



# 2025

# Benefits Guide

A guide to help you  
build the best benefits.

See the programs to help care for you.  
Choose the benefits that fit.

ENROLLING?  
MAKING A CHANGE?  
CONFIRMING YOUR BENEFITS?

[www.electbenefits.com/USG](http://www.electbenefits.com/USG)

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

MAKE  
TOMORROW  
A HOME FOR  
ALL OF US.



# YOUR GUIDE TO USG BENEFITS

**See the big picture.** You have over 30 benefits options — build a benefits package specific to your life and circumstances. You can customize your benefits to where you are in life’s journey.

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 **www.electbenefits.com/USG**. The site will walk you through each of your benefit decisions. Once enrolled, you’ll return to this same site — from work, home or anywhere — to easily and quickly connect to your benefits.

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### ¿Prefiere recibir esta guía en español?

Vaya a USG Connections > HR4ME > Benefits o vaya a **www.electbenefits.com/USG** para ver e imprimir un archivo PDF o comuníquese con el HR Service Center a 855-874-3272 o **HRServiceCenter@usg.com** para obtener una versión traducida.

### LEARN MORE



Log in to **www.electbenefits.com/USG** to see your current benefits and to enroll or make changes.



Go to **USG Connections > HR4Me** or contact **HRServiceCenter@usg.com** for more information.



### NEW HIRES

**You have 31 days from your hire date to enroll in benefits. Otherwise, you will not have benefits coverage.**

Your next chance to enroll is during the Annual Enrollment period or within 31 days after a qualified life event.

### DURING ANNUAL ENROLLMENT

Every year, you must re-enroll if you want to contribute to the HSA, healthcare FSA, limited purpose FSA and dependent care FSA. Elections for these accounts do not carry over from year to year.



## Enroll, Change and Confirm Your Benefits Elections

### BEFORE YOU ENROLL

- Review your benefits options and consider your needs and budget so you choose the best plans for you.
- Gather your dependents' and beneficiaries' information, including Social Security numbers and dates of birth.

### DURING YOUR ENROLLMENT

- 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 confirmation sheet as proof of enrollment.

### AFTER YOU ENROLL

- Review 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?** Contact the USG Benefit Enrollment Center at ElectBenefits at 888-659-1495, option 1, Monday – Friday, 8 a.m. – 5 p.m. CT.

## TIME TO ENROLL [WWW.ELECTBENEFITS.COM/USG](http://WWW.ELECTBENEFITS.COM/USG)

**Already have an account?** Log in with your email (personal or USG email used previously) and existing password. You may be prompted to reset your password.

**Don't remember your password?** Click "Forgot Password" or call 888-659-1495, option 1, for additional help.

### First-time enrolling?

- Go to **[www.electbenefits.com/USG](http://www.electbenefits.com/USG)** and click on "Register." 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 USG email address (used to confirm your website registration)
- A new password using the requirements listed on the site

- Click "Create Account" and look for an email from ElectBenefits.
- Click on the blue hyperlink in the email to complete your registration.

The link 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.

# Who's Eligible for Benefits?

**All employees and their eligible dependents can enroll in USG's medical coverage only.** This includes temporary and part-time employees working less than 20 hours per week. Full-time and part-time employees working a regular schedule of at least 20 hours per week are eligible for most benefits.

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

- Legal spouse or domestic partner
- Children (natural, legal guardianship, legally adopted and step children) up to age 26
- Children of your domestic partner (up to age 26), if claimed on the employee's taxes
- Children over age 26 who are disabled and covered under the plan prior to age 26

**Covering a domestic partner?** The Internal Revenue Service (IRS) requires that your contributions for your domestic partner's coverage be paid on an after-tax basis. That means USG's cost toward this coverage is reported as imputed income, which is taxable to you. Please consult your tax advisor with questions.

**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.

**Questions or didn't receive a verification request?**

Contact Consova at 866-430-1268 or go to [consova.com/USG](http://consova.com/USG).



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

# Keep Your Information Up-to-Date

You have access anytime throughout the year to review your current benefits and update your beneficiaries. Make sure that your information is listed correctly on [www.electbenefits.com/USG](http://www.electbenefits.com/USG).

**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.

- 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.

## WHEN YOUR LIFE CHANGES

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

**You may need to change your benefits** if you have a qualified life event. Contact the HR Service Center at [HRServiceCenter@usg.com](mailto:HRServiceCenter@usg.com) or 855-874-3272 to report the event and start the enrollment process.

- You can make changes within 31 days after the life event, such as **marriage, divorce, birth or adoption**.
- If you have a change in **Medicaid or State Children's Health Insurance Program (CHIP)**, you have 60 days to make changes.

*If you miss these deadlines, you may have to wait to make changes. You can only make changes during the next Annual Enrollment or your next qualified life event.*



## Medical and Prescription Coverage

You have three medical plan options through USG. Each plan is paired with a health account that works differently.

- Two Consumer Directed Health Plans (CDHPs) — a Low Deductible Plan and High Deductible Plan — paired with a health coverage account (HCA).
- A Health Savings Account Plan (HSA Plan) paired with a health savings account (HSA).

All of the plans cover the same types of services and are administered by Blue Cross and Blue Shield of Illinois (BCBSIL). The plans use BCBSIL's Participating Provider Organization (PPO) network of doctors and medical specialists. Prescription drug coverage is included through a partnership with Prime Therapeutics.

### HOW THE PLANS DIFFER

USG helps offset the cost of medical care by providing a contribution to your HCA or HSA.

Low & High Deductible CDHP Plans Includes an HCA	HSA Plan Includes an HSA
USG HCA contribution is automatically applied to your medical deductible.	You choose whether to spend the USG HSA contribution on current eligible expenses (including dental and vision expenses), or save it for the future.
Lower out-of-pocket maximums — if you have major expenses, what you have to pay before the plan begins to pay 100% is lower.	Higher out-of-pocket maximum — you pay more toward major expenses before the plan begins to pay 100%.
No deductible on prescriptions, but separate prescription out-of-pocket maximum.	Combined medical and prescription deductible and out-of-pocket maximum.
Costs more per paycheck.	Costs least per paycheck.
Covered prescriptions are available at copay/coinsurance without the deductible.	Non-preventive covered prescriptions are subject to the deductible first before copay/coinsurance kicks in.

### NEED HELP CHOOSING A PLAN?

In this guide: See pages 8 – 16 or more help choosing a plan, understanding your costs and how to find savings.

