G & L Newsletter 2020



"George & Lynch will always be the preferred company that provides high-value added services to safely build, operate and maintain infrastructure that supports the continued quality of life in our communities."

Chris' Corner

At the recent Safety Meeting, I spent the early part of my presentation announcing awards and other recognition the company received over the past year. While those awards are presented in the name of George & Lynch, we know it is the people working on and at the project that are responsible for our success. We had several outstanding projects over the past year. I'm glad I had the opportunity to mention at least a few. There is at least one more that deserves recognition. It will not be recognized specifically as a paving project so I am doing that here. That project is Taxiway D at the Delaware Coastal Airport in Georgetown for Sussex County, Delaware.

For the past dozen years; we've paved runways, taxiways, intersections, ramps, and tie-down areas at various regional airports and Dover Air Force Base. Each one had its own challenges meeting stringent specifications for hot mix materials quality, compaction, spot elevations, and slopes. We've performed under the inspection of various engineers, but one has been involved with several projects. Delta Airport Consultants sets high expectations and their scrutiny doesn't waiver. I'm not criticizing them, though we haven't always been in agreement. In hindsight, I have to say they've made us improve our processes and perform better. The result for this project is the best quality airport project to-date, with the highest accuracy considering all measured criteria.

Obviously, the paving crew deserves credit for the final surface. Everyone that prepared

the sub grade, sub base and performed work related to the project is responsible for a successful project. Alfonso Cintron, Don Stratman, Brandon Cintron, George Cahall, Brian Gsell, Richard Haass, Mike Lyon, Larry Zuchelli, Tod Connolly & Chuck Krupka along with their crews all did an excellent job!

The completion of this job coincided with acquisition of our new drone. We can use it for topographical survey and volume calculations. In this case, we used it for some project photos that will be used for award submissions. One more thing. We used a laser system on a rented grader to provide high accuracy while preparing he sub grade and sub base. Seeing the value for future work, we purchased the system and recently installed it on one of our dozers to supplement GPS systems already in use. In appreciation,

Chris Baker

Years of Service Awards at the 38th Annual Safety Meeting

On February 28th, the 38th Annual Safety Meeting was held at the Modern Maturity Center in Dover. 200+ employees along with vendors representing our health benefits and 401(k) provider were treated to a fantastic breakfast and several guest speakers. Along with Ken's safety talk, Scott from Travelers provided an excellent presentation on distracted driving which ended with a short video that captivated everyone's attention. Along with him, we had an HR professional provide a fantastic presentation concerning Workplace Harassment. Len also provided an EEO update followed by a "State of the Company" presentation from Chris. The meeting finished up with the Years of Service Awards and the vendor prizes. Thanks to all that attended and we look forward to seeing you on the LAST FRIDAY in FEBRUARY in 2021 (February

26th, 2021)





Employees enjoying the 38th Annual Safety Meeting Breakfast



5 Year Safety Awards



10 Year Safety Awards



15 Year Safety Awards



20 Year Safety Awards



30 Year Safety Awards



35 Year Safety Awards



40 Year Safety Awards



EDUCATIONAL GROWTH AVAILABLE FOR ALL EMPLOYEES

One of George & Lynch's most important assets are the people that work here. We would like to invest in you and help you succeed in your career path. Education is always a good way to grow and as an ABC member we have access to courses that could help. I have some examples of the courses offered below and if you are interested please let us know.

- Project Cost Management
- Project Quality Management
- Managing Real World Projects
- The Effective Manager's Toolbox
- Performance Management

Christy Funk

KEN HEINSCH - SAFETY

During the Annual Safety Meeting I discussed Sprains and Strains. I would like to take this opportunity to discuss the subject again.

Sprains and Strains make up one third of all injuries in construction. A sprain is where damage occurs to a ligament. A ligament is the tough, fibrous tissue that connects bones to other bones. A sprain injury involves the stretching or tearing of this tissue. Ankle, knee, and wrist sprains make up the majority of this type of injury. A strain is an injury to either a muscle or tendon. This tissue connects muscles to bones. Back injuries are the most prevalent strain injury. These injuries can be painful, disabling, and can be accompanied by long recovery periods. Maintaining good physical fitness is essential in avoiding sprains and strains.

