2019 Benefits Guide

ENROLLING? MAKING A CHANGE? CONFIRMING YOUR BENEFITS?

bci365.com/USG

The ElectBenefits enrollment site connects you to your benefits from work, home or anywhere.

This guide is your roadmap to get started.
YOUR GUIDE TO USG BENEFITS

This information guide provides a snapshot of your USG benefits and highlights things you should consider when making your enrollment decisions.

When you’re ready, you will enroll through the ElectBenefits website at bci365.com/USG. The site will walk you through each of your benefits decisions. Once enrolled, you’ll return to this same site — from work, home or anywhere — to easily and quickly connect to your benefits.

New Hires — We don’t want you to go without coverage. If you don’t actively elect or waive medical coverage in the first 31 days of your employment, you will be automatically enrolled with employee-only coverage in the Low Deductible CDHP.

During Annual Enrollment — You must re-enroll each year if you want to contribute to the healthcare and dependent care FSAs. Elections for these accounts do not carry over from year to year.

WHO’S ELIGIBLE FOR BENEFITS?

All full-time and part-time employees working a regular schedule of at least 20 hours per week are eligible for USG’s SelectBenefits.

Certain dependents are also eligible to be covered under your medical, dental, vision and dependent life insurance plans. Eligible dependents include your:

- Legal spouse
- Children (natural, foster, adopted and step children) up to age 26

Adding a dependent?

Our dependent verification firm, Consova, will contact you by mail approximately 45 days after you enroll dependents. Please follow the directions in your packet and respond promptly. Contact Consova with questions at 866-430-1268 or go to consova.com.

If you miss Consova’s deadline, your dependents will be dropped from coverage and any claims for services may be your responsibility.

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1 If you are a temporary or a part-time employee working less than 20 hours per week who is not eligible for USG SelectBenefits coverage, or you work a partial year and/or do not make enough to file a tax return, or if the annual cost of USG’s High Deductible CDHP employee-only coverage ($1,056) is more than 9.5% of your household income, you may qualify for a federal subsidy if you enroll in coverage through the Health Insurance Marketplace.
Enroll, Change and Confirm Your Benefits Elections

BEFORE YOU ENROLL

• Review your benefit options and consider your needs and budget so you choose the best plans for you.
• Gather your dependents’ information, including Social Security numbers and dates of birth.
• Gather your life insurance beneficiaries’ information, including Social Security numbers and dates of birth.

DURING YOUR ENROLLMENT

• Log in to bci365.com/USG using your username and password to begin the enrollment process.
• Review each page and pay attention to additional items that may be required based on your elections.
• If you leave the enrollment site prior to completion, your elections will not be saved.
• Once you see your confirmation number, your enrollment is complete.
• Print a copy of your elections and covered dependents for reference.

AFTER YOU ENROLL

• Check your confirmation statement online.
• Contact the HR Service Center if you have any questions about your elections at HRSERVICECENTER@USG.COM or 855-874-3272.

Important: If you have completed your enrollment and need to change your elections, you can follow the process again as long you do so within your enrollment or life event window. Your new elections will be saved.

Need help registering or enrolling? Contact the USG Benefit Enrollment Center at 888-659-1495.

FIRST TIME LOGGING IN TO BCI365.COM/USG?

Here’s how you register:

• Go to bci365.com/USG and click on “Create Your Account.”
• Enter the following:
  – Your first and last name initials + your USG Oracle employee number (ex: John Doe/24165 would be JD24165)
  – Your temporary password, which is your eight-digit birthdate (ex: May 6, 1978 would be 05061978)
  – A valid email address (used to confirm your website registration) — consider using a personal email
  – A new password using the requirements listed on the site. You will use this new password each time you log in.
• Click “Register” and watch for a confirmation email at the address you provided.
• Click on the blue hyperlink in your confirmation email to complete your registration.

Note: The confirmation email is valid for 24 hours. After that time, you will need to re-register using the steps above.

Need your employee number? You can find it in Oracle Employee Self-Service.
Important Information

Keep Your Information Up-to-Date

The IRS reviews your health plan information through annual filings and may penalize you if they cannot confirm you and your dependent(s) have coverage. Make sure that your information is listed correctly on bci365.com/USG.

- Check that your last name matches your Social Security card.
- Confirm that your dependents’ information (name, date of birth, SSN) is correct. Dependents’ names should match their Social Security cards.

Do you have an address, phone number or emergency contact change? Continue to use Oracle Employee Self-Service to maintain this information as part of your employment record with USG.

If your life changes, your benefits may need to change. You’ll have access to bci365.com/USG anytime throughout the year to review your current benefits and update your beneficiaries.