Online: Use our new decision support tool to customize scenarios to help you select the plan that is best for you. Visit **HR4Me** to get started.

When it's time to enroll, go to the ElectBenefits website:  
[www.electbenefits.com/USG](http://www.electbenefits.com/USG).

#### HR4Me

Go to **USG Connections > HR4Me** to learn more.

Learn more about how the HSA Plan works on pages 8 – 9.



#### New Hires

**You have 31 days from your hire date to enroll in benefits. Otherwise, you will not have benefits coverage.**

Your next chance to enroll is during the Annual Enrollment period or within 31 days after a qualified life event.



## YOUR COST OF COVERAGE

	Low Deductible CDHP Plan			High Deductible CDHP Plan			Health Savings Account Plan		
	Weekly	Semimonthly	Annual	Weekly	Semimonthly	Annual	Weekly	Semimonthly	Annual
<b>Employee Only</b>	\$57.00	\$114.00	\$2,736.00	\$22.50	\$45.00	\$1,080.00	\$19.00	\$38.00	\$912.00
<b>Employee + One</b>	\$114.00	\$228.00	\$5,472.00	\$45.00	\$90.00	\$2,160.00	\$38.00	\$76.00	\$1,824.00
<b>Family</b>	\$171.00	\$342.00	\$8,208.00	\$67.50	\$135.00	\$3,240.00	\$57.00	\$114.00	\$2,736.00

Coverage for your domestic partner is subject to imputed income. See page 4 for more information and consult with your tax advisor.

## MEDICAL BENEFITS (amounts shown are what you pay)

Benefits	Low Deductible CDHP Plan		High Deductible CDHP Plan		HSA Plan	
	In-Network <sup>1</sup>	Out-of-Network <sup>2</sup>	In-Network <sup>1</sup>	Out-of-Network <sup>2</sup>	In-Network <sup>1</sup>	Out-of-Network <sup>2</sup>
<b>Preventive Care — no deductible</b>	You pay 0%	No coverage	You pay 0%	No coverage	You pay 0%	No coverage
<b>Total Annual Deductible</b>						
Employee Only	\$1,500	\$2,250	\$2,000	\$3,500	\$2,000	\$4,000
Employee + One or Family	\$3,000	\$4,500	\$4,000	\$7,000	\$4,000	\$8,000
<b>USG Contribution to Your Health Account</b>		<b>To HCA:</b>		<b>To HCA:</b>		<b>To HSA:</b>
Employee Only		\$750		\$500		\$500
Employee + One or Family		\$1,500		\$1,000		\$1,000
<b>Your Opportunity to Contribute to Your Health Account Pretax</b>		N/A		N/A		Up to \$3,800/individual Up to \$7,550/family Up to \$1,000 catch-up if 55 or over
<b>Net Annual Deductible<sup>3</sup></b>	<i>Deductible after HCA dollars are applied:</i>					
Employee Only	\$750	\$1,500	\$1,500	\$3,000	\$2,000	\$4,000
Employee + One or Family	\$1,500	\$3,000	\$3,000	\$6,000	\$4,000	\$8,000
<b>Blue Distinction Centers Specialist Network — deductible applies</b>	You pay 0%		You pay 0%		You pay 0%	
<b>Coinsurance — after deductible is met</b>						
Examples of Covered Services: office visits, x-ray, lab, hospital stays, urgent care, true emergencies <sup>4</sup> mental health and substance abuse treatment	20%	40%	20%	40%	20%	40%
<b>Out-of-Pocket Maximum<sup>3</sup> (Includes net deductible)</b>						
Employee Only	\$1,500	\$3,000	\$3,000	\$6,000	\$4,000	\$8,000
Employee + One or Family	\$3,000	\$6,000	\$6,000	\$12,000	\$8,000	\$16,000

<sup>1</sup> To find an in-network provider, go online to [bcbsil.com](http://bcbsil.com), select "Find a Doctor or Hospital" and select the **Participating Provider Organization (PPO)**. Call a BCBSIL health advocate for assistance.

<sup>2</sup> Out-of-network benefits are based on reasonable and customary (R&C) charges. You're responsible for amounts above R&C.

<sup>3</sup> 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 net deductible and coinsurance.

<sup>4</sup> For true emergencies, you pay 20% after the deductible for emergency room care, whether or not the facility is in the network. For non-emergencies, you pay 40% after the deductible, even if the facility is in-network.



Under the HSA Plan, if you're covering other family members, there is **one family deductible limit** and **one family out-of-pocket maximum limit** for the whole family. When one member, or a combination of members, has expenses that meet those limits, the expenses are aggregated and considered met for all family members. The plan will begin paying its share of eligible expenses if the deductible limit is met or all eligible expenses if the out-of-pocket limit is met. The plan will do so for the whole family for the rest of the plan year.

## PRESCRIPTION BENEFITS

In-Network	Low & High Deductible CDHP Plans			HSA Plan
	Generic	Preferred Brand <sup>5</sup>	Non-Preferred Brand <sup>5</sup>	All Prescriptions
<b>Annual Deductible</b>	None			Subject to medical deductible
<b>Retail</b> (30-day supply from a participating pharmacy)	\$5 copay	30%, unless a generic equivalent is available (\$40 minimum; \$80 maximum)	50%, unless a generic equivalent is available (\$60 minimum; \$120 maximum)	You pay the full cost of prescriptions until your deductible is met. Then you pay the same applicable copay/coinsurance as the CDHP Plans.  <b>Deductible is waived for preventive medication.</b> You only pay the applicable copay/coinsurance.
<b>Mail Order</b> (Up to 90-day supply)	\$10 copay	30%, unless a generic equivalent is available (\$100 minimum; \$160 maximum)	50%, unless a generic equivalent is available (\$150 minimum; \$300 maximum)	
<b>Rx Out-of-Pocket Maximum</b> Employee Only Employee + One or Family	\$3,000 \$6,000			Combined with medical out-of-pocket maximum

<sup>5</sup> For a copy of the Prime Therapeutics Prescription Drug Formulary List, go to [bcbsil.com](http://bcbsil.com), log in and use the "Provider Finder" tool.



If you enroll in the HSA Plan, you are responsible for the full cost of prescription drugs until the deductible is met. Preventive prescriptions are covered at an applicable copay/coinsurance right away without having to meet the deductible. You can search the Preventive Drug List to see if your prescription is on that list.