To minimize sprains, observe the following practices:

- 1. Practice safety measures to prevent falls. For example, keep your work area free of debris and clutter.
- 2. Avoid strenuous activity when overly tired or in pain.
- 3. Use extra caution when working on slippery surfaces.
- 4. Use extra caution when walking across uneven surfaces. These areas could easily cause one to twist a knee or ankle. Uneven surfaces are quite common in our work areas.

- 5. When steeping off or over objects, always look where you are placing your feet. Do not step blindly.
- 6. Check for holes or objects where you intend to step before putting you full body weight on your feet.

To minimize the possibility of incurring strains please observe the following practices:

- 1. Whenever possible, arrange your work areas to minimize heavy lifting by yourself and others.
- 2. Before any lifting activity (including hand digging etc.) always "warm up" by doing some moderate stretching exercises. I don't mean a regimen of calisthenics, but stretch yours muscles out.
- 3. Always plan your lift. Check out the object to see if it is too heavy or awkward. Get help if you know the object is heavy, bulky, or unbalanced. Use mechanical or equipment means to lift whenever possible.
- 4. If you must lift an object, use your power zone. This is the area from mid-thigh to mid-chest. Use extreme caution when lifting objects over 50 pounds.
- 5. Push or pull objects whenever possible. Pushing is always preferable
- 6. Carry objects close to your body.
- 7. Always lift with your legs and not your back.

These are just a few examples of ways to minimize these types of injuries, but as always, practice good common sense.

Be safe out there!

Ken

HR Corner - Katie Murphy

Hi Everyone,

Please take a few moments to read through the materials in the HR Corner.

If anyone has any questions. I'm available to you:
Katie Murphy, HR Manager
(office) 302-342-3136
(cell) 302-218-4351- (also by text)
(e-mail) kmurphy@geolyn.com

Thank you! Let's make this benefit year a successful and HEALTHY one!!! Katie



KEEP YOUR COMMUNITY HEALTHY

Public health is a public responsibility!

Take a look at these helpful tips for adoptable ways to prevent the spread of disease among yourself and others!

DID YOU KNOW?

You can make a significant impact on the overall health status of your community!

By taking preventative measures to protect yourself from diseases, you will be protecting others as well!



Clean Your Hands Often

Sing the Happy Birthday song in your head for 20 seconds – that's all the time it takes to effectively wash your hands! Lather the soap covering the entire surface of your hands and wrists and thoroughly rine. If there is no soap available, an alcohol-based hand sanitizer is recommended. Avoid touching eyes, nose, and mouth if your hands are not washed.

Clean Common Areas Frequently

Make sure there are plenty of ready to use cleaning supplies nearby all common area surfaces. It's a team effort to keep a workspace clean. Everyone can contribute to sanitizing the area by wiping down equipment regularly and creating a routine of cleanliness!

Stay Home and Stop Spreading

This one's easy: don't come to work if you are sick and contagious! Monitor your symptoms while at home, and work with a healthcare professional to receive treatment. Continue to take preventative action at home, such as washing your hands and disinfecting common surfaces, in order to prevent the spread of germs from reaching your family.

Resources: Centers for Disease Control and Prevention



Do you know the average wait time in the ER for Non-emergent issues?