If you have a qualified life event such as marriage, divorce, birth, adoption, or change in dependent status, you can make changes within 31 days after the life event. If you have a change in Medicaid or State Children’s Health Insurance Program (CHIP), you have 60 days to make changes. Contact the HR Service Center at HRServiceCenter@usg.com or 855-874-3272 to report the event and start the enrollment process. If you miss the deadline, your next chance to make changes is next year’s Annual Enrollment.
Medical and Prescription Coverage

You have a choice of two Consumer Directed Health Plans (CDHPs) — the Low Deductible CDHP or the High Deductible CDHP.

Both plans cover the same types of services and are administered by Aetna. Prescription drug coverage is administered by CVS Caremark.

HOW YOUR HEALTH PLAN WORKS

USG helps offset the cost of medical coverage by providing a contribution toward your medical plan through the health reimbursement account (HRA). The HRA pays first, covering your medical expenses up to a set amount. Once the HRA dollars are used, you pay the deductible and coinsurance for the cost of claims until you meet the out-of-pocket maximum.

YOUR COST OF COVERAGE

<table>
<thead>
<tr>
<th></th>
<th>Low Deductible CDHP</th>
<th>High Deductible CDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Weekly</td>
<td>Semimonthly</td>
</tr>
<tr>
<td>Employee Only</td>
<td>$40.25</td>
<td>$80.50</td>
</tr>
<tr>
<td>Employee + One</td>
<td>$80.50</td>
<td>$161.00</td>
</tr>
<tr>
<td>Family</td>
<td>$120.75</td>
<td>$241.50</td>
</tr>
</tbody>
</table>

New Hires — We don’t want you to go without coverage. If you do not actively elect or waive medical coverage in the first 31 days of your employment, you will be automatically enrolled with employee-only coverage in the Low Deductible CDHP. You will not be eligible to make changes until the next Annual Enrollment period.
**MEDICAL BENEFITS**  
(amounts shown are what you pay)

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Low Deductible CDHP</th>
<th>High Deductible CDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In-Network⁵</td>
<td>Out-of-Network⁵</td>
</tr>
<tr>
<td>Preventive Care</td>
<td>You pay 0%</td>
<td>You pay 100%</td>
</tr>
<tr>
<td>HRA Fund Provided By USG</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>$750</td>
<td>$1,500</td>
</tr>
<tr>
<td>Employee + One or Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Deductible⁶ (After HRA)</td>
<td>$750</td>
<td>$1,500</td>
</tr>
<tr>
<td>Employee Only</td>
<td>$1,500</td>
<td>$3,000</td>
</tr>
<tr>
<td>Employee + One or Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aexcel Specialist Network</td>
<td>10%</td>
<td>N/A</td>
</tr>
<tr>
<td>Institutes of Quality and Institutes of Excellence Networks</td>
<td>You pay 0%</td>
<td>N/A</td>
</tr>
<tr>
<td>Coinsurance⁵</td>
<td>20%</td>
<td>40%</td>
</tr>
<tr>
<td>Examples of Covered Services: office visits, x-ray, lab, hospital stays, urgent care, true emergencies⁷, mental health and substance abuse treatment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Out-of-Pocket Maximum⁸ (Includes deductible)</td>
<td>$1,500</td>
<td>$3,000</td>
</tr>
<tr>
<td>Employee Only</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee + One or Family</td>
<td>$3,000</td>
<td>$6,000</td>
</tr>
</tbody>
</table>

² To find an in-network provider, go online to aetna.com (Select “Find a Doctor”) or call Aetna Concierge Services at 800-433-1594.

³ Out-of-network benefits are paid based on the reasonable and customary (R&C) charge for service. You are responsible for paying any amounts above the R&C charge.

⁴ The in-network and out-of-network deductibles and out-of-pocket maximums are separate. The annual out-of-pocket maximum includes the amount you pay toward your deductible and coinsurance.

⁵ If you do not live in the Aetna Choice POS II (Open Access) network area, you pay 20% coinsurance for covered services plus any amounts above the reasonable and customary (R&C) charge. The plan pays 80% of the R&C charge.

⁶ For true emergencies, you pay 20% after the deductible for emergency room care, whether or not the facility is in the network. For non-emergency care, you pay 40% after the deductible even if the facility is in the network.

