



# Benefits Enrollment Guide

## 2025



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## A Message from HR at Dudek & Bock

At Dudek & Bock, we recognize our ultimate success depends on our talented and dedicated workforce. We understand the contribution each employee makes to our accomplishments and so our goal is to provide a comprehensive program of competitive benefits to attract and retain the best employees available. Through our benefits programs we strive to support the needs of our employees and their dependents by providing a benefit package that is easy to understand, easy to access and affordable for all our employees. This brochure will help you choose the type of plan and level of coverage that is right for you.

You can also access overviews of our benefits by visiting [www.workforcenow.adp.com](http://www.workforcenow.adp.com)

Sincerely,

The Dudek & Bock Leadership Team

# Eligibility

## Eligible Employees:

You may enroll in our Benefits Program if you are a full-time employee working at least 30 hours per week.

## Eligible Dependents:

If you are eligible for our benefits, then your dependents are too. In general, eligible dependents include your spouse and children up to age 26. If your child is mentally or physically disabled, coverage may continue beyond age 26 once proof of the ongoing disability is provided. Children may include natural, adopted, stepchildren, and children obtained through court-appointed legal guardianship.

## When Coverage Begins:

Newly hired employees and dependents will be effective in our benefits programs on the first of the month following 30 days of employment. Dudek & Bock's benefits renew each year on January 1. All elections are in effect for the entire plan year and can only be changed during Open Enrollment unless you experience a Qualifying Life Event.

## Qualifying Life Event:

A Qualifying Life Event is a change in your personal life that may impact your eligibility or your dependent's eligibility for benefits. Examples of some family status changes include:

- Change of legal marital status (i.e. marriage, divorce, death of spouse, legal separation)
- Change in number of dependents (i.e. birth, adoption, death of dependent, ineligibility due to age)
- Change in employment or job status (spouse loses job, etc.)

If such a change occurs, you must make the changes to your benefits within 30 days of the event date. Documentation may be required to verify your change of status. Failure to request a change of status within 30 days of the event may result in you having to wait until the next open enrollment period to make your change. Please contact HR to make these changes.



# Medical Insurance – BlueCross BlueShield



Dudek & Bock's medical insurance in 2025 will be provided by **BlueCross BlueShield of Illinois**. Employees will have their choice of 4 medical plans with BCBS.

HMO Plans – Only allow for in-network benefits and require you to designate a Primary Care Physician (PCP) before enrolling. All non-primary care requires a referral from your PCP. The provider network is the **Blue Advantage HMO [ADV]**. This year we are offering 2 HMO plans:

**HMO Low Plan** – has the lowest co-pays for doctors' visits and urgent care and is the cheapest plan. However, the out-of-pocket maximum is \$6,500 for an individual and \$13,000 for a family. If you are hospitalized, you will have significantly higher costs.

**HMO High Plan** – is the same HMO offered in 2024. The maximum out-of-pocket is \$1,500 for individuals and \$3,000 for families.

**Blue Choice Select PPO** – Our primary PPO plan, the Blue Choice PPO has a \$2,500 individual deductible and offers the benefit of fixed copays for your office visits and prescription drug services. This plan utilizes the **Blue Choice PPO [BCS] network**, which exclusively carries providers in Illinois and the Greater Chicago Area.


**Blue Choice Options PPO** – The Blue Choice Options benefit plan is designed in three tiers. Members save the most when they use doctors and hospitals in Tier 1 – the **Blue Choice Options PPO [BCO] network**. Members pay higher copays and out-of-pocket costs in Tier 2 **Blue Print PPO [PPO] network**. Members pay the most when they visit those in Tier 3 (out-of-network providers). All deductibles and out-of-pocket costs cross accumulate between Tiers 1 & 2. Remember to determine which tier the provider or facility is in to know the coverage level.

**PROVIDER FINDER:** It is very important that you check your plan's network before you sign up for health insurance. If your providers are not in-network of a certain plan, you may want to consider a different option. Go to [www.bcbsil.com](http://www.bcbsil.com) and select "Find Care". From there, follow the instructions below.

1. Select "Find a Doctor or Hospital"
2. Select "Search for Doctors as Guest"
3. Select your preferred network in the top right corner (using the network names above)
4. Enter your Zip code
5. Search for your doctors and hospitals
6. If your providers do not show up in the search, then they are not in the network you selected.