Nurseline 888-258-3428	Telemedicine Amwell/Dr on Demand	Your Doctor	Urgent Care	Emergency Room		
No Cost	\$5 Co-Pay	\$10 Co-Pay	\$50 Co-Pay	\$150 Co-Pay		
When you're uncertain where to go for care, start here. Call anytime to speak with a registered nurse.	Access a virtual/online doctor visits or telemedicine.	Your doctor knows your medical history, so if your condition is urgent, seeing her/him is usually best.	Urgent care is when your health concern requires treatment but isn't life threatening. It is generally a shorter wait than an emergency room.	The ER is for emergencie if your condition isn't life threatening, you may wan to visit an urgent care center, your doctor's offic or utilize a telemedicine visit.		
Examples: Anytime you're not sure where to go for care 3 a.m. fever Weekend sprained ankle Sore throat on vacation	Examples: Bronchitis Cold/Flu Diarrhea Earaches Fever Migraine headaches Pink eye Rash Sinus problems	Examples: Annual physicals Routine medical care Immunizations Ear aches / Sore throat Fever Management of chronic medical conditions Back pain Laboratory testing	Examples: More serious virus Sprains, strains and minor fractures Mild vomiting or diarrhea Ear infection Minor burns Minor cuts that may need stitches	Examples: Difficulty breathing Difficulty speaking or walking Pain in the chest Fainting or dizzy and weak Sudden or severe pair Changes in vision		

PLEASE NOTE: If you or someone you know seems to be having a heart attack, stroke, difficulty breathing or other perceived life threatening event, call 911 or go directly to an emergency room.

2020 Preventive Schedule

Effective 1/1/2020

PLAN YOUR CARE: KNOW WHAT YOU NEED AND WHEN TO GET IT

Preventive or routine care helps us stay well or finds problems early, when they are easier to treat. The preventive guidelines on this schedule depend on your age, gender, health and family history. As a part of your health plan, you may be eligible to receive some of these preventive benefits with little to no cost sharing when using in-network providers. Make sure you know what is covered by your health plan and any requirements before you receive any of these services.

Some services and their frequency may depend on your doctor's advice. That's why it's important to talk with your doctor about the services that are right for you. CHIP Members may have additional preventive services and coverage. Please check the CHIP member booklet for further details of CHIP coverage of preventive services.

QUESTIONS?







eral Health Care							
Routine Checkup* (This exam is not the work- or school-related physical)	Ages 19 to 49: Every 1 to 2 years Ages 50 and older: Once a year						
Depression Screening	Once a year						
Pelvic, Breast Exam	Once a year						
enings/Procedures							
Abdominal Aortic Aneurysm Screening	Ages 65 to 75 who have ever smoked: One-time screening						
Ambulatory Blood Pressure Monitoring	To confirm new diagnosis of high blood pressure before starting treatment						
Breast Cancer Genetic (BRCA) Screening (Requires prior authorization)	Those meeting specific high-risk criteria: One-time genetic assessment for breast an ovarian cancer risk						
Cholesterol (Lipid) Screening	Ages 20 and older: Once every 5 years High-risk: More often						
Colon Cancer Screening (Including Colonoscopy)	Ages 50 and older: Every 1 to 10 years, depending on screening test High-risk: Earlier or more frequently						
Certain Colonoscopy Preps With Prescription	Ages 50 and older: Once every 10 years High-risk: Earlier or more frequently						
Diabetes Screening	High-risk: Ages 40 and older, once every 3 years						
Hepatitis B Screening	High-risk						
Hepatitis C Screening	High-risk						
Latent Tuberculosis Screening	High-risk						
Lung Cancer Screening (Requires prior authorization and use of	Ages 55 to 80 with 30-pack per year history: Once a year for current smokers, or once year if currently smoking or quit within past 15 years						

* Routine checkup could include health history; physical; height, weight and blood pressure measures; body mass index (BAH) assessment; counseling for obesity, fall prevention, skin cancer and safety; depression screening: alcohol and drug abuse, and tobacco use assessment; age-appropriate guidance, and intimate partner violence screening and counseling for reproductive age women.



