection that you want. As your needs change, you can continue to design a benefits program that best fits your life. Each year, you have the opportunity to review your choices and make new decisions.

This guide provides a brief summary of your Victory Powerline Services benefits. Please take the time to review your options and learn about the coverages that will best work for you and your family!

This information is a highlight of our benefit program. In the event of any discrepancy or omission, actual benefits will be determined by the applicable governing plan documents. Victory Powerline Services reserves the right to change or end any benefit at any time to the extent allowed by the law.

## ELIGIBILITY

As a full-time employee of Victory Powerline Services, you are eligible for benefits if you work at least 30 hours per week. Your benefits are effective 1st of the month following your date of hire. Your dependents can also enroll for coverage, including:

- Your legal spouse.
- Your children up to age 26.

## DEPENDENT ELIGIBLIITY

As part of the responsibility and management of our benefit plan, we have to ensure that all covered dependents meet the eligibility requirements. We are asking all employees to certify that their dependents meet the definition of an eligible dependent prior to adding them to our plans.

Benefit Basics Definition of an eligible dependent:

- A lawful spouse of an employee, including a common law spouse if recognized by your state
- Children of an employee up to age 26
- Children age 26 or older who are mentally or physically handicapped
- A legally adopted child, a step-child, or a child placed in your care by court order, all under 26 years of age.

You will be required to verify your dependent's eligibility. Falsification of the eligibility verification form will result in coverage for the dependent being rescinded and may result in medical claims being denied.

# QUALIFYING LIFE EVENTS

Generally, you may only make or change your existing benefit elections during the open enrollment window. However, you may change your benefit elections during the year if you experience an event such as:

- Gain or loss of other coverage
- Marriage
- Divorce or legal separation
- Birth of your child
- Death of your spouse or dependent child
- Adoption of or placement for adoption of your child
- Change in employment status of employee, spouse or dependent child
- Qualification by the Plan Administrator of a child support order for health coverages
- New entitlement to Medicare or Medicaid

*Go to healthcare.gov for a full list of qualifying life events.*

You must **notify Human Resources within 30 days** of a qualifying life event. If you do not contact Human Resources within 30 days of the qualified event, you will have to wait until the next open enrollment window to make changes.

# Which Medical Plan Is Best For You?

**BCBS OK | 800-942-5837**

**WWW.BCBSOK.COM**

**HOW TO FIND A NETWORK PROVIDER.**

1. Visit the site below, choose your city, state or zip.
2. Choose from the Blue Advantage PPO Network.

**Provider Search:** [www.bcbsok.com/blueadvantage](www.bcbsok.com/blueadvantage)

| IN-NETWORK BENEFITS | PLATINUM PLAN | GOLD PLAN | SILVER PLAN |
|---|---|---|---|
| **Deductible** | $1,000 Single<br>$3,000 Family | $3,000 Single<br>$9,000 Family | $6,000 Single<br>$12,000 Family |
| **Coinsurance** | You pay 20%,<br>plan pays 80% | You pay 30%,<br>plan pays 70% | You pay 80%,<br>plan pays 20% |
| **Out of Pocket Maximum** | $3,000 Single<br>$9,000 Family | $7,000 Single<br>$14,000 Family | $7,000 Single<br>$14,000 Family |
| **Office Visit Copay** | $20 PCP<br>$20 Non-PCP<br>$50 Urgent Care | $20 PCP<br>$40 Non-PCP<br>$50 Urgent Care | $30 PCP<br>$50 Non-PCP<br>$50 Urgent Care |
| **Preventive Office Copay** | Covered at 100% | Covered at 100% | Covered at 100% |
| **Emergency Room Copay** | $100 copay | $400 copay | $300 copay |
| **Prescription Drug** | | | |
| Deductible | Included with Medical | Included with Medical | Included with Medical |
| Tiers 2-5 | $0 / $10 / $50 / $100 / $150 / $250 | $0 / $10 / $50 / $100 / $150 / $250 | $0 / $10 / $50 / $100 / $150 / $250 |

