



BERG CONSTRUCTION, LLC

2020 Summary of Benefits: Full-time Employees

Benefit	Description	Eligibility	Payroll Deductions/Cost
Paid Time Off Schedule	<ul style="list-style-type: none"> <li>1<sup>st</sup> year: 5 days max for the year prorated based on hire date</li> <li>3 to up to 10 years: 10 days</li> <li>10 to up to 15 years: 15 days</li> <li>After 15 years: 20 days</li> </ul>	Accrual begins 60 days after the employee's start date. Pro-rated for the first month. Refer to the handbook for accrual rate per month	Funded by the Company
Holiday Pay	Company Holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Day after Thanksgiving, day before Christmas and Christmas Day.	Pay for designated holiday after their first 60 days of work. Non-exempt employees must work their scheduled workday before and after the holiday to be paid for the holiday	Funded by the Company
Other Time Off	Up to 3 additional days for: birth or adoption of a child & to care for the child, care for spouse, child, parent or self with a serious health condition, death of a family member (please see Employee Handbook for definition of family member)	Subject to management approval	Funded by the Company
401(k) Plan	Berg offers voluntary pre-tax/post tax salary reduction plan (Plan). Please review summary plan document for more details.	<ul style="list-style-type: none"> <li>First payroll following consecutive 6-month anniversary date.</li> <li>Must be 18 years of age</li> </ul>	Portion of cost funded by the Company
Employee Referral Program	Employee receives bonus for referring friends to apply for an open position at Berg Construction.	Immediately, see Human Resources or Senior Management for details	Funded by the Company

Ridgewood Soils Inc. Retail discount	Employee will pay 10% over cost on retail products	60 days after the employee's start date	Portion of cost funded by the company
Various employee discount opportunities through Associated Builders & Contractors (ABC)	<a href="http://www.abc.org/Membership/Employee-Discounts">http://www.abc.org/Membership/Employee-Discounts</a>	Immediately upon hire	N/A
Medical: Capital Blue Cross PPO plan & HDHP options available	<p><b>PPO-In Network \$2000</b> Individual/\$4000 Employee+Dependent(s). Out of Network \$5000 Individual/\$10,000 Employee+Dependent(s) Co-Pays: \$10-Virtual/\$30/\$50 Preventative covered in full at 100%, deductible waived</p> <p><b>HDHP-In Network \$2750</b> Individual/\$5500 Employee + Dependent(s). Out of Network \$5000 Individual/\$10,000 Employee+Dependent(s). Pay the negotiated, discounted cost of services &amp; prescriptions. Preventative covered in full at 100%, deductible waived.</p> <p><b>HDHP-In Network \$5500</b> Individual/\$5500 Employee + Dependent(s). Out of Network \$5500 Individual/\$11,000 Employee+Dependent(s). Pay the negotiated, discounted cost of services &amp; prescriptions. Preventative covered in full at 100%, deductible waived</p>	1 <sup>st</sup> of the month on or after 60 days of full-time employment	<p>*Employee only \$29.69 per pay *Employee + Spouse \$101.54 per pay *Employee + Child(ren) \$95.01 per pay *Employee + Family \$148.23 per pay</p> <p>*Employee only \$22.73 per pay *Employee + Spouse \$91.49 per pay *Employee + Child(ren) \$85.24 per pay *Employee + Family \$131.39 per pay</p> <p>*Employee only \$15.00 per pay *Employee + Spouse \$68.84 per pay *Employee + Child(ren) \$63.94 per pay *Employee + Family \$100.07 per pay</p>
Dental: Delta Dental PPO 2 Plan Options: Plan 10893	<p>*In and Out of Network coverage available *Preventative care: 100% *Basic In Network: Fillings, extractions, root canals: 80%</p>	1 <sup>st</sup> of the month on or after 60 days of full-time employment	<p>*Employee only \$3.99 per pay *Employee + Spouse \$10.18 per pay *Employee + Child \$10.18 per pay *Employee + Children \$11.42 per pay *Employee + Family \$11.42 per pay</p>

Plan 10840	<ul style="list-style-type: none"> <li>*In and Out of Network coverage available</li> <li>*Preventative care: 100%</li> <li>*Basic In Network: Fillings, Extractions, Root Canals: 80%</li> <li>*Major In Network: Dentures, Bridges, Crowns: 50%</li> <li>*Orthodontia: (\$1000 Lifetime Max): 50%</li> </ul>		<ul style="list-style-type: none"> <li>*Employee only \$4.61 per pay</li> <li>*Employee + Spouse \$11.92 per pay</li> <li>*Employee + Child \$11.92 per pay</li> <li>*Employee + Children \$13.57 per pay</li> <li>*Employee + Family \$13.57 per pay</li> </ul>
Vision: National Vision Administrators, LLC	<ul style="list-style-type: none"> <li>*Exam: In Network once every calendar year. Out of Network reimburse up to \$35</li> <li>*Lenses: In-Network standard glass or plastic 100%. Out of Network up to \$35-\$80</li> <li>*Frames: once every 2 years In Network up to \$130. Out of Network up to \$45</li> <li>*Contact Lenses (in lieu of lenses): In-Network up to \$130. Out of Network up to \$100</li> </ul>	1 <sup>st</sup> of the month on or after 60 days of full-time employment	<ul style="list-style-type: none"> <li>*Employee only \$0.92 per pay</li> <li>*Employee + Spouse \$1.65 per pay</li> <li>*Employee + Child(ren) \$1.47 per pay</li> <li>*Employee + Family \$2.39 per pay</li> </ul>