Adults: Ages 19+

creer	nings/Procedures	
*	Mammogram	Ages 40 and older: Once a year including 3-D; baseline mammogram can be performed on women ages 35 to 39 based on Delaware state mandate
*	Osteoporosis (Bone Mineral Density) Screening	Age 65 and older: once every 2 years. Younger if at risk as recommended by physician
*	Pap Test	 Ages 21 to 65: Every 3 years, or annually, per doctor's advice Ages 30 to 65: Every 5 years if HPV or combined Pap and HPV are negative Ages 65 and older: Per doctor's advice
İ	Sexually Transmitted Disease (STD) Screenings and Counseling (Chlamydia, Gonorrhea, HIV and Syphilis)	Sexually active males and females
nmu	nizations**	
•	Chicken Pox (Varicella)	Adults with no history of chicken pox: One 2-dose series
•	Diphtheria, Tetanus (Td/Tdap)	One-time Tdap Td booster every 10 years
•	Flu (Influenza)	Every year (Must get at your PCP's office or designated pharmacy vaccination provider call Member Service to verify that your vaccination provider is in the Highmark network)
•	Haemophilus Influenzae Type B (Hib)	For adults with certain medical conditions to prevent meningitis, pneumonia and other serious infections; this vaccine does not provide protection against the flu and does not replace the annual flu vaccine
•	Hepatitis A	At-risk or per doctor's advice: One 2 or 3 dose series
•	Hepatitis B	At-risk or per doctor's advice: One 2 or 3 dose series
•	Human Papillomavirus (HPV)	To age 26: One 3-dose series
•	Measles, Mumps, Rubella (MMR)	One or two doses
*	Meningitis*	At-risk or per doctor's advice
•	Pneumonia	High-risk or ages 65 and older: One or two doses, per lifetime
•	Shingles	Zostavax - Ages 60 and older: One dose Shingrix - Ages 50 and older: Two doses
revei	ntive Drug Measures That Require	a Doctor's Prescription
*	Aspirin	Ages 50 to 59 to reduce the risk of stroke and heart attack Pregnant women at risk for preeclampsia
*	Folic Acid	Women planning or capable of pregnancy: Daily supplement containing .4 to .8 mg of folic acid
*	Raloxifene Tamoxifen	At-risk for breast cancer, without a cancer diagnosis, ages 35 and older
•	Tobacco Cessation (Counseling and medication)	Adults who use to bacco products

^{*} Meningococcal B vaccine per doctor's advice.

^{**} Must get at your PCP's office or designated pharmacy vaccination provider. Call Member Service to verify that your vaccination provider is in the Highmark network.

Preventive Drug Measures That Require a Doctor's Prescription



Low to Moderate Dose Select Generic Statin Drugs For Prevention of Cardiovascular Disease (CVD) Ages 40 to 75 years with 1 or more CVD risk factors (such as dyslipidemia, diabetes, hypertension, or smoking) and have calculated 10-year risk of a cardiovascular event of 10% or greater.

Preventive Care for Pregnant Women



Screenings and Procedures

- Gestational diabetes screening
- Hepatitis B screening and immunization, if needed
- · HIV screening
- Syphilis screening
- · Smoking cessation counseling
- Depression screening during pregnancy and postpartum
- Depression prevention counseling during pregnancy and postpartum
- Rh typing at first visit
- Rh antibody testing for Rh-negative women
- · Tdap with every pregnancy
- Urine culture and sensitivity at first visit
- Alcohol misuse screening and counseling

Prevention of Obesity. Heart Disease and Diabetes



Adults With BMI 25 to 29.9 (Overweight) and 30 to 39.9 (Obese) Are Eligible For:

- Additional annual preventive office visits specifically for obesity and blood pressure measurement
- Additional nutritional counseling visits specifically for obesity
- · Recommended lab tests:
- ALI
- AST
- Hemoglobin A1c or fasting glucose
- Cholesterol screening

Adult Diabetes Prevention Program (DPP)



Applies to Adults

- Without a diagnosis of Diabetes (does not include a history of Gestational Diabetes) and
- Overweight or obese (determined by BMI) and
- Fasting Blood Glucose of 100-125 mg/ dl or HGBA1c of 5.7 to 6.4 percent or Impaired Glucose Tolerance Test of 140-199mg/dl.