### MAINTENANCE MEDICATIONS — HIGH AND LOW PLANS

Long-term (maintenance) medications need to be filled for a 90-day supply through home delivery or at a network 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, your prescription may not be covered. Contact Express Scripts at 833-715-0942 or go to [esrx.com/bcbsil](http://esrx.com/bcbsil) 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. Contact Accredo at 833-721-1619 or go to [accredo.com/bcbsil](http://accredo.com/bcbsil) to get started.

### PREVENTIVE MEDICATIONS — HSA PLAN

The deductible is waived for prescriptions on the preventive drug list. The list of approved preventive medications is available on **HR4Me** and the ElectBenefits enrollment site.

### 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 [bcbsil.com](http://bcbsil.com) for you to use the more expensive brand-name drug alternative.

QUESTIONS?

**Call a Health Advocate  
at Blue Cross and Blue Shield  
of Illinois**

**844-266-8796**

Get personalized help with questions about the plans or services. This is the same number on the back of your ID card.

## Questions to Consider When Choosing a Health Plan

1. Would you prefer to pay more in payroll contributions or at the time of care?
2. How often do you anticipate seeking medical care or taking prescription medications?
3. Do you have a chronic condition that would require regular doctor visits or a non-preventive maintenance medication?
4. Are you expecting a major life event, such as welcoming a child or having surgery?
5. If you have a bad year, would you be able to pay your deductible?

### IT'S IMPORTANT TO UNDERSTAND YOUR PLAN OPTIONS.

USG contributes to help offset medical costs in the form of an HCA (Low and High Deductible CDHP Plans) or an HSA (HSA Plan). The accounts differ on how they can be applied or used. An HSA offers you more control and flexibility in how you spend money on healthcare.

#### Health Coverage Account:

HCA funds are automatically applied to your deductible for non-preventive medical claims. USG allocates funds on an annual basis. Funds are forfeited if not used within that calendar year.

#### Health Savings Account:

HSA funds can be used for all qualified healthcare expenses. USG will make an annual contribution, and you can also contribute to this account. You can contribute an additional \$3,800 individual or \$7,550 family (up to the IRS limit). If you are 55 or over, you can contribute an additional \$1,000 as catch up. Funds are never forfeited unless you spend them, and the account stays with you, even if you change plans, jobs, or retire.

For more information about HSAs and qualified medical expenses, refer to IRS Publications 969 and 502 at [irs.gov](https://www.irs.gov) or consult a tax professional.



## IRS ELIGIBILITY RULES APPLY TO THE HSA

You can't contribute to an HSA if you're:

- Covered by another health plan that isn't a high deductible plan, including spouse's healthcare FSA that is not a limited purpose healthcare FSA.
- Eligible to be claimed as a dependent on someone else's tax return
- Enrolled in Tricare, Medicare or Medicaid

**Eligible for Medicare within the next 12 months?** Consider seeking advice from a financial or tax advisor to understand how Medicare enrollment may affect your future HSA contributions and how to avoid potential penalties.

It's your responsibility to determine if you're eligible to contribute to an HSA and to receive a contribution from USG.



## More About an HSA

### AN HSA HAS SEVERAL ADDITIONAL BENEFITS

**Save in taxes\* (three ways)** — The money in an HSA is not subject to federal tax...not when you put money in, not when you take it out for eligible expenses, nor when you invest it to potentially grow your account.

**Control your own account** — It's your money. You decide how to use it toward eligible expenses. You can start, change or stop your contributions at any time. The account stays with you if you change plans or jobs.

**Grow it** — Money left in cash has the opportunity to earn interest. You can also invest in a variety of options available through Fidelity. Some funds require a minimum amount to invest.

### HOW TO USE YOUR HSA

#### Contributing to Your HSA

You may make before-tax deposits via automatic payroll deduction by electing an amount on the ElectBenefits site when you enroll. You can change the deduction amount at any time. You can also contribute in a lump sum by writing a check on an after-tax basis to be claimed as a deduction when you file your tax return.

**Important:** You're responsible for making sure your HSA contributions (from all sources) are within your maximum annual contribution limits.

Please note: For new hires, you must be enrolled in the HSA Plan on the first of the month to contribute for that month.

#### Paying for Eligible Expenses

You will receive an HSA debit card to be used for direct payment at a doctor's office, pharmacy or healthcare facility. Or you can also easily pay bills directly from your HSA to your healthcare provider online through the Fidelity Health app or at [netbenefits.com](https://www.netbenefits.com). Just select the payee and choose a payment amount.

#### Transferring Other HSA Assets

After your Fidelity HSA is open, you may wish to transfer in assets from other HSA providers. Fidelity will coordinate the transfer for you at no charge, but your current HSA provider may charge a fee. Transfer of assets is not considered a taxable event and is not applied toward your HSA maximum annual contribution limit for 2025.

Visit [myfidelitysite.com/USG](https://myfidelitysite.com/USG) to learn more about HSAs and investment options.

### ABOUT USG HSA CONTRIBUTION

USG makes a contribution to your HSA to help pay for eligible expenses and to provide a health savings "head start."

If you are covering just yourself, USG contributes \$500 to your HSA. If you are covering other family members, USG contributes \$1,000. The USG contribution is made in two equal installments in January and July. The deposits are prorated for new employees, based on hire date and Fidelity HSA open date. If you are married to another USG employee and you each separately elect coverage in the HSA Plan, the company contribution will be limited to \$1,000.

Please note: It's your responsibility to ensure your Fidelity HSA is in good standing and eligible to accept the USG funds. Watch for communication from Fidelity about any action required to activate your account.



### KEEP YOUR RECEIPTS

Since an HSA provides a tax benefit, it's important to keep records for tax purposes — including receipts and your insurance statements. You may be asked to prove that you used your HSA exclusively for qualified expenses. Each year, Fidelity will provide you and the IRS a Form 5498-SA, which summarizes contributions to, and the fair market value of, your HSA. If a distribution is taken from your account, a Form 1099-SA is provided for the year in which the distribution was taken.

\* Each state can decide to follow federal guidelines for HSAs or establish its own. CA and NJ have chosen to tax HSA contributions. Any potential interest or capital gains you earn in your HSA are considered taxable income in those states.

# Healthcare Decision-Making Guide

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

## Are You Paying for More Than You Need?

Look closely at the premiums and compare the deductible amounts to what you'll pay annually from your paycheck. About 65% of USG employees never reach their deductible. An even higher percentage never meet the plan's out-of-pocket maximum. The following are examples of how the different plans pay for expenses.