## MEDICAL PLANS

| | PLATINUM | GOLD | SILVER |
|---|---|---|---|
| EMPLOYEE ONLY | $155.91 | $0.00 | $0.00 |
| EMPLOYEE & SPOUSE | $321.01 | $0.00 | $0.00 |
| EMPLOYEE & CHILD(REN) | $281.57 | $0.00 | $0.00 |
| EMPLOYEE & FAMILY | $447.27 | $0.00 | $0.00 |

healthiestyou™
By Teladoc

Monthly rate: $11.75

# Virtual access to doctors and therapists anytime, anywhere* by app, phone, or video

## Get Care Now (General Medical) $0/unlimited visits

Convenient, high quality healthcare available 24/7 from U.S board-certified doctors by phone or video

## Mental Health $0/unlimited visits

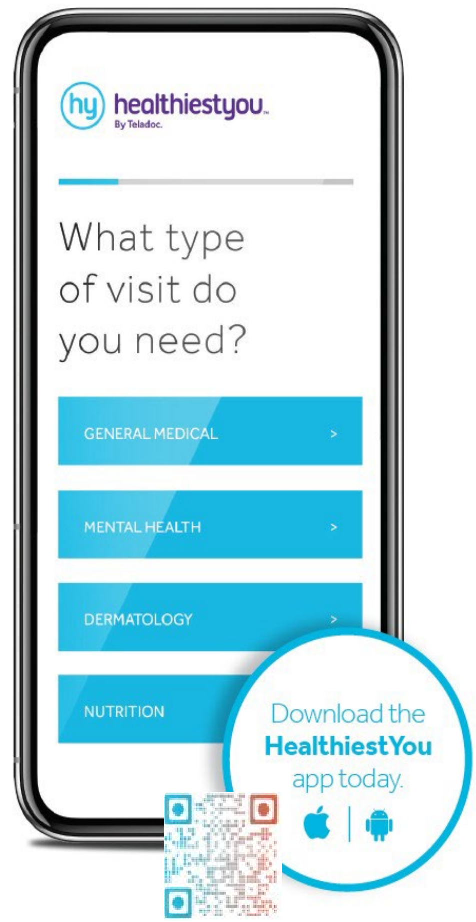
Members have access to licensed mental health professionals with the option to receive ongoing care from a provider of their choice

- **Dermatology**
  $0/unlimited visits
  U.S. board-certified dermatologists review images and provide diagnosis and treatment plan

- **Expert Medical Services**
  $0/unlimited visits
  In-depth reviews of existing diagnoses and treatment plans from the world's leading experts

- **Nutrition**
  $0/unlimited visits
  In-depth nutrition consultations and personalized guides for member specific needs

- **Back and Joint Care**
  $0/unlimited visits
  Customized neck and back care programs with videos and access to certified health coaches




Our U.S. board-certified doctors help with conditions like the flu, bronchitis, rashes, sinus infections and more

Talk to a doctor from wherever you are - day or night

Skip the trip to the ER or urgent care

# Dental Plan

**PRINCIPAL | 800-247-4695**

**WWW.PRINCIPAL.COM**

### MEDICAL INSURANCE DOESN'T ALWAYS COVER OTHER TYPES OF CARE.

That's why we offer you the option to enroll in a separate dental plan. Please see a summary of your plan below and review the full plan summary or Certificate of Coverage for details.

### HOW TO FIND A NETWORK PROVIDER.

1. Visit the site provided.
2. Click Find a dentist.
3. Enter the desired zip code.
4. Enter the Specialty desired or type in your dentist's last name to see if they are in-network.

**Provider Search:**
https://www.principal.com/find-dentist

| SERVICES | PPO DENTIST |
|---|---|
| Preventive Services | 100% covered |
| Deductible | $50 Single / $150 Family |
| Basic Services | You pay 80% coinsurance (after deductible), plan pays 20% |
| Major Services | You pay 50% coinsurance (after deductible), plan pays 50% |
| Annual Maximum | $1,500 per person per year |
| Orthodontic<br>For dependent children up to age 19 | You pay 50% coinsurance (after deductible), plan pays 50% coinsurance, up to a lifetime maximum of $1,500 |

| MONTHLY RATES | EMPLOYEE | EMPLOYEE + SPOUSE | EMPLOYEE + CHILDREN | FAMILY |
|---|---|---|---|---|
| Dental | $0 | $31.18 | $29.13 | $63.78 |

# Vision Plan

**PRINCIPAL | 800-896-3343**

**WWW.PRINCIPAL.COM**

**MEDICAL INSURANCE DOESN'T ALWAYS COVER OTHER TYPES OF CARE.**

That's why we offer you the option to enroll in a separate vision plan. Please see a summary of your plan below and review the full plan summary or Certificate of Coverage for details.