Enrollment in certain select CDC recognized lifestyle change DPP programs for weight loss

2020 Preventive Schedule

PLAN YOUR CHILD'S CARE: KNOW WHAT YOUR CHILD NEEDS AND WHEN TO GET IT

Preventive or routine care helps your child stay well or finds problems early, when they are easier to treat. Most of these services may not have cost sharing if you use the plan's in-network providers. Make sure you know what is covered by your health plan and any requirements before you schedule any services for your child.

It's important to talk with your child's doctor. The frequency of services, and schedule of screenings and immunizations depends on what the doctor thinks is right for your child.

QUESTIONS?







** Children: Birth to 30 Months1

General Health Care	Birth	1M	2M	4M	6M	9M	12M	15M	18M	24M	30M
Routine Checkup* (This exam is not the preschool- or day care- related physical.)			•	•				•	•		•
Hearing Screening											
Screenings	77.		10.00	1							100
Autism Screening											
Critical Congenital Heart Disease (CCHD) Screening With Pulse Oximetry	•										
Developmental Screening											
Hematocrit or Hemoglobin Screening											
Lead Screening											
Newborn Blood Screening and Bilirubin											
Immunizations			100								
Chicken Pox							Do	se 1			
Diphtheria, Tetanus, Pertussis (DTaP)			Dose 1	Dose 2	Dose 3			Di	ose 4		
Flu (Influenza)**						Ages 6 m	onths to 3	0 month	s: 1 or 2 dos	ses annua	lly
Haemophilus Influenzae Type B (Hib)			Dose 1	Dose 2	Dose 3		Do	se 4			
Hepatitis A							Dose 1		Dose 2		
Hepatitis B	Dose 1	D	ose 2				Dose 3	1	l.		
Measles, Mumps, Rubella (MMR)							Do	se 1			
Pneumonia			Dose 1	Dose 2	Dose 3		Do	se4			
Polio (IPV)			Dose 1	Dose 2	Age	es 6 mon	ths to 18 n	nonths: D	ose 3		
Rotavirus			Dose 1	Dose 2	Dose 3		Î	1	1		

^{*}Routine checkup could include height and weight measures, behavioral and developmental assessment, and age-appropriate guidance. Additional: Instrument vision screening to assess risk for ages 1 and 2 years. ** Must get at your PCP's office or designated pharmacy vaccination provider. Call Member Service to verify that your vaccination provider is in the Highmark network.

Thildren: 3 Years to 18 Years1

General Health Care		4Y	5Y	6Y	7 Y			10Y	11Y	12Y	15Y	18Y
Routine Checkup* (This exam is not the preschool- or day care-related physical)	•	•	•	•	٠	•	•	•	Once a year from ages 11 to 18			to 18
Ambulatory Blood Pressure Monitoring**												•
Depression Screening									Once a	year fron	ages 11	to 18
Hearing Screening***												
Visual Screening***												
Screenings		81										
Hematocrit or Hemoglobin Screening			Annua	lly for fem	nales duri	ng adole	scence ar	nd when i	indicated			
Lead Screening	When	indicated	(Please a	lso refer t	o your st	ate-speci	fic recom	mendatio	ons)			
Cholesterol (Lipid) Screening						Once between ages 9-11 and ages 17-21						
Immunizations			1/2		100	W.	·					
Chicken Pox		Dose 2								vaccina	reviously ited: Dose (s apart)	
Diphtheria, Tetanus, Pertussis (DTaP)		Dose 5			15				One dose Tdap			
Flu (Influenza)****	Ages 3	to 18: 1 c	or 2 doses	annually							61	
Human Papillomavirus (HPV)							Provides long-term protection against cervical and other cancers. 2 doses when started ages 9-14. 3 doses all other ages.					
Measles, Mumps, Rubella (MMR)		Dose 2										
Meningitis****									Dose 1	N.	Age 16 time b	
Pneumonia	Per do	tor's adv	ice			1						
Polio (IPV)		Dose 4										
Care for Patients With Ris	k Fact	ors			100		1		100	A.		Mari
BRCA Mutation Screening (Requires prior authorization)					Per do	tor's adv	rice					
Cholesterol Screening	Screen	ing will b	e done ba	sed on th	e child's f	amily hist	tory and r	isk factor	5			
Fluoride Varnish (Must use primary care doctor)	Ages 5	and your	iger									
Hepatitis B Screening									Per do	ctor's advi	ce	
Hepatitis C Screening											High-ri	isk
Latent Tuberculosis Screening												High- risk
Sexually Transmitted Disease (STD) Screenings and Counseling (Chlamydia, Gonorrhea, HIV and Syphilis)									• HIV r	Il sexually outine ch		dividual
Tuberculin Test	Per do	tor's adv	ice									