### PRESCRIPTION BENEFITS — Same coverage for both medical plans  
(amounts shown are what you pay)

<table>
<thead>
<tr>
<th>In-Network</th>
<th>Generic</th>
<th>Preferred Brand⁷</th>
<th>Non-Preferred Brand⁷</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retail at participating pharmacy (30-day supply)</td>
<td>$5 copay</td>
<td>30% (or $40 minimum; $80 maximum), unless a generic equivalent is available</td>
<td>50% (or $60 minimum; $120 maximum), unless a generic equivalent is available</td>
</tr>
<tr>
<td>Mail Order (Up to a 90-day supply)</td>
<td>$10 copay</td>
<td>30% (or $100 minimum; $160 maximum), unless a generic equivalent is available</td>
<td>50% (or $150 minimum; $300 maximum), unless a generic equivalent is available</td>
</tr>
<tr>
<td>Single Out-of-Pocket Maximum</td>
<td>$3,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Out-of-Pocket Maximum</td>
<td>$6,000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

⁷ For a copy of the Caremark Prescription Drug Formulary List, go to CVS Caremark’s website (caremark.com), log in and click on “View drug lists & formulary.”

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**Maintenance Medications**

Long-term (maintenance) medications need to be filled for a 90-day supply through mail service or at a CVS Caremark pharmacy. You may fill a 30-day supply of (maintenance) medication up to two times at an in-network retail pharmacy. After the second fill for the 30-day supply, you will incur a surcharge. Contact CVS Caremark at 866-804-5882 to get started.

**Specialty Medications**

Some specialty medications may qualify for coupons or rebates that lower your out-of-pocket costs for those products. Only the amount you pay will apply toward your deductible or out-of-pocket maximum.

**Step Therapy**

For certain types of drugs, you may be required to first try a generic instead of a more expensive brand-name drug. Otherwise, no benefits will be paid for the filled prescription.

If the lower-cost drug alternative doesn’t work for you, your doctor may request approval from CVS Caremark for you to use the more expensive brand-name drug alternative.
Ryan Suits and his family didn’t think about their insurance much and they used it even less. But that all changed after a few routine self-checks and a preventive office visit.

His wife discovered she had cancer.

Ryan knew to take the diagnosis serious as his wife’s sister had passed away from the same type of cancer. So, they immediately pursued specialized treatment at an out-of-town cancer hospital. They were confident that the specialized hospital was the best thing for his wife’s health, but less sure how they would cover the cost of treatment. They were pleased to find out USG’s medical plan would cover most of the costs.

“My wife received excellent care from the hospital and great service from the insurance plan,” said Ryan. “They were quick to review and pay claims and even helped pay for housing near my wife’s treatment center. Once we paid our portion, the rest was covered by the plan. Looking at the bills rolling in, we couldn’t believe how much our USG insurance plan was covering.”

Ryan and his wife were pleased to also learn that the plan would cover heredity tests. Now their children have regular preventive and specialty checkups because the cancer has a genetic link. “All checkups and tests are covered under insurance!” said Ryan.

He continues, “I like to tell people my story because I want them to know how good our insurance plan is and the importance of regular checkups.” Ryan’s wife is doing well, and her cancer is in remission. They’re thankful they caught it early.

If you had a major illness or accident, do you know the maximum you would pay for services?

Depending on your USG plan, the maximum you’ll pay out of your pocket is between $1,500 - $6,000. USG pays for the rest. To learn more, go to USG Connections > HR4Me > Benefits > Medical.
Healthcare Decision-Making Guide

General guidelines and illustrations to show how you can potentially save money on healthcare costs each year.

We understand that healthcare costs can be unpredictable in some years. The unexpected can happen at any time. But that should not be the driving factor when it comes to deciding which medical plan to choose.

Planning ahead and finding the plan that best fits the needs of you and your family can help you save money.

SEE WHICH PLAN WORKS BEST FOR YOU

**Online:** Log in to aetna.com anytime to use the Plan Selection and Cost Estimator tool. When it’s time to enroll, you’ll have access to decision-making tools on the ElectBenefits website (bci365.com/USG).

**Mobile:** Learn about your medical and prescription plans. View the benefit videos anytime at usg.a.guidespark.com or text “USGBenefits” to 61759.

Both tools quickly walk you through a series of questions about your healthcare. They can help you determine which medical plan is financially beneficial for your situation.

WHEN DOES THE HIGH DEDUCTIBLE PLAN MAKE SENSE?

Below is a general rule of thumb to assist you in determining when it’s financially more beneficial to be enrolled in the USG High Deductible CDHP.

**Employee Only**
Your healthcare expenses are less than $6,200 per calendar year

**Employee + One**
You and your dependent have less than $12,400 in healthcare expenses per calendar year OR
One of you will have the majority of healthcare expenses

**Family**
Your whole family has less than $16,600 in healthcare expenses per calendar year OR
One of you will have the majority of healthcare expenses

When switching from a low-deductible plan to our High Deductible CDHP, you may initially have higher out-of-pocket costs. But, keep in mind that your premiums will most likely be lower and you will save money by year-end if you meet the above criteria.
MORE WAYS TO SAVE ON HEALTHCARE

**Voluntary Benefits:**
Enroll in these options to protect your finances. You can apply the money you receive toward your out-of-pocket healthcare costs.