**HOW TO FIND A NETWORK PROVIDER.**

1. Visit the site provided.
2. Select from Location, Office, or Doctor and fill in the necessary information.

**Provider Search:**
https://www.principal.com/

| SERVICES | IN-NETWORK MEMBER COST |
|---|---|
| **Exam**<br>1 every 12 months | $20 copay |
| **Contacts**<br>1 every 12 months | **Please note:** Contact lenses are in place of lenses and frame.<br>• $60 for elective contact lens exam<br>• $0 copay for medically necessary contact lens exam (fitting and evaluation)<br>• $130 for  elective contact lenses<br>• Medically necessary contacts are covered in full |
| **Frames**<br>1 every 24 months | • $130 allowance and 20% off the amount over your allowance |
| **Lenses**<br>1 every 12 months | Single Lined - $20 copay<br>Bifocal Lined  -$20 copay<br>Trifocal - $20 copay<br>Lenticular - $20 copay |

| MONTHLY RATES | EMPLOYEE | EMPLOYEE + SPOUSE | EMPLOYEE + CHILDREN | FAMILY |
|---|---|---|---|---|
| VISION | $8.99 | $17.25 | $14.56 | $23.94 |

# Life and AD&D Insurance

### EMPLOYEE-PAID UNIVERSAL LIFE INSURANCE

**TRANSAMERICA | 888-763-7474**

**WWW.TRANSAMERICA.COM**

Life insurance pays a benefit (called a death benefit, which is usually a lump sum) to a beneficiary (whomever you choose to receive the benefit) after your death. If you have a life insurance policy on a family member (such as your spouse or your child(ren)), you would receive the money if that family member died. This money can help replace your income.

| LIFE AND AD&D BENEFIT | |
|---|---|
| Employee | Up to 5 times Base Annual Salary up to $500,000 |
| Spouse | $10,000 - $100,000 |
| Children/ Grandchildren | $25,000 |

### EMPLOYEE-PAID LIFE AND AD&D

**PRINCIPAL | 800-986-3343**

**WWW.PRINCIPAL.COM**

**You have the option to purchase a Life and AD&D coverage from Principal as well.** Decide whether this extra benefit is worth the cost of coverage for you and your family. To figure this out, ask a few questions:

How would your family's finances be affected if you died?

How much of your paycheck is used for monthly living expenses?

| EMPLOYEE-PAID LIFE AND AD&D BENEFITS | |
|---|---|
| Employee | Increments of $10,000 up to $300,000 or 5 times earnings.<br>**Guaranteed Issue** up to $70,000. |
| Spouse | Increments of $5,000 up to $100,000.<br>**Guaranteed Issue** up to $20,000. |
| Children | Increments of $2,500 up to $10,000. |

**New Hire / Open Enrollment Guaranteed Issue** is the amount you can elect before you are required to complete a health questionnaire, otherwise known as **Evidence of Insurability (EOI)**.


## DO YOU HAVE QUESTIONS ABOUT YOUR BENEFIT PROGRAMS AND AREN'T SURE WHO TO CONTACT?

# The TrueNorth TRUEAdvocate Team is here to help!

Monday - Friday | 9:30 a.m. to 6:30 p.m. CT
Emergency assistance available 24/7

Our team can assist with:

- Benefit coverage questions
- Ordering an ID card
- Claim questions and research
- Filing a claim
- Finding a provider
- Choosing a plan that works for you

**(925) 332-7325** | **benefitshelp@truenorthcompanies.com**

VICTORY POWERLINE SERVICES

TRUENORTH® Insurance and Financial Strategies

# Notes