*Routine chedsup could include height and weight measures, behavioral and developmental assessment, and age-appropriate guidance; alcohol and drug abuse, and tobacco use assessment. **To confirm new diagnosis of high blood pressure before starting treatment. **Thearing screening once between ages 11-14, 15-17 and 18-21. Vision screening covered when performed in doctor's office by having the child read letters of various sizes on a Snellen chart. Includes instrument vision screening for ages 3, 4 and 5 years. A comprehensive vision exam is performed by an ophthalmologist or optometrist and requires a vision benefit. ****Meart a your PCP's office or designated pharmacy vaccination provider, Call Member Service to verify that your vaccination provider is in the Highmark network. ******Meningococcal B vaccine per doctor's advice.

Children: 6 Months to 18 Years Oral Fluoride For ages 6 months to 16 years whose primary water source is deficient in fluoride Prevention of Obesity and Heart Disease Additional annual preventive office visits specifically for obesity Children With a BMI in the 85th to 94th Percentile (Overweight) and the 95th to 98th Percentile · Additional nutritional counseling visits specifically for obesity (Obese) Are Eligible For: Recommended lab tests: - Alanine aminotransferase (ALT) - Aspartate aminotransferase (AST) - Hemoglobin A1c or fasting glucose (FBS) - Cholesterol screening Adult Diabetes Prevention Program (DPP) Age 18 Enrollment in certain select CDC recognized lifestyle change DPP programs for Applies to Adults weight loss. Without a diagnosis of Diabetes (does not include a history of Gestational Diabetes) and · Overweight or obese (determined by BMI) and Fasting Blood Glucose of 100-125 mg/

♠ Women's Health Preventive Schedule

dl or HGBA1c of 5.7 to 6.4 percent or Impaired Glucose Tolerance Test of

140-199mg/dl.

DEL VICES						
Well-Woman Visits (Includes: preconception and first prenatal visit, urinary incontinence screening)	Up to 4 visits each year for age and developmentally appropriate preventive services					
Contraception (Birth Control) Methods and Discussion*	All women planning or capable of pregnancy					
Screenings/Procedures						
Diabetes Screening	High-risk: At the first prenatal visit All women between 24 and 28 weeks pregnant Postpartum women without Diabetes but with a history of gestational diabetes					
HIV Screening and Discussion	All sexually active women: Once a year					
Human Papillomavirus (HPV) Screening Testing	Beginning at age 30: Every 3 years					
Domestic and Intimate Partner Violence Screening and Counseling	Once a year					
Breast-feeding (Lactation) Support and Counseling, and Costs for Equipment	During pregnancy and/or after delivery (postpartum)					
Sexually Transmitted Infections (STI) Discussion	All sexually active women: Once a year					

^{*}FDA-approved contraceptive methods may include sterilization and procedures as prescribed. One form of contraception in each of the 18 FDA-approved methods is covered without cost sharing. If the doctor recommends a clinical service or FDA-approved item based on medical necessity, there will be no cost sharing.