- **Critical Illness** — Pays up to a $30,000 lump sum benefit if you or a family member becomes critically ill.
- **Accident Insurance** — Pays a lump sum benefit if you or a family member is accidentally injured.

**Flexible Spending Account (FSA):**
Enroll in the Healthcare FSA to have money deducted on a pre-tax basis from your paycheck and stored in a special account. Then you can reimburse yourself for qualified out-of-pocket expenses.

**Aetna Aexcel Specialists:**
Seek out Aexcel specialists when looking for specialty care. Aexcel specialists have met stringent qualifications of excellence. The USG plan pays the highest level of benefits to these providers.

**Aetna.com and Aetna Health Mobile app:**
Save time and money using Aetna’s health resources. Shop for healthcare services, find the best cost, speak with a nurse and get support for chronic conditions.

**Generic Prescriptions:**
Always ask your physician and pharmacist if there are generic alternatives for your prescriptions.

For brand-name drugs, you’ll pay the copay or coinsurance plus the difference in cost between the brand-name drug and the generic drug.

**Teladoc:**
Save time and money by using the Teladoc doctors for many health issues like cold, flu, allergy, anxiety and much more. You have access to a variety of licensed healthcare professionals — including psychiatrists, psychologists, clinical social workers, counselors, therapists and dermatologists. Teladoc is available 24 hours a day, 365 days a year, by web, phone or mobile app.

Go to [aetna.com](http://aetna.com) for more information.
Dental Coverage

One plan option administered by MetLife.

<table>
<thead>
<tr>
<th>Dental Plan Highlights* (amounts shown are what you pay)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Deductible</strong></td>
<td>$50 per person/$100 per family</td>
</tr>
<tr>
<td><strong>Annual Maximum Benefit</strong></td>
<td>Plan pays $1,500 per person excluding orthodontia</td>
</tr>
<tr>
<td><strong>Preventive Services</strong></td>
<td></td>
</tr>
<tr>
<td>Oral Examinations, Cleanings (one every six months*)</td>
<td>You pay 0%</td>
</tr>
<tr>
<td><strong>Basic Care</strong></td>
<td></td>
</tr>
<tr>
<td>Fillings, Extractions (simple), Periodontics</td>
<td>20% after deductible (10% if Preferred Provider)</td>
</tr>
<tr>
<td><strong>Major Care</strong></td>
<td></td>
</tr>
<tr>
<td>Crowns, Dentures, Extractions (surgical), Bridgework</td>
<td>50% after deductible</td>
</tr>
<tr>
<td><strong>Orthodontia</strong> (children under age 19)</td>
<td>50% after deductible Plan pays up to $1,500 lifetime maximum per person</td>
</tr>
</tbody>
</table>

* Benefits shown here are for in-network care only. If you receive care from a provider that is not in the MetLife Dental network, you are responsible for paying the charges at the time you receive care and then filing a claim with MetLife Dental. MetLife Dental will reimburse a portion of the charges up to the plan allowance. You are responsible for all amounts over the plan allowance.

* Three cleanings per year are available for individuals who are pregnant or diagnosed with diabetes or cardiovascular disease.

YOUR COST OF COVERAGE

<table>
<thead>
<tr>
<th></th>
<th>Weekly</th>
<th>Semimonthly</th>
<th>Annual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$4.25</td>
<td>$8.50</td>
<td>$204.00</td>
</tr>
<tr>
<td>Employee + One</td>
<td>$8.50</td>
<td>$17.00</td>
<td>$408.00</td>
</tr>
<tr>
<td>Family</td>
<td>$12.75</td>
<td>$25.50</td>
<td>$612.00</td>
</tr>
</tbody>
</table>
Vision Coverage

One plan option administered by MetLife.

| Vision Plan Highlights\(^\text{\textcopyright}\) (amounts shown are what you pay) |  
| --- | --- |
| **Eye Exam**  
once every 12 months | $10 copay |
| **Standard Plastic Lenses**  
once every 12 months | $25 copay |
| **Optional Lens Features**  
once every 12 months  
(e.g., polycarbonate lenses, standard scratch resistance, tints, UV coating) | You pay 0% |
| **Progressive Lenses**  
once every 12 months | Standard: $55 copay  
Premium: $95–$105 copay  
Custom: $150–$175 copay |
| **Eye Glass Frames**  
once every 24 months | $25 copay\(^\text{\textcopyright}\) |
| **Contacts**  
(in place of eyeglass lenses and frames)  
once every 12 months | You pay remainder of cost after a $150 plan allowance |
| **Contact Fitting and Evaluation**  
once every 12 months | $60 maximum copay |
| **Diabetic Eye Care Plus Program**  
once every 12 months | $20 copay |
| **Exam**  
covered in full |  