# Medical Insurance

Below is a summary of each medical plan's in-network benefits. While the PPO plans do allow for out-of-network utilization, your out-of-pocket expenses will almost always be far less when you see in-network providers.

 <b>BlueCross BlueShield of Illinois</b>	<b>Dudek &amp; Bock Medical Plan Options</b>		
	<b>HMO Low Plan [ADV]</b>	<b>HMO High Plan [ADV]</b>	<b>Blue Choice Low PPO [BCS]</b>
<b>Annual Deductible</b>			
Individual	\$0	\$0	\$2,500
Family	\$0	\$0	\$7,500
Coinsurance	80%	100%	80%
<b>Maximum Out-of-Pocket</b>			
Individual	\$6,500	\$1,500	\$4,500
Family	\$13,000	\$3,000	\$12,000
<b>Physician Office Visit</b>			
Primary Care	\$20 Copay	\$40 Copay	\$30 Copay
Specialty Care	\$40 Copay	\$60 Copay	\$30 Copay
<b>Preventive Care</b>			
Adult Periodic Exams	No charge	No charge	No charge
Well-Child Care	No charge	No charge	No charge
<b>Diagnostic Services</b>			
X-ray and Lab Tests	No charge	No charge	\$30 Copay
Complex Radiology	No charge	No charge	Deductible, then 80%
Urgent Care Facility	PCP: \$20 copay SPC: \$40 copay	PCP: \$40 copay SPC: \$60 copay	Deductible, then 80%
Emergency Room	\$400 Copay, then 80%	\$350 Copay	\$200 Copay
Inpatient Facility	\$1,000 Copay, then 80%	\$250 Copay per day	Deductible, then 80%
Outpatient Facility	\$500 Copay, then 80%	No charge	Deductible, then 80%
<b>Prescription Drug Benefits</b>			
Retail (30 day supply)	\$0 / \$10 / \$50 / \$100	\$0 / \$10 / \$35 / \$75	P: \$0 / \$10 / \$50 / \$100 NP: \$10/\$20/\$70/\$120
Mail Order (90 day supply)	\$0 / \$30 / \$150 / \$300	\$0 / \$30 / \$105 / \$225	\$0 / \$30 / \$150 / \$300
Specialty	\$150 / \$250	\$150 / \$250	\$150 / \$250

<b>Employee Contributions – Bi-Weekly Rates</b>				
Coverage Tier	HMO Low Plan	HMO High Plan	Blue Choice Low PPO	Blue Options PPO
Employee	\$50.61	\$65.70	\$73.25	\$113.54
Employee & Spouse	\$102.55	\$132.48	\$139.16	\$220.97
Employee & Child(ren)	\$91.46	\$121.39	\$124.35	\$189.22
Family	\$152.30	\$191.15	\$220.52	\$326.72

	<b>New! Blue Choice Options PPO</b>	
	<b>Tier 1 [BCO]</b>	<b>Tier 2 [PPO]</b>
<b>Annual Deductible</b>		
Individual	\$1,500	\$3,500
Family	\$4,500	\$10,200
Coinsurance	90%	70%
<b>Maximum Out-of-Pocket</b>		
Individual	\$3,000	\$5,500
Family	\$9,000	\$10,200
<b>Physician Office Visit</b>		
Primary Care	\$30 copay	\$50 copay
Specialty Care	\$50 copay	\$100 copay
<b>Preventive Care</b>		
Adult Periodic Exams	No charge	No charge
Well-Child Care	No charge	No charge
<b>Diagnostic Services</b>		
X-ray and Lab Tests	PCP: \$30 copay SPC: \$50 copay	PCP: \$50 copay SPC: \$100 copay
Complex Radiology	Deductible, then 90%	Deductible, then 70%
Urgent Care Facility	\$75 copay	\$75 copay
Emergency Room	\$400 copay, then 90%	\$400 copay, then 90%
Inpatient Facility	\$250 copay, then 90%	\$500 copay, then 70%
Outpatient Facility	\$200 copay, then 90%	\$400 copay, then 70%
<b>Prescription Drug Benefits</b>		
Retail (30 day supply)	P: \$0 / \$10 / \$35 / \$75 NP: \$10 / \$20 / \$55 / \$95	P: \$0 / \$10 / \$35 / \$75 NP: \$10 / \$20 / \$55 / \$95
Mail Order (90 day supply)	\$0 / \$30 / \$105 / \$225	\$0 / \$30 / \$105 / \$225
Specialty	\$150 / \$250	\$150 / \$250