You can use your own expenses to create customized scenarios with our online decision support tool to help you decide which medical plan best fits your needs. Visit **HR4Me** to get started.

### Shane: Occasional User of Services

Shane is in good health. He primarily uses his medical benefits for annual preventive exams. This year, Shane has the flu, which leads to bronchitis. His total cost for services (claims) comes to \$800. He also has a prescription for a general antibiotic.

Employee-Only Coverage	Low Deductible CDHP (\$1,500 deductible)	High Deductible CDHP (\$2,000 deductible)	HSA Plan (\$2,000 deductible)
<b>Annual Medical Claims</b>	\$800	\$800	\$800
<b>Annual Rx Costs</b>	\$5	\$5	\$15
<b>Company HCA or HSA Contribution</b> <i>Both are used toward paying claims</i>	- \$750	- \$500	- \$500 (Contributed and used)
<b>Shane's Tax-Free Contribution to His HSA</b>	N/A	N/A	- \$315 (Contributed and used)
	=	=	=
<b>Shane's Cost for Medical Claims</b> <i>Amount remaining after HCA or HSA dollars used and before meeting deductible</i>	<b>\$50</b>	<b>\$300</b>	<b>\$0</b>
<b>Shane's Cost for Rx</b>	\$5	\$5	\$0
<b>Annual Premium</b> <i>Amount deducted from paycheck</i>	+ \$2,736	+ \$1,080	+ \$912 + \$315 to his HSA
	=	=	=
<b>Shane's Total Annual Costs</b>	<b>\$2,791</b>	<b>\$1,385</b>	<b>\$1,227</b>



Under the Low and High Plans, Shane pays a copay or coinsurance for his prescription medication. Under the HSA Plan, Shane pays the full cost of the medication since his deductible is not met. HCA dollars can only be used toward his medical claims. His HSA balance can be used for medical and prescription expenses.

**Shane saves at least \$158 under the HSA Plan. He is also benefiting from using a tax-free account to fund his healthcare needs.**



# Healthcare Decision-Making Guide

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

## Jane: Occasional User of Services with Planned Future Expenses

Jane is relatively healthy and rarely requires medical services beyond her annual preventive checkups. She's looking to start a family within the next few years. Jane chooses to participate in the HSA plan and contribute the premium difference between the High Deductible CDHP and HSA Plan into her HSA account. She has a small out-of-pocket claim for a non-preventive service. Knowing she wants to save for future expenses, Jane elects to not use her HSA funds to pay for her claim and pays \$75 out of pocket.

Employee-Only Coverage	Low Deductible CDHP (\$1,500 deductible)	High Deductible CDHP (\$2,000 deductible)	HSA Plan (\$2,000 deductible)
<b>Annual Medical Claims</b>	\$75	\$75	\$75
<b>Company HCA or HSA Contribution</b> <i>Only HCA dollars used toward paying claims (HSA funds saved)</i>	- \$750	- \$500	\$500 (Contributed but not used)
<b>Jane's Tax-Free Contribution to Her HSA</b>	N/A	N/A	\$168 (Contributed but not used)
	=	=	=
<b>Jane's Cost for Medical Claims</b> <i>Amount remaining after HCA dollars used and before meeting deductible</i>	<b>\$0</b>	<b>\$0</b>	<b>\$75</b>
<b>Annual Premium</b> <i>Amount deducted from paycheck</i>	+ \$2,736	+ \$1,080	+ \$912 + \$168 to her HSA
	=	=	=
<b>Jane's Total Annual Costs<sup>6</sup></b>	<b>\$2,736</b>	<b>\$1,080</b>	<b>\$1,155</b>
<b>Jane's Year-end HSA Savings</b>	<b>\$0</b>	<b>\$0</b>	<b>\$668</b>

<sup>6</sup> Excludes the costs for prescription drugs.



Jane is grateful for her good health. Because she only had a small non-preventive expense, she would not have used the entire HCA balance under the Low or High Plan and the remaining amounts would have been lost to her. With the HSA, Jane is able to save the remaining dollars USG contributed on her behalf to use for future healthcare needs because the funds roll over from year to year.

**Jane chooses not to use her HSA account to pay for her medical claims this year and now has \$668 in her health savings account for future use.**



# Healthcare Decision-Making Guide

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

## The Smiths: Moderate Users of Services

Gerald and Marcia have one child. They are all relatively healthy, but Gerald does manage high blood pressure and visits his primary provider a few times a year. He takes a generic maintenance medication which costs him the same under all 3 plans. This is because the medication is considered preventive under the HSA Plan. Their child has frequent ear infections that are treated with antibiotics which are subject to the deductible under the HSA Plan. The Smiths' total cost for services (medical claims) comes to \$4500.

Family Coverage	Low Deductible CDHP (\$3,000 deductible)	High Deductible CDHP (\$4,000 deductible)	HSA Plan (\$4,000 deductible)
<b>Annual Medical Claims</b>	\$4,500	\$4,500	\$4,500
<b>Annual Rx Cost</b>	\$60	\$60	\$100
<b>Company HCA or HSA Contribution</b> <i>Both are used toward paying claims</i>	- \$1,500	- \$1,000	- \$1,000 (Contributed and used)
<b>Smiths' Tax-Free Contribution to Their HSA</b>	N/A	N/A	- \$1,000 (Contributed and used)
	=	=	=
<b>Remaining Medical Claims Amount</b>	<b>\$3,000</b>	<b>\$3,500</b>	<b>\$2,500</b>
— Remaining Deductible <i>Amount Smiths pay after HCA or HSA dollars used and before meeting deductible</i>	\$1,500	\$3,000	\$2,000
— Applied to 20% Coinsurance <i>Amount Smiths pay on claims after meeting deductible</i>	\$1,500 x 20% = \$300	\$500 x 20% = \$100	\$500 x 20% = \$100
<b>Smiths' Cost for Rx</b>	\$60	\$60	\$100
	=	=	=
<b>Smiths' Cost for Claims</b>	<b>\$1,860</b>	<b>\$3,160</b>	<b>\$2,200</b>
<b>Annual Premium</b> <i>Amount deducted from paycheck</i>	+ \$8,208	+ \$3,240	+\$2,736 +\$1,000 to their HSA
	=	=	=
<b>Smiths' Total Annual Costs</b>	<b>\$10,068</b>	<b>\$6,400</b>	<b>\$5,936</b>



In general, under the HSA Plan prescription medication is subject to the deductible. However, for medication on the preventive drug list, the deductible is waived, making it easier for members with chronic condition to still benefit from the HSA.