\(^\text{\textcopyright}\) Benefits shown here are for in-network care only. If you receive care from a provider that is not in the MetLife Vision network, you are responsible for paying the charges at the time you receive care and then filing a claim with MetLife Vision. MetLife Vision will reimburse a portion of the charges up to the plan allowance. You are responsible for all amounts over the plan allowance.  

\(^\text{\textcopyright}\) The $25 copay does not apply if you receive eyeglass frames at the same time as eyeglass lenses. If you receive eyeglass frames at a different time than eyeglass lenses, the $25 copay applies. You pay the full cost for any amount above the $130 retail frame allowance.

**YOUR COST OF COVERAGE**

<table>
<thead>
<tr>
<th></th>
<th>Weekly</th>
<th>Semimonthly</th>
<th>Annual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$0.75</td>
<td>$1.50</td>
<td>$36.00</td>
</tr>
<tr>
<td>Employee + One</td>
<td>$1.25</td>
<td>$2.50</td>
<td>$60.00</td>
</tr>
<tr>
<td>Family</td>
<td>$2.00</td>
<td>$4.00</td>
<td>$96.00</td>
</tr>
</tbody>
</table>
Flexible Spending Accounts

Flexible spending accounts (FSAs) let you use tax-free dollars to reimburse yourself for eligible expenses. Consider the FSA if you expect to incur medical, dental, vision and/or dependent care expenses.

**YOU HAVE THE FOLLOWING OPTIONS:**

<table>
<thead>
<tr>
<th>Healthcare FSA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Eligible Expenses</strong></td>
</tr>
<tr>
<td><strong>Maximum Annual Contribution</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dependent/Day Care FSA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Eligible Expenses</strong></td>
</tr>
<tr>
<td><strong>Maximum Annual Contribution</strong></td>
</tr>
</tbody>
</table>

<sup>2</sup> Go to [irs.gov](http://irs.gov) for the most current FSA limits.

**ELIGIBLE EXPENSES**

The IRS defines which expenses can be claimed under an FSA. You can view an extensive list of qualified expenses and program rules on the IRS website.


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**Things to consider**

**Enrolling in the High Deductible health plan?**

The Healthcare FSA is a great way to save on taxes and set aside some of the funds you need for out-of-pocket healthcare expenses.

**Budget carefully.** You have until April 17, 2020, to file a claim for your 2019 expenses. The IRS requires that any money left in your FSA account at the end of the year be forfeited — with the exception of $500 that can be rolled over annually in your Healthcare FSA. The rollover does NOT apply to the Dependent Care FSA.

For more information on FSAs, including real life examples, please view the FSA videos at [usg.a.guidespark.com](http://usg.a.guidespark.com) or text “USGBenefits” to 61759.
**Benefit Options**

**Long-Term Disability**

You may choose to enroll in Long-term Disability (LTD). It replaces a portion of your pay if you become seriously ill or injured and cannot work for an extended period of time. LTD coverage is administered by MetLife.

The LTD Plan works with other sources of disability income, such as Social Security and Workers’ Compensation, to provide a specified level of pay replacement.

The LTD coverage cost shown in the online enrollment tool is based on your current pay. Your actual cost will be based on your pay as of January 1 each year.

**Life Insurance**

USG provides you with Basic Life Insurance and Accidental Death & Dismemberment (AD&D) Insurance at no cost to you. You can buy Supplemental Life and AD&D Insurance for yourself, as well as Dependent Life Insurance for your family members.

Life and AD&D Insurance is administered by ElectBenefits and insured by MetLife.

**LIFE AND AD&D INSURANCE FOR YOU**

<table>
<thead>
<tr>
<th>Basic Coverage</th>
<th>Supplemental Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life Insurance</td>
<td>AD&amp;D Insurance</td>
</tr>
<tr>
<td>Salaried</td>
<td>1x annual base salary (rounded up to nearest $1,000)</td>
</tr>
<tr>
<td>Hourly</td>
<td>$50,000</td>
</tr>
</tbody>
</table>

This coverage is offered at no cost to you. USG pays the full cost for it. You pay for coverage after taxes. Your cost is based on your age and coverage level. You can see the cost on the ElectBenefits website (bci365.com/USG).