Information About the Affordable Care Act (ACA)

This schedule is a reference tool for planning your family's preventive care, and lists items and services required under the Affordable Care Act (ACA), as amended. It is reviewed and updated periodically based on the advice of the U.S. Preventive Services Task Force, laws and regulations, and updates to clinical guidelines established by national medical organizations. Accordingly, the content of this schedule is subject to change. Your specific needs for preventive services may vary according to your personal risk factors. Your doctor is always your best resource for determining if you're at increased risk for a condition. Some services may require prior authorization. If you have questions about this schedule, prior authorizations or your benefit coverage, please call the Member Service number on the back of your member ID card.

Highmark Blue Cross Blue Shield Delaware is an independent licensee of the Blue Cross and Blue Shield Association.

Discrimination is Against the Law

The Claims Administrator/Insurer complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Claims Administrator/Insurer does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. The Claims Administrator/Insurer:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
- Qualified interpreters
- Information written in other languages

If you need these services, contact the Civil Rights Coordinator.

If you believe that the Claims Administrator/Insurer has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Civil Rights Coordinator, P.O. Box 22492, Pittsburgh, PA 15222, Phone: 1-866-286-8295, TTY: 711, Fax: 412-544-2475, email: CivilRightsCoordinator@highmarkhealth.org, You can file a grievance in person or by mail, fax, or email. If you need help filling a grievance, the Civil Rights Coordinator is available to help you, You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call the number on the back of your ID card (TTY: 711).

¹Information About Children's Health Insurance Program (CHIP)

Because the Children's Health Insurance Program (CHIP) is a government-sponsored program and not subject to ACA, certain preventive benefits may not apply to CHIP members and/or may be subject to copayments.

The ACA authorizes coverage for certain additional preventive care services. These services do not apply to "grand-fathered" plans. These plans were established before March 23, 2010, and have not changed their benefit structure. If your health coverage is a grandfathered plan, you would have received notice of this in your benefit materials.

ATENCIÓN: SI usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al número en la parte posterior de su tarieta de identificación (TTY: 711).

请注意:如果您说中文,可向您提供免费语言协助服务。 请拨打您的身份证背面的号码(TTY:711)。

CHÚ Ý: Nếu quý vị nói tiếng Việt, chúng tôi cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Xin gọi số điện thoại ở mặt sau thể ID của quý vị (TTY: 711).

알림: 한국어를 사용하시는 분들을 위해 무료 통역이 제공됩니다. ID 카드 뒷면에 있는 번호로 전화하십시오 (TTY: 711).

ATENSYON: Kung nagsasalita ka ng Tagalog, may makukuha kang mga libreng serbisyong tulong sa wika. Tawagan ang numero sa likod ng iyong ID card (TTY: 711).

ВНИМАНИЕ: Если вы говорите по-русски, вы можете воспользоваться бесплатными услугами языковой поддержки. Позвоните по номеру, указанному на обороте вашей идентификационной карты (номер для текст-телефонных устройств (ТТУ: 711).

تنبيه: إذا كنت تتحدث اللغة العربية، فهناك خدمات المعاونة في اللغة المجانية متاحة لك. اتصل بالرقم الموجود خلف بطاقة هويتك (جهائز الاتصال لذوي صعوبات السع واللطق: 211).

Kominike: Si se Kreyòl Ayisyen ou pale, gen sèvis entèprèt, gratis-ticheri, ki la pou ede w. Rele nan nimewo ki nan do kat idantite w la (TTY: 711).

ATTENTION: Si vous parlez français, les services d'assistance linguistique, gratuitement, sont à votre disposition. Appelez le numéro au dos de votre carte d'identité (TTY: 711).

UWAGA: Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń pod numer podany na odwrocie karty ubezpleczenia zdrowotnego (TTY: 711).

ATENÇÃO: Se a sua língua é o português, temos atendimento gratuito para você no seu idioma. Lígue para o número no verso da sua identidade (TTY: 711).

ATTENZIONE: se parla italiano, per lei sono disponibili servizi di assistenza linguistica a titolo gratuito. Contatti il numero riportato sul retro della sua carta d'identità (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen unsere fremdsprachliche Unterstützung kostenlos zur Verfügung. Rufen Sie dazu die auf der Rückselte Ihres Versicherungsausweises (TTY: 711) aufgeführte Nummer an.

