



centurion™



YOUR
EMPLOYEE
BENEFITS

Benefit Plans Effective January 1–December 31, 2022

BENEFITS BUILT FOR YOU

At Centurion we care about you. That's why we offer benefits that support your physical, emotional, and financial health.

Understanding your benefits and knowing how to use them is just as important as having access to them. Review this guide to learn about the benefits available to you for the 2022 plan year (January 1, 2022, through December 31, 2022). Then, choose the options that are best for you and your family.

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WHO IS ELIGIBLE

If you are scheduled to work at least 30 hours per week, you are eligible for most benefits on the first day of the month following or coinciding with your date of hire.

Eligibility for short- and long-term disability begins on the first day of the month following six months of continuous employment. Eligibility to participate in the 401(k) retirement savings plan begins the Monday after receiving your first paycheck.

Many of the plans allow you to cover your eligible dependents, which include:

- ▶ Your legal spouse (opposite and same-sex).
- ▶ Your children to age 26, regardless of student, marital, or tax-dependent status (including a stepchild, legally-adopted child, a child placed with you for adoption, or a child for whom you are the legal guardian).
- ▶ Your dependent children of any age who are physically or mentally unable to care for themselves.

WHO PAYS

Some benefits are 100% paid by Centurion, while others require that you contribute to the cost of the benefit.

Benefit	You Pay	Centurion Pays
Medical Insurance	X	X
Dental Insurance	X	X
Vision Insurance	X	
Health Savings Account	X	X
Flexible Spending Accounts	X	
Basic Life and AD&D Insurance		X
Supplemental Life and AD&D Insurance	X	
Short-Term Disability Insurance		X
Voluntary Long-Term Disability Insurance	X	
Accident, Critical Illness, and Hospital Indemnity Insurance	X	
401(k) Retirement Savings Plan	X	X
Commuter Benefits	X	
Pet Insurance	X	
Employee Assistance Program		X

WHEN TO ENROLL

You can only sign up for benefits or change your benefits at the following times.

- ▶ **Within 31 days of joining Centurion as a new employee:** Complete the new hire paperwork.
- ▶ **During the annual benefits enrollment period:** See page 4.
- ▶ **Within 31 days of a qualifying life event:** Contact the Benefits Support Center.

The choices you make at this time will remain in place through **December 31, 2022**, unless you experience a qualifying life event as described on page 5. If you do not sign up for benefits during your initial eligibility period, you will not be able to elect coverage until the next open enrollment period.

LEARN ABOUT YOUR BENEFITS

WEBSITE AND BENEFITS SUPPORT CENTER

Centurion provides a website and Benefits Support Center to help you find answers to your benefits questions:

- ▶ **Benefits website:** Visit employeeconnects.com/centurionnewemployees.
- ▶ **Benefits Support Center:** Call 833-782-7404 Monday–Friday from 9 a.m. to 5 p.m. EST to talk with a benefits counselor or schedule an appointment with a counselor through the benefits website.

CENTURION MOBILE APP

Connect with Centurion anywhere, anytime using our new mobile app. You do not need to be enrolled in a Centurion benefit plan in order to use the app.

This app will provide you with easy access to benefits information:

- ▶ Personalized communications and education
- ▶ Benefit plan summaries and ID cards
- ▶ Digital health coaching
- ▶ LiveHealth Online telemedicine
- ▶ Easy search functionality for in-network providers and facilities
- ▶ Direct link to the 401(k) retirement savings plan

Visit employeeconnects.com/centurionnewemployees/your-centurion to learn more.

HOW TO ENROLL

There are three ways to enroll in your benefits.

		
<p>Call the Benefits Support Center at 833-782-7404.</p> <p>Benefits counselors are ready to assist you. Monday–Friday from 9 a.m. to 5 p.m. EST.</p>	<p>Visit employeeconnects.com/centurionnewemployees to schedule an appointment with a benefits counselor.</p>	<p>Self-enroll by registering as a new user at employeenavigator.com/benefits/Account/Register.</p> <p>Your company identifier is YourCenturion.</p>

Note: If you are having trouble logging in, please contact the Benefits Support Center by calling 833-782-7404. If you have multiple last names or a hyphenated last name, you may need to contact the Benefits Department to obtain your username.



CHANGING YOUR BENEFITS

Due to IRS regulations, once you have made your elections for 2022, you cannot change your benefits until the next annual open enrollment period.

The only exception is if you experience a qualifying life event. Election changes must be consistent with your life event.

Qualifying life events include, but are not limited to:

- ▶ Marriage, divorce, or legal separation.
- ▶ Birth or adoption of an eligible child.
- ▶ Death of your spouse or covered child.
- ▶ Change in your spouse's work status that affects his or her benefits.
- ▶ Change in your child's eligibility for benefits.
- ▶ Qualified Medical Child Support Order.




To request a benefits change, notify the Benefits Department within 31 days of the qualifying life event. Change requests submitted after 31 days cannot be accepted. You may need to provide proof of the event, such as a marriage license or birth certificate.

MEDICAL INSURANCE


Centurion offers three medical plan options through Anthem BlueCross BlueShield (BCBS).

Before you enroll in medical coverage, take some time to fully understand how each plan works. Refer to page 7 for an overview of the plan benefits.


BEFORE YOU CHOOSE A PLAN, CONSIDER THIS:




Are you able to budget for your deductible by setting aside pre-tax dollars from your paycheck in a health savings account (HSA)?
Consider the KeyCare HDHP.



Do you prefer to pay more for medical insurance out of your paycheck, but less when you need care?
Consider the KeyCare Standard PPO or KeyCare Choice PPO.



What planned medical services do you expect to need in the upcoming year?
Consider maintenance medication costs and planned elective surgeries.



Do you or any of your covered family members take any prescription medications on a regular basis?
Consider the KeyCare Standard PPO or KeyCare Choice PPO.

MEDICAL COSTS

Listed below are the per-pay-period deductions (26 pay periods per year) costs for medical insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis.

LEVEL OF COVERAGE	KeyCare HDHP	KeyCare Standard PPO	KeyCare Choice PPO
Employee Only	\$26.56	\$77.60	\$186.46
Employee + Spouse	\$121.71	\$210.75	\$459.44
Employee + Child(ren)	\$73.64	\$160.93	\$325.68
Employee + Family	\$184.33	\$306.45	\$629.30

MEDICAL INSURANCE

The table below summarizes the benefits of each medical plan.

The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

Summary of Covered Benefits	KeyCare HDHP		KeyCare Standard PPO		KeyCare Choice PPO	
	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Plan Year Deductible Individual/Family	\$3,000/\$6,000		\$1,500/\$3,000	\$3,000/\$6,000	\$1,500/\$3,000	\$3,000/\$6,000
The amount that Centurion contributes to help you pay for out-of-pocket expenses	Health savings account (HSA) contribution match up to