**DEPENDENT LIFE INSURANCE FOR YOUR FAMILY**

<table>
<thead>
<tr>
<th>Spouse</th>
<th>Option 1</th>
<th>Option 2</th>
<th>Option 3</th>
<th>Option 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dependent Children</td>
<td>$2,500 per child</td>
<td>$5,000 per child</td>
<td>$7,500 per child</td>
<td>$10,000 per child</td>
</tr>
</tbody>
</table>

You pay for coverage after taxes. Your cost is based on your age and coverage level. You can see the cost on the ElectBenefits website (bci365.com/USG).

If you do not elect LTD or supplemental life coverage when you first become eligible and you want to enroll later, you will need to complete an Evidence of Insurability (EOI) form.

Your coverage will not start until MetLife approves you.

**DON’T FORGET**

Review your life insurance beneficiaries at bci365.com/USG.
Benefit Options

Vacation/Paid Time Off (PTO) and Holidays

USG provides all regular, full-time employees with paid annual vacations/PTO and paid holidays. These provide you with an opportunity to rest, relax or take part in recreational activities away from your job responsibilities.

Vacation/PTO days accrue on a pro-rated basis during each calendar year.

- Any unused vacation/PTO days remaining at the end of the year are forfeited; no rollover or payout of unused days, unless required by state law.
- If you are out due to a disability or FMLA, your accrued time may be affected.

Contact your supervisor or manager for your vacation/PTO accrual and holiday schedules.

Vacation/PTO Buy

With this benefit, full-time employees at participating locations can buy one week of vacation/PTO.

Contact your supervisor or manager to find out if your location participates in this benefit. **Please be advised that your Vacation/PTO Buy election rolls over every year.** You can make changes through the ElectBenefits website.

**BUYING A WEEK OF VACATION/PTO**

- You may take the extra week after you have used all your regular vacation/PTO time during the year.
- You must use the extra week during the same year it was purchased. If you don’t use it, you forfeit the time and the cost you paid for it.

The Vacation/PTO Buy cost shown on ElectBenefits is based on your current pay. Your actual cost will be based on your pay as of January 1 of each year.

Commuter/Parking Benefits

This benefit allows you to set aside funds on a pre-tax basis to use toward work-related parking and mass transit expenses. You can enroll or change your election at any time through WageWorks.

Enrollment and changes submitted by the 1st of the month take effect that month — your contributions are available for use the following month.

Register at **wageworks.com:**

- Enroll using your full legal name as it is in Oracle Employee Self-Service.
- Enter the last four digits of your Social Security number during the self-identification process.
- Follow the prompts to make your elections, including the way you want to pay for your order.

Have questions or need help registering? Call 877-WageWorks (877-924-3967), Monday through Friday, 8 a.m. to 8 p.m. EST.
**Additional Income Insurance**

You can elect these benefits only during your initial enrollment period or Annual Enrollment.

Critical Illness and Accident Insurance both provide benefits to help fill financial gaps. Payment for a covered condition or event is made directly to you and in addition to any other insurance you may have. These benefits cover a portion of your income to help you pay for expenses such as health plan deductibles, prescription copays, out-of-network treatments, alternative treatments and household expenses.

**Critical Illness Coverage**

When a serious illness happens, this coverage provides you with a lump-sum payment of $15,000 or $30,000 in initial benefits upon diagnosis. The total benefit available to you is three times the initial benefit amount in the event that you suffer more than one covered condition.

**Accident Insurance**

Accident Insurance provides you with a lump-sum payment for more than 150 covered events and there is no limit on the number of different accidents that will be covered.

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**Hyatt Legal Plans**

(a MetLife company)

You can elect these benefits only during your initial enrollment period or Annual Enrollment.

Hyatt offers you quick and affordable access to specialized legal services, by phone or at an office consultation. They offer a nationwide network of attorneys and identity management services. All network attorney fees are paid by the plan, so there are no deductibles, claim forms, copays or plan waiting periods.

You have two options to choose from when enrolling in the plan.

**Low plan** — $14.85 per month

This option provides a resource for legal advice, consultation and representation on a wide variety of personal, family and civil issues. You can also access the LifeStages identity management services if you believe your personal data has been compromised.

**High plan** — $16.85 per month

In addition to the services offered under the Low plan, you and your spouse can register for FraudScout’s Triple Credit Bureau Monitoring. FraudScout proactively monitors your credit activity and gives you access to specialists who help you resolve identity theft and fraud issues — including recovery of expenses related to the identity theft or fraud incident.

For a full list of services covered by these plans or to enroll, log in to [bci365.com/USG](http://bci365.com/USG).

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**Auto and Home Insurance**

You can enroll anytime.