注: 日本語が母国語の方は言語アシスタンス・サービスを無料でご利用 いただけます。ID カードの裏に明記されている番号に電話をおかけくだ さい (TTY: 711)。

توجه: اگر شما به زیان فارسی صحبت می کنید، خدمات کمک زیان، به صورت رایگان، در دسترس شماست. با شماره واقع در پشت کارت شناسایی خود (TTY: 711) تماس بگیرید.

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STOP THE SPREAD OF GERMS



THE DESK OF RICK STOOPS

Operations Update

It has been a busy winter season for the crews. With the mild winter we have been able to work most projects including night work and some paving! We have been extremely busy in Salisbury, Ocean City, Dewey and all over Sussex and Kent Counties on our labor & equipment contracts.

Winter maintenance and repairs on the milling and paving equipment are almost complete and the crews have a busy start to the season with milling and paving locations in Ocean City for MDSHA and for DelDOT on the Forgotten Mile and continuing through Dewey.

The concrete/structure crews will continue working on the pump station on Fitzwater Street in Salisbury, with additional concrete work at DAFB, a deck pour near Crisfield, construction of hopper racks for Deldot maintenance yards, installation of a box culvert in Newark and various other support work for other G&L projects.

The pipe and mechanical crews are working on various county locations, Rt. 13 drainage and Main Street in Salisbury and also some private development work. Chuckie and Danny will remain busy with jack and bores and drilling for the County contracts with some other drills for Ocean City and the Town of Laurel.

The site crews are working on various Deldot entrances, demo and prep of concrete areas at DAFB, a new roundabout in Salisbury along with Main Street and also various private work along with supporting other G&L projects. The equipment shops will continue to remain busy keeping equipment, trucks and vehicles running and Shallie will be dispatching dozens and dozens of dump trucks starting in March and throughout the construction season. Our estimators are constantly bidding work and our project managers and

office staff continue to support the field crews.

Continue to work smart and safely and let's have another great year!

GEORGE & LYNCH'S POLAR BEAR PLUNGE TEAM

For the third year, a great group of employees, family and friends braved the cold water temperature at Rehoboth Beach and took the "Plunge" for Special Olympics of Delaware! Our team raised \$923 this year! Who wants to join us next year??



CHRIS BAKER - IN APPRECIATION

In the last article, I highlighted the craftsmanship of Richard Sterling in a fairly unique position. This issue, I am recognizing the sometimes unsung or underappreciated role of our CDL drivers. They come in all shapes and sizes – from 6-wheel flatbeds, to 18-wheel lowboy trailer-tractor combinations. Don't forget vacuum trucks, tack trucks, service trucks, stone trailer-tractor combos, asphalt tanker-tractor combo, fuel truck, grease trucks, mechanics trucks, Gradall excavators, and of course tri-axle dump trucks. They may be the most regulated group of employees we have and that's getting worse instead of better. Driving a large truck on public highways with distracted drivers to all kinds of destinations with often critical schedules is a lot of responsibility. This is definitely a situation where 'staying in your lane' is a good thing. Some of these folks have been driving professionally for decades with literally no incidents. Some have been driving for decades for G&L alone. Many have driven units of an aging fleet for some time. We started re-investing in NEW dump trucks last year. That continues this year along with a tack truck, vacuum truck, mechanics truck and newer tractors for our asphalt tanker and a stone trailer. These purchases will provide safer transport for our drivers and more reliable service to the jobs.

All those truck and trailer combinations mentioned earlier require a variety of licenses and endorsements. We are required to verify everything is compliant with laws and regulations. We track something like 56 commercial driver's licenses, too many to name here. We also need to match those skills to individual assignments and work schedules. Those tasks are ably managed by Lisa Hearin and Shallie Sudler. To ALL CDL drivers, and those that keep them on the road, THANK YOU for 'staying in your lane' and for your contribution to G&L's operational success!

Keep on truckin', Chris Baker