# BlueCross BlueShield Extras

## Blue Access for Members

- Blue Access for members is your member portal for all of your medical and dental insurance needs
- Find in-network doctors and hospitals
- Print or Download your ID Card
- Review your benefits and EOB's
- View your deductible and out-of-pocket spending summary
- Take advantage of BCBS' wellness resources
- Register at [www.bcbsil.com/member](http://www.bcbsil.com/member) or
- Text BCBSILAPP to 33633 to download the app

## BCBSIL Mobile App

- Download the BCBSIL Mobile App on Google Play or Apple Store.
- Digital ID Cards
- Spending Summary
- Provider Finder
- Cost Estimator

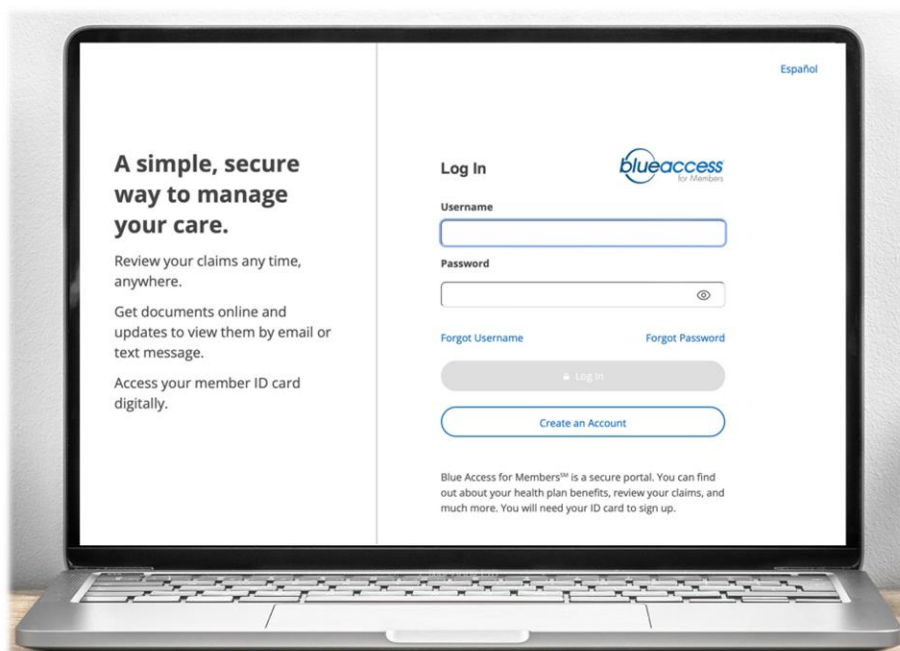


## Wellbeing Management

- Well onTarget Member Wellness Portal
- Digital self-management programs for:
  - Stress
  - Weight Loss
  - Tobacco Cessation
  - Diabetes, hypertension, and other conditions

## Pharmacy – Home Delivery

- Home Delivery (Mail Order) Pharmacy through Express Scripts
- Up to a 90-day supply of long-term medicines delivered to your home
- Order from your home after your doctor sends your prescription electronically to Express Scripts.
- Register online at [www.express-scripts.com/rx](http://www.express-scripts.com/rx)



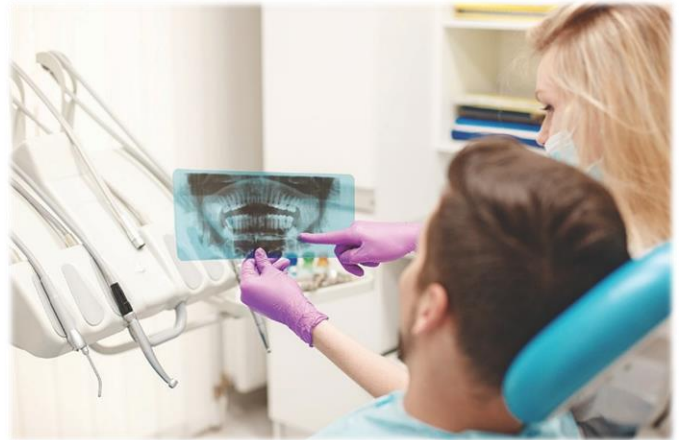



# Dental Insurance

Dudek & Bock now offers dental insurance through **BlueCross BlueShield of Illinois**. The dental plans utilize their BlueCare Dental PPO network, where members will save money by seeing participating network dentists.