As a USG Corporation employee, you are eligible for employee discounts on auto, home and renter’s insurance from MetLife Auto & Home. You can purchase insurance, including home, auto and boat at discounted rates.

Call 800-438-6388, mention that you are an employee of USG Corporation and provide your employee discount code C2E. Receive a quote with no commitment.

You are eligible for extras like:

- Easy, automatic payroll deduction
- Savings based on years of employment
- Superior driver discount
- Multi-policy discount

Home Insurance is not part of MetLife Auto & Home’s benefit offering in MA and FL.

Years of employment discount is not part of MetLife Auto & Home’s benefit offering in MA.

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**Pet Insurance**

You can enroll anytime.

Just like you, our four-legged friends sometimes need a little help. MetLife partners with Nationwide, offering pet insurance to help offset the costs of veterinary services (pre-existing conditions are not covered).

Coverage for your pet starts at just $10 per week. You can choose from a wellness plan, major medical or a complete coverage plan that covers both. All members have 24/7 access to a veterinary professional through Nationwide’s vetHelpline.* Call 800-438-6388 to learn more.
The USG Retirement Plan

The USG Retirement Plan is a pension plan. You and USG contribute to your account. You must contribute 2% of your pay to receive the company contribution. You are automatically enrolled unless you decline the benefit at ybr.com/usg. Note: Effective April 1, 2019, you will access your USG Retirement Plan benefit through netbenefits.com.

The Plan is designed to provide you with a monthly income for life when you retire from USG. When it’s time to retire, you can choose how you want your retirement benefits paid.

The USG Investment Plan

The USG Investment Plan is a 401(k) plan that provides you with supplemental savings to your Retirement Plan benefits when you retire. You must contribute to the USG Retirement Plan to be eligible to contribute to the Investment Plan.

Your Contributions — You are automatically enrolled in the Investment Plan with a 6% contribution from your paycheck. Each April, your contribution amount will increase by 1% unless you opt out. You may contribute up to 75% of your pay on a pre-tax or Roth after-tax basis.

Company Contribution — You earn a match of $0.50 of every $1 you contribute, up to 6% of eligible pay. You are fully vested in the company match after three years of employment.

Investment Funds — All contributions are invested in the age-based Target Retirement Fund unless you change your investment election.

You can change your contribution and manage your investments on netbenefits.com.

USG Lifesolutions — Work/Life and Employee Assistance Plan (EAP)

USG provides free and confidential assistance for you and your family members to help cope with everyday needs and life events. You pay no cost to participate in this plan, but you may pay fees when receiving certain services.

- Access a counselor for help on topics such as:
  - Raising children
  - Coping with elderly parents
  - Marital conflicts
  - Financial trouble
  - Alcohol and drug abuse
  - Stress
  - Depression

- Locate information and services from an extensive list of organizations and providers for:
  - Adjusting to retirement
  - Adoption, pregnancy and infertility
  - Caregiving and locating services for older adults
  - Child care and development
  - Educational financing, finding schools, colleges, tutoring and test prep
  - Moving, relocation, housing options and home ownership
  - Pet care
  - Recreational activities and convenience services

Log in to the humana.eapwl.com to learn more. Username: USG Password: help
“I had a passion and a dream. USG offered a benefit that helped me get there!”

Kyoda Childs
Shared Services Administrator,
Manufacturing (Accounts Payable)
Aliquippa, PA

Kyoda has worked for USG since 2002. At the time that she heard about USG’s Educational Assistance Program, she worked in the Board Department at the Aliquippa Plant. But it wasn’t until several years later that she was ready to take the leap and go back to school.

“I was always interested in getting a degree to better myself,” said Kyoda. “To open myself up to new opportunities.”

Once she decided to commit, Kyoda was relieved to see how easy the Educational Assistance benefit was to use. “I just picked coursework related to working at USG, filled out the form, attended school, and then submitted my approved expenses to USG,” she said. “I was reimbursed pretty quickly!”

Working full-time and going to school was tough, but Kyoda says that USG’s Educational Assistance benefit made it financially easier.

Kyoda has now put that degree to work as she’s moved jobs within USG and is now a Shared Services Administrator at the Aliquippa plant. “It took me a while, but I often tell people: Age doesn’t matter as long as you’re willing to work for what you want!”

Are you ready to open up to new opportunities?
The USG Educational Assistance Program covers up to $10,000 a year in tuition, academic fees and book costs for a recognized degree. To learn more, go to USG Connections > HR4Me > LEAD and look for “Education Resources.”

USG offers many programs to help support your journey. Go to USG Connections > HR4Me or contact the HRServiceCenter@usg.com for more information.

• Adoption Assistance
• Business Travel Accident Insurance
• Charitable Giving and Gift Matching
• Educational Assistance

• Short-Term Disability
• Parental Leave
• Recognition Programs
Notices about Your Healthcare Coverage

USG is required to provide participants in its group health plans with certain notices. These notices include:

- **Health Insurance Marketplace Notice** that explains how you can obtain coverage through your state’s marketplace, commonly referred to as an “exchange.” You have the option of enrolling in USG medical plans or through the exchanges.

- **Medicaid and the Children’s Health Insurance Program (CHIP) Notice** that describes the premium assistance that may be available to you through your state’s Medicaid and/or CHIP program.

- **HIPAA Notice of Privacy Practices** that explains how the USG group health plans protect your personal health information.

- **Creditable Prescription Drug Coverage Notice** that explains how the prescription drug coverage under the USG CDHP medical plans is affected when a participant becomes eligible for Medicare.

- **Patient Protection Disclosure Notice** that explains your rights for designating a primary care physician under the USG CDHP medical plans.

- **COBRA Rights Notice** that explains when you and your family may be able to temporarily continue coverage under the USG health plans if coverage would otherwise end for you.

- **Women’s Health and Cancer Rights Act** that summarizes the benefits available under the USG CDHP medical plans if you have had or are going to have a mastectomy.

- **Summary of Benefits and Coverage (SBC)** that details information about health plan benefits and coverage.

- **Summary Plan Descriptions (SPDs)** that provide additional details about health plan benefits and coverage beyond the SBC documents described above.

These notices are available online at USG Connections > HR4Me > Benefits and bci365.com/USG. Contact the HR Service Center at 855-874-3272 or email HRServiceCenter@usg.com within 30 days of receiving this enrollment guide if you do not consent to receive the required notices online or prefer to have a hard copy of the notices. After 30 days, you will be considered as consenting to the online distribution of the required notices.
Your Information Resources

FOR GENERAL INFORMATION ABOUT YOUR BENEFITS
You can access the ElectBenefits website to learn about your benefits.

Go to the ElectBenefits website at bci365.com/USG.
Need help online? Call USG Benefit Enrollment Center at 888-659-1495.

FOR BENEFIT-SPECIFIC QUESTIONS
You can see what’s covered, how the plans work, find network providers and file claims.

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<td>Accident Insurance</td>
<td>MetLife</td>
<td>metlife.com/mybenefits</td>
<td>800-438-6388</td>
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<tr>
<td>Auto/Home Insurance</td>
<td>MetLife</td>
<td>metlife.com/mybenefits</td>
<td>800-942-0854</td>
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<td>metlife.com/mybenefits</td>
<td>800-942-0854</td>
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<td>866-430-1268</td>
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<td>844-729-3539</td>
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<td>888-659-1495</td>
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<td>Life Insurance and AD&amp;D Insurance (Basic, Supplemental and Dependent Life Insurance)</td>
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<td>bci365.com/USG</td>
<td>888-659-1495</td>
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<td>Medical</td>
<td>Aetna</td>
<td>aetna.com</td>
<td>800-433-1594</td>
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<td>Pension — USG Retirement Plan</td>
<td>Before 4/1/19 — Alight Solutions</td>
<td>ybr.com/usg</td>
<td>800-953-7526</td>
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<td>After 4/1/19 — Fidelity</td>
<td>netbenefits.com</td>
<td>844-874-7283</td>
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<td>Prescription Drug Coverage</td>
<td>CVS Caremark</td>
<td>caremark.com</td>
<td>866-804-5882</td>
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<td>metlife.com/mybenefits</td>
<td>877-638-8262</td>
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<td>metlife.com/mybenefits</td>
<td>855-638-3931</td>
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<td>Work/Life and EAP Services (USG LifeSolutions)</td>
<td>Humana</td>
<td>humana.eapwl.com username: USG password: help</td>
<td>888-327-4874</td>
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<td>401(k) — USG Investment Plan</td>
<td>Fidelity</td>
<td>netbenefits.com</td>
<td>844-874-7283</td>
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Need more help?
You can find information online at USG Connections > HR4Me > Benefits or by contacting the HR Service Center at HRServiceCenter@usg.com or 855-874-3272.

This brochure contains basic information about your 2019 SelectBenefits options, and does not attempt to cover every detail of every plan. If there is any difference between the information in this brochure and the provisions of the legal documents, insurance contracts or administrative agreements and policies that govern the plans, those documents will govern. Summary plan descriptions (SPDs) for the SelectBenefits options are available on USG Connections > HR4Me > Benefits and from the HR Service Center.