**The Smiths save at least \$464 under the HSA Plan. They are also benefiting from using a tax-free account to fund their healthcare needs.**



# Healthcare Decision-Making Guide

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

## The Williams: Moderate Users of Services

John and Kathy have three children. Timmy, their youngest child has a medical condition that requires frequent therapy sessions. The rest of the family is healthy and requires no additional medical services. Timmy's total cost of services (medical claims) comes to \$4,500.

Family Coverage	Low Deductible CDHP (\$3,000 deductible)	High Deductible CDHP (\$4,000 deductible)	HSA Plan (\$4,000 deductible)
<b>Annual Medical Claims</b>	\$4,500	\$4,500	\$4,500
<b>Company HCA or HSA Contribution</b> <i>Both are used toward paying claims</i>	-\$1,500	-\$1,000	-\$1,000 (Contributed and used)
<b>Williams' Tax-Free Contribution to Their HSA</b>	N/A	N/A	-\$1,000 (Contributed and used)
	=	=	=
<b>Remaining Medical Claims Amount</b>	<b>\$3,000</b>	<b>\$3,500</b>	<b>\$2,500</b>
– <b>Remaining Deductible</b> <i>Amount Timmy owes after HCA or HSA dollars used and before meeting deductible</i>	\$0 <i>Timmy met individual deductible cap of \$1,500</i>	\$1,000 <i>Timmy met individual deductible cap of \$2,000</i>	\$2,000 <i>No individual deductible cap</i>
– <b>Applied to 20% Coinsurance</b> <i>Amount Timmy owes on claims after meeting deductible</i>	\$3,000 x 20% = \$600	\$2,500 x 20% = \$500	\$500 x 20% = \$100
	=	=	=
<b>Williams' Cost for Claims</b>	<b>\$600</b>	<b>\$1,500</b>	<b>\$2,100</b>
<b>Annual Premium</b> <i>Amount deducted from paycheck</i>	+\$8,208	+\$3,240	+\$2,736 +\$1,000 HSA
	=	=	=
<b>Williams' Total Annual Costs<sup>7</sup></b>	<b>\$8,808</b>	<b>\$4,740</b>	<b>\$5,836</b>

<sup>7</sup> Excludes the costs for prescription drugs.



Under the CDHP Plans, each family member has an individual deductible maximum limit. Once reached, the plan will begin paying for that individual's services even though the family deductible is not met. Under the HSA Plan, there is no individual deductible. If only one member of the family has medical expenses, that family member will need to pay the full deductible before the plan begins to pay.

**The Williams save at least \$1,096 with the High Deductible CDHP.**





## Help with Your Medical Plan Questions

### START WITH BCBSIL.COM

Register with Blue Access ([bcbsil.com](https://www.bcbsil.com)) for 24/7 access to find in-network care, access your claims, view your ID card and much more. Be sure to select the Participating Provider Organization (PPO) when looking for providers.



**Download the app** to keep the information at your fingertips. Text BCBSIL APP to 33633. You'll need your BCBSIL ID to download the app.

### TALK TO YOUR HEALTH ADVOCATE

You and your family members can talk to a personal health advocate — they're like a concierge to help you understand a diagnosis or treatment, find a provider, sort through bills and much more. Call 844-266-8796, or chat live via the BCBSIL app.

### USE THE DECISION SUPPORT TOOL

Make an informed decision. Run personalized scenarios based on your anticipated medical expenses to see which plan is right for you. Visit **HR4Me** to get started.

### CONSIDERING THE HSA PLAN?

Visit [myfidelitysite.com/USG](https://myfidelitysite.com/USG) to learn more on how to maximize the impact of your HSA account — take advantage of triple tax savings, plan for future expenses and save for retirement.

For information on how to use your HSA, visit **HR4Me**.

### SEEING YOUR CDHP COVERAGE AND HCA ONLINE

LOG IN TO  
BCBSIL.COM:

EXAMPLE  
High Deductible CDHP  
Family Coverage

Go to **Coverage > Medical**  
to see the **total annual deductible** **\$4,000**

Go to **Spending > HCA**  
to see **USG's HCA contribution** **- \$1,000**

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**Bottom line, the portion of the  
annual deductible you'll pay:** **= \$3,000**

### SEEING YOUR HSA BALANCE ONLINE

To see your Fidelity HSA balance in 2025 (if you elect the HSA Plan and open an HSA account), go to [netbenefits.com](https://netbenefits.com) and click on the Health Savings Account tile.



## Ways to Save on Your Healthcare

### SHOP AROUND FOR QUALITY AND VALUE

#### Estimate Costs

An MRI in one facility might be over \$2,500, but under \$900 just down the street. Use the online cost estimator at [bcbsil.com](https://www.bcbsil.com) to find the best value before you have a procedure, test or treatment.

#### See the Best Specialists

Blue Distinction Centers (BDCs) have a proven record of affordable, quality care, treatment expertise and better patient results. Look for the BDC designation when searching for specialty care on [bcbsil.com](https://www.bcbsil.com).

### ENROLLING IN THE HSA PLAN? CONTRIBUTE TO YOUR ACCOUNT

USG will contribute to your HSA with a \$500 individual or \$1,000 family contribution. You can also contribute an additional \$3,800 individual or \$7,550 family (up to the IRS limit). You can contribute an additional \$1,000 if you are 55 or older. The money never expires — it's yours to use on eligible health expenses now, ten years from now or when you retire.



**Benefit tip:** Consider putting the difference in your premium amount into your HSA to help you save for future expenses.

### ASK BEFORE YOU BUY

#### Go Generic

Always ask your doctor or pharmacist if there is a generic alternative for your prescription. You'll pay more for brand-name drugs, sometimes much more.

#### “Go” to the Doctor Online

Through MDLive, you can talk onscreen 24/7 to a licensed doctor or counselor, by mobile phone, video or app. From pink eye and sinus infections, to stress and anxiety, you're covered — usually for less money than an office visit. Sign up through [bcbsil.com](https://www.bcbsil.com) or through the app.

#### Stay Healthy with Free Care

Preventive care is covered 100%, even before you meet your deductible. Be sure to get your medical, dental and vision checkups, immunizations and routine screenings.