The Annual Maximum is the most that BCBS will pay in a given calendar year for dental services for each covered member.

If you need to search for in-network dentists, go to [www.bcbsil.com](http://www.bcbsil.com), click "Find Care" and then "Find a Dentist."



 <b>BlueCross BlueShield of Illinois</b>	<b>Dental High Plan</b>		<b>Dental Low Plan</b>	
	<b>In-Network Benefits</b>	<b>Out-of-Network Benefits</b>	<b>In-Network Benefits</b>	<b>Out-of-Network Benefits</b>
<b>Annual Deductible</b>				
Individual	\$25	\$75	\$50	\$50
Family	\$75	\$225	\$150	\$150
Waived for Preventive?	Yes	No	Yes	No
<b>Annual Maximum</b>				
Per Person / Family	\$2,000	\$2,000	\$1,000	\$1,000
Preventive	100%	100%	100%	100%
Basic*	90%	80%	80%	80%
Major*	60%	50%	50%	50%
<b>Orthodontia</b>				
Benefit Percentage	50%	50%	50%	50%
Lifetime Maximum	\$2,000	\$2,000	\$1,000	\$1,000

\* = A 12-month waiting period applies for these services; this waiting period does not apply if you had dental insurance in 2024.


<b>Employee Contributions</b>		
Dental Plan	High Plan	Low Plan
Employee Only	\$19.74	\$13.15
Employee + Spouse	\$39.47	\$26.31
Employee + Child(ren)	\$53.55	\$35.30
Family	\$78.83	\$53.55

# Vision Insurance

Dudek & Bock provides Vision Insurance to all of its employees and any family members they choose to cover. The vision plan is administered by BlueCross BlueShield of Illinois and provides coverage for exams, lenses, contacts, and frames. This plan utilizes the EyeMed Provider Network

To search for in-network providers, you can navigate to [www.eyedoclocator.com](http://www.eyedoclocator.com) and select the Insight Network.



 <b>BlueCross BlueShield of Illinois</b>		<b>BCBSIL – EyeMed Network Vision Plan</b>
<b>Copay</b>		
Routine Exams (Annual)	\$10 Copay	
<b>Vision Materials</b>		
Lenses	\$25 Copay; covered once per 12 months	
Contacts Covered in lieu of frames.	Elective Contacts: \$150 Allowance + 15% off remaining balance Covered once per 12 months	
Frames	\$150 Allowance + 20% off the remaining balance, once per 24 months	

<b>Employee Contributions</b>	
Vision Plan	Bi-Weekly Rate
Employee Only	\$3.81
Employee + Spouse	\$7.23
Employee + Child(ren)	\$7.61
Family	\$24.25

# Basic Term Life and AD&D



BlueCross BlueShield of Illinois

Dudek & Bock provides Basic Life and AD&D benefits to eligible employees through BlueCross BlueShield. The Life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan.

BCBS of Illinois Basic Life & AD&D	
Life Insurance Benefits	
Employee	\$40,000
Age Reduction	Benefits reduce by 50% at age 80

**Important Reminder!**  
Be sure to assign a beneficiary or living trust to ensure your assets are distributed according to your wishes.

# Voluntary Term Life



BlueCross BlueShield of Illinois

Dudek & Bock offers the opportunity to purchase term life insurance in addition to the employer-sponsored basic life benefit. This coverage is available for employees, spouses, and dependent children as outlined below.

BCBS of Illinois Voluntary Life and AD&D			
	Employee	Spouse	Child
Increments	Increments of \$10,000	Increments of \$5,000	\$10,000 Flat Benefit
Maximum Benefit	5x Salary or \$500,000	\$150,000; Can't exceed employee's benefit	\$10,000
Guarantee Issue	\$150,000	\$25,000	\$10,000

Voluntary Life and AD&D Rates – Monthly Rate Table											
Age Band	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+	Child
Rate Per \$1,000	\$0.06	\$0.08	\$0.09	\$0.15	\$0.252	\$0.377	\$0.588	\$0.874	\$1.46	\$2.658	\$0.20

To calculate your **monthly** cost, use the formula below.

$$\left( \frac{\text{Rate}}{\text{Coverage Amount}} \right) \div \$1,000 = \text{Monthly Premium}$$

# Short-Term Disability Insurance



BlueCross BlueShield  
of Illinois

Dudek and Bock offers a short-term disability option through BCBS of Illinois. This benefit covers 50% of your weekly base salary up to \$400. The benefit begins after 7 days of illness or on the first day following an accident and lasts up to 25 and 26 weeks, respectively. Please see the summary plan description for complete plan details.

# Long-Term Disability Insurance



BlueCross BlueShield  
of Illinois

Dudek and Bock offers long-term income protection through BCBS of Illinois in the event you become unable to work due to a non-work-related illness or injury. This benefit covers 60% of your monthly base salary up to \$2,000. Benefit payments begin after 180 days of disability. See Certificate of Coverage for benefit duration. Please see the summary plan description for complete plan details.

# Flexible Spending Accounts



The Flexible Spending Account (FSA) plan with WEX, Inc. allows you to set aside pre-tax dollars to cover qualified expenses you would normally pay out of your pocket with post-tax dollars. The plan is comprised of a health care spending account and a dependent care account. You pay no federal or state income taxes on the money you place in an FSA.

## How an FSA works:

- Choose a specific amount of money to contribute each pay period, pre-tax, to one or both accounts during the year.
- The amount is automatically deducted from your pay at the same level each pay period.
- As you incur eligible expenses, you may use your flexible spending debit card to pay at the point of service OR submit the appropriate paperwork to be reimbursed by the plan.

## Important rules to keep in mind:

- The IRS has a strict "use it or lose it" rule. If you do not use the full amount in your FSA, you will lose any remaining funds.
- Once you enroll in the FSA, you cannot change your contribution amount during the year unless you experience a qualifying life event.
- You cannot transfer funds from one FSA to another.

Please plan your FSA contributions carefully, as any funds not used by the end of the year will be forfeited. Re-enrollment is required each year.

Maximum Annual Election	
Health Care FSA	\$3,300
Dependent Care FSA	\$5,000

# Contact Information

## Have Questions? Need Help?

Dudek & Bock is excited to offer access to the USI Benefit Resource Center (BRC), which is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries. Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals, and their primary responsibility is to assist you.

The Specialists in the Benefit Resource Center are available Monday through Friday 8:00 am to 5:00 pm Eastern & Central Standard Time at 855-874-0829 or via e-mail at [BRCMidwest@usi.com](mailto:BRCMidwest@usi.com). If you need assistance outside of regular business hours, please leave a message and one of the Benefit Specialists will promptly return your call or e-mail message by the end of the following business day.

## Carrier Customer Service

Additional information regarding benefit plans can be found below. Please contact Human Resources to complete any changes to your benefits that are not related to your initial or annual enrollment.

	CARRIER	PHONE NUMBER	WEBSITE
Major Medical	BCBS of Illinois	HMO: 800-892-2803 PPO: 800-541-2768	<a href="http://www.bcbsil.com">www.bcbsil.com</a>
Dental	BCBS of Illinois	800-367-6401	<a href="http://www.bcbsil.com">www.bcbsil.com</a>
Vision	BCBS of Illinois (EyeMed Network)	800-367-6401	<a href="http://www.eyemedvisioncare.com/bcbsil">www.eyemedvisioncare.com/bcbsil</a>
Life Insurance	BCBS of Illinois	800-367-6401	<a href="http://www.bcbsil.com/ancillary/employees">www.bcbsil.com/ancillary/employees</a>
Disability Insurance	BCBS of Illinois	800-367-6401	<a href="http://www.bcbsil.com/ancillary/employees">www.bcbsil.com/ancillary/employees</a>
Flexible Spending	WEX, Inc.	866-451-3399	<a href="http://www.wexhealth.com">www.wexhealth.com</a>



This brochure summarizes the benefit plans that are available to eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this brochure is not a guarantee of benefits.