## Ways to Save on Your Healthcare continued

### LEAN ON YOUR OTHER BENEFITS

#### Tax-Free Flexible Spending Account (FSA)

Enroll in the healthcare FSA and use pretax money to pay for eligible healthcare expenses. You decide the amount you'd like to save for the year, and the money is deducted (before taxes) from your paycheck each pay period.

#### Enrolling in the HSA Plan?

If you plan to max out your HSA contribution and want to take advantage of additional tax savings, for things like glasses and braces, you can enroll in a limited purpose healthcare FSA. A limited purpose healthcare FSA functions under the same rules as a regular healthcare FSA but has different eligible expenses. A limited purpose FSA can only be used for dental and vision expenses.

See page 19 for more details.

#### Critical Illness Coverage

Get a lump-sum payment of up to \$30,000 if you or a family member becomes critically ill. See page 22.

#### Accident Insurance

Receive a lump-sum benefit if you or a family member is accidentally injured. See page 22.

#### Well onTarget to Better Health

Find the tools and support you need to improve your health, plus rewards for making healthy choices. Earn wellness "Blue Points" to get rewarded when you take a health assessment, complete self-management programs, enroll in a fitness program and much more. Learn more by logging in to [bcbsil.com](https://bcbsil.com) and selecting the Well onTarget link.

### FAMILY BUILDING BENEFITS

**Fertility care benefits**, covering both diagnosis and treatment, are included in your USG medical plan. Contact BCBSIL or speak with a health advocate for more information.

**HR4Me**

Go to [USG Connections > HR4Me](#) to learn more.



Photo credit Hinge Health

## PERSONALIZED CARE FOR BACK AND JOINT PAIN

Start with prevention. Hinge Health, offered through the BCBSIL medical plan, offers tailored programs to help you prevent and relieve **back and joint pain**. Answer a short questionnaire and you'll receive:

- Personalized online exercise therapy program
- Unlimited one-on-one health coaching

The online exercise therapy sessions are 15 minutes, three times a week, and increase in difficulty when you're ready. You must be enrolled in the USG medical plan to participate. To get started, go to [hingehealth.com/usg](https://hingehealth.com/usg) or call 855-902-2777.



## Dental Coverage

One plan option, administered by Blue Cross and Blue Shield of Illinois (BCBSIL), through the **BlueCare** dental network.

Dental Plan Highlights (in-network <sup>8</sup> amounts shown are what you pay)	
<b>Deductible</b>	\$50 per person/\$100 per family
<b>Annual Maximum Benefit</b>	Plan pays \$2,000 per person, excluding orthodontia
<b>Preventive Services</b> Oral Examinations Cleanings (one every six months <sup>9</sup> )	You pay 0%
<b>Basic Care</b> Fillings Extractions (simple) Periodontics	20% after deductible (10% if Preferred Provider)
<b>Major Care</b> Crowns Dentures Extractions (surgical) Bridgework	50% after deductible
<b>Orthodontia</b> (children under age 19)	50% after deductible Plan pays up to \$2,000 lifetime maximum per person

<sup>8</sup> If you receive care from a provider that is not in the dental network, you are responsible for paying the charges at the time you receive care and then filing a claim with BCBSIL Dental. BCBSIL will reimburse a portion of the charges allowed by the plan. You are responsible for all amounts over the plan allowance.

<sup>9</sup> Three cleanings per year are available for individuals who are pregnant or diagnosed with diabetes or cardiovascular disease.

### YOUR COST OF COVERAGE

	Weekly	Semimonthly	Annual
<b>Employee Only</b>	\$4.25	\$8.50	\$204.00
<b>Employee + One</b>	\$8.50	\$17.00	\$408.00
<b>Family</b>	\$12.25	\$25.50	\$612.00



# Vision Coverage

Two plan options administered by VSP.

Vision Plan Highlights (in-network <sup>10</sup> )	Basic Plan	Premium Plan
<b>Preventive Exam</b>	You pay \$10	You pay \$10
<b>Primary Eyecare</b> Additional exam and services for those with diabetes, glaucoma, age-related macular degeneration	You pay \$20	You pay \$20
<b>Frames and Lenses</b> (instead of contacts) • Once per calendar year for lenses • Standard lens options included (lined bifocal/trifocal, standard progressive lenses, UV protection, scratch-resistance, impact-resistance for children)	Every other year for frames You pay \$25, then the plan pays up to \$150 allowance on frames, or up to \$200 for featured frames Save 20% on amounts over your allowance	Every year for frames You pay \$10, then the plan pays up to \$175 allowance on frames, or up to \$250 for featured frames Save 20% on amounts over your allowance
<b>Lens Enhancements</b> Once per calendar year	Premium progressive lenses: Your copay is \$95-\$105 Custom progressive lenses: Your copay is \$150-\$175 Save an average of 30% on other lens enhancements	
<b>Contact Lens Evaluation and Fitting</b> Once per calendar year	You pay up to \$60	You pay up to \$45
<b>Contacts</b> (instead of prescription glasses) Once per calendar year	Plan allowance pays up to \$150 and you do not owe a copay	Plan allowance pays up to \$175 and you do not owe a copay
<b>Upgrades — VSP EasyOptions</b> Once per calendar year (not available at Walmart, Costco and Sam's Club)	Not available for Basic Plan	Add <u>one</u> option at time of service for no additional cost: • Additional \$75 frame allowance • Premium or custom progressive lenses • Anti-glare coating • Additional \$75 contact lens allowance

<sup>10</sup> If you receive care from a provider that is not in the VSP network, you are responsible for paying the charges at the time you receive care and then filing a claim with VSP. VSP will reimburse a portion of the charges allowed by the plan. You are responsible for all amounts over the plan allowance.

## YOUR COST OF COVERAGE

	Basic Plan			Premium Plan		
	Weekly	Semimonthly	Annual	Weekly	Semimonthly	Annual
<b>Employee Only</b>	\$0.75	\$1.50	\$36.00	\$2.25	\$4.50	\$108.00
<b>Employee + One</b>	\$1.25	\$2.50	\$60.00	\$3.75	\$7.50	\$180.00
<b>Family</b>	\$2.00	\$4.00	\$96.00	\$6.00	\$12.00	\$288.00





## Flexible Spending Accounts

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

FSA accounts are administered by HSA Bank. Call 833-228-9342 or register your account at [enterprise.hsabank.com](https://enterprise.hsabank.com).

### YOU HAVE THE FOLLOWING OPTIONS:

Healthcare FSA	
<b>Eligible Expenses</b>	Reimburse qualified medical, prescription, dental and vision expenses incurred between January 1, 2025, and December 31, 2025
<b>Maximum Annual Contribution</b>	\$3,200 <sup>11, 12</sup>
<b>Rollover</b>	\$640 <sup>12</sup>
Limited Purpose Healthcare FSA — must be enrolled in the HSA Plan	
<b>Eligible Expenses</b>	Reimburse qualified dental and vision expenses incurred between January 1, 2025, and December 31, 2025
<b>Maximum Annual Contribution</b>	\$3,200 <sup>11, 12</sup>
<b>Rollover</b>	\$640 <sup>12</sup>
Dependent Care FSA	
<b>Eligible Expenses</b>	Reimburse out-of-pocket care expenses incurred between January 1, 2025, and December 31, 2025, for your children under age 13 and for your mentally or physically disabled dependents of any age
<b>Maximum Annual Contribution</b>	\$5,000 <sup>12</sup> per year (or up to \$2,500 <sup>12</sup> if you're married and file federal taxes separately, per household)

<sup>11</sup> Maximum contribution amount may be lower for highly compensated employees, subject to annual non-discrimination testing.

<sup>12</sup> This is the current limit set by the IRS. Go to [irs.gov](https://irs.gov) for the most up to date 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.

- Qualified healthcare expenses: [irs.gov/pub/irs-pdf/p502.pdf](https://irs.gov/pub/irs-pdf/p502.pdf)
- Qualified dependent care expenses: [irs.gov/pub/irs-pdf/p503.pdf](https://irs.gov/pub/irs-pdf/p503.pdf)

### USING YOUR FSA DEBIT CARD

You'll automatically receive a debit card when you enroll in the FSA — a convenient tool to help you access your funds instead of using another form of payment. Through the HSA Bank website, you can monitor your FSA account, spending, submit receipts and even reimburse yourself for eligible expenses (claims).

The IRS requires you to maintain receipts and records for any purchase or service, even when purchased with your FSA debit card. The following information is required to approve a payment:

- Provider/retailer name
- Name of person receiving service
- Date of expense
- Description of expense
- Amount paid

#### You'll be asked to submit receipts and an explanation of benefits, if:

- The provider/retailer doesn't include these details with the claim
- The transaction amount doesn't **exactly match** the claim amount.

If you can't provide the appropriate documentation, you'll need to reimburse your account.

#### Tips for using your FSA debit card:

- Pay your medical provider after your claim is processed by BCBSIL.
- Pay at the pharmacy desk, not the retail counter, for prescriptions.
- Reimburse yourself through the HSA Bank website.
- Submit receipts when required, to approve the use of your debit card.

## Life Insurance

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

### BASIC COVERAGE FOR YOU

USG provides you with Basic Life Insurance and Accidental Death & Dismemberment (AD&D) Insurance — at no cost to you.

Life insurance coverage is equal to your annual base salary (rounded up to nearest \$1,000), with a minimum of \$50,000. AD&D coverage is equal to your life insurance amount.

### SUPPLEMENTAL COVERAGE

You can buy Supplemental Life and AD&D Insurance for yourself, as well as Dependent Life Insurance for your family members. You pay for coverage after taxes and the cost is based on your age and coverage level. Log in to the ElectBenefits website ([www.electbenefits.com/USG](http://www.electbenefits.com/USG)) to see your monthly cost.

### COVERAGE FOR YOU

You can elect 1x to 6x your annual base salary (up to \$2 million). Elections that are more than 2x your annual salary or over \$200,000 require completion of a medical questionnaire.

Supplemental AD&D is included with this coverage and equals your Supplemental Life election.

### COVERAGE FOR YOUR FAMILY

#### Spouse

You can elect from \$5,000 to \$50,000 of coverage, in increments of \$5,000.

#### Dependent Children

You can elect from \$5,000 to \$20,000 of coverage, in increments of \$5,000.

### ELECTING OR CHANGING YOUR COVERAGE LATER

You will need to complete an Evidence of Insurability (EOI) form if you:

- Do not elect Supplemental Life coverage when you first become eligible and you want to enroll later.
- Want to increase your coverage.

Your coverage will not start until MetLife approves you.



### DON'T FORGET

Review your life insurance beneficiaries at [www.electbenefits.com/USG](http://www.electbenefits.com/USG).

And review your beneficiaries for the USG Retirement and Investment plans at [netbenefits.com](http://netbenefits.com).

**HR4Me**

Go to [USG Connections > HR4Me](#) to learn more.

## Short-Term Disability

USG employees are automatically covered by a short-term disability benefit if unable to work due to a personal injury or illness. Benefits are payable for up to 26 weeks, but the length of your paid leave is determined and approved by MetLife, our leave of absence administrator.

### Hourly Employees

50% of your regular weekly earnings, up to \$575/week

### Salaried Employees

50% or 100% of your pay, based on length of service

Employees who reside in California, Colorado, New Jersey, New York state, Oregon or Washington state may receive all or a portion of your leave pay from your state, MetLife, USG or a combination.

**Important:** If you have questions about what types of leave are available to you, paid or unpaid, call MetLife Absence Management at 877-638-8262. Your disability may coordinate with other types of leaves, such as federal Family Medical Leave (FMLA), USG's paid parental leave and other USG leave policies.

**Paid parental leave** is available for up to six weeks. This time off is in addition to your standard medical/FMLA leave. See more details on [USG Connections > HR4Me > Benefit Programs and Time Away from Work](#).

## 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.

**Cost of Coverage** — 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.

## Vacation/Paid Time Off (PTO) and Holidays

USG provides all regular, full-time and part-time employees working 20+ hours/week with paid annual vacation/PTO and paid holidays. These provide you with an opportunity to rest, relax or take part in recreational activities away from your job responsibilities.

- 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 verify your Vacation/PTO Buy election each year** 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.

### \*ENROLLING IN LTD COVERAGE

If you do not elect LTD coverage when first 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.

# Additional Income Insurance

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 is 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.

Each plan gives you the choice to **select a High or Low Plan**, which offer different levels of coverage.

### 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 3x 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.



Once enrolled, you're also eligible for a **Health Screening Benefit**. It provides an additional \$50 (Low Plan) or \$75 (High Plan) per covered person, per year, for covered health screenings and tests. Call 800-438-6388 to claim your benefit.

# Commuter/Parking Benefits

This benefit allows you to set aside funds on a pretax basis to use toward work-related parking and mass transit expenses. You can enroll or change your election at any time through WageWorks. Go to **USG Connections > HR4Me** to learn more.

# MetLife Legal Plans

MetLife offers you quick and affordable access to specialized legal services, by phone or at an office consultation. 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. For a full list of services covered by these plans or to enroll, log in to **www.electbenefits.com/USG**.

### 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.

### High Plan — \$16.85 per month

In addition to the services offered under the Low Plan, you have comprehensive and proactive identity theft, financial fraud, and online protection through Aura.

# Pet Insurance

You can enroll anytime.

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

You can choose from a wellness plan, major medical or a complete coverage plan that covers both. Call MetLife at 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 after-tax pay to participate. You are automatically enrolled unless you decline the benefit at [netbenefits.com](https://netbenefits.com).

This 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 USG Investment Plan.

**Your Contributions** — You are automatically enrolled in the USG 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 pretax 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](https://netbenefits.com).

### GuidanceResources — Work/Life and Employee Assistance Plan (EAP)

USG provides confidential assistance through ComPsych GuidanceResources to help you cope with everyday needs and life events. You're automatically enrolled and pay no cost to participate. The program is available to all members of your household.

In addition to **online training and resources**, you have a variety of support available:

**Confidential Emotional Support** — Highly trained clinicians ready to listen and help with any issues, including anxiety, depression, stress, grief, loss, life adjustments and relationships. Each member of your household has **five free sessions**, per issue.

**Work-Life Solutions** — Find qualified referrals and resources for many items on your to-do list, such as: finding child and elder care, home repair contractors, planning events and even locating pet care.

**Legal Guidance** — Talk to an attorney for practical assistance with your most pressing legal issues. Need representation? Receive a 30-minute free consultation and a 25% reduction in fees.

**Financial Resources** — Financial experts can assist you with a wide range of issues: retirement planning, taxes, relocation, mortgages, insurance, budgeting, debt, bankruptcy and more.

Call 877-762-1606 or log in to [guidanceresources.com](https://guidanceresources.com) to learn more. Web ID: USGEAP



# 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 exchange.
- **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 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 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.
- **Women’s Health and Cancer Rights Act** that summarizes the benefits available under the USG 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 on the Benefits page and [www.electbenefits.com/USG](http://www.electbenefits.com/USG).

Contact the HR Service Center at 855-874-3272 or email [HRServiceCenter@usg.com](mailto: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.

### LEARN MORE

#### HR4Me

**USG Connections > HR4Me** is your first stop to find answers and information about your benefits. There’s more to know:

- Compensation
- Education and on-the-job training
- Open positions
- Recognition and much more

## 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 [www.electbenefits.com/USG](http://www.electbenefits.com/USG).

Need help online? Call the USG Benefit Enrollment Center at 888-659-1495, option 1.

**HR4Me**

Go to **USG Connections > HR4Me > Benefits** or contact the HR Service Center at [HRServiceCenter@usg.com](mailto:HRServiceCenter@usg.com) or 855-874-3272.

### FOR BENEFIT-SPECIFIC QUESTIONS

You can see what's covered, how the plans work, find network providers and file claims.

Benefit	Contact	Website	Phone
Accident Insurance Auto/Home Insurance Critical Illness Pet Insurance	MetLife	mybenefits.metlife.com	800-438-6388
Commuter/Parking Benefits	WageWorks/HealthEquity	wageworks.com	877-924-3967
Dental	Blue Cross and Blue Shield of Illinois	bcbsil.com	844-266-8796
Dependent Verifications	Consova Corporation	consova.com/USG	866-430-1268
Flexible Spending Accounts (FSAs)	HSA Bank	enterprise.hsabank.com	833-228-9342
Health Savings Account (HSA)	Fidelity	netbenefits.com	844-874-7283
Legal Plans and ID Management Services	MetLife	www.electbenefits.com/USG	800-821-6400
Life and AD&D Insurance (Basic, Supplemental and Dependent)	ElectBenefits	www.electbenefits.com/USG	888-659-1495, option 1
Medical, Prescription and Dental Plans – Health Advocate	Blue Cross and Blue Shield of Illinois	bcbsil.com	844-266-8796
Retail Prescriptions	Prime Therapeutics	bcbsil.com	844-266-8796
Maintenance/Mail Order Prescriptions	Express Scripts	esrx.com/bcbsil	833-715-0942
Specialty Prescriptions	Accredo	accredo.com/bcbsil	833-721-1619
Pension – USG Retirement Plan	Fidelity	netbenefits.com	844-874-7283
Short- and Long-Term Disability	MetLife	mybenefits.metlife.com	877-638-8262
Vacation, Paid Time Off (PTO) and Holidays, Vacation/PTO Buy	Supervisor or Manager	N/A	N/A
Vision	VSP	usg.vspforme.com	800-877-7195
Work/Life and EAP Services	ComPsych GuidanceResources	guidanceresources.com Web ID: USGEAP	877-762-1606
401(k) – USG Investment Plan	Fidelity	netbenefits.com	844-874-7283

This guide contains basic information about your 2025 SelectBenefits options, and does not attempt to cover every detail of every plan. If there is any difference between the information in this guide 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.

# LEARN... SEE... DO...

Could you be missing out?  
Check out all the programs USG provides to support you.

## Access at Work HR4Me

There's more to explore. Log in to **USG Connections**. Click on **HR4Me** in Quick Links.



### USG Benefits

Do you know all your options? See if there are benefits you could be using.



### Compensation

Your hard work pays off. Learn specifics about our programs.



### Recognition

You go above and beyond — get recognized for it. Or, maybe recognize a colleague!



### Teamtaylor System

Check out the USG job opportunities — look for your next role or help a friend do the same.



### LEAD System

Sky's the limit! Further develop your talent and career.

## Access From Anywhere [www.electbenefits.com/USG](http://www.electbenefits.com/USG)

Confirm your benefits in one place. Log in to [www.electbenefits.com/USG](http://www.electbenefits.com/USG).

- **See your current benefits elections**
- **Review your beneficiaries**
- **Enroll in benefits**
  - New hires
  - Annual Enrollment
  - Life events
- **Access full benefits plan details**
  - Learning resources
  - Enrollment instructions
  - Policies and plan descriptions

# IT'S ALL ABOUT YOU!

**Get the facts:**

You're a click away from benefits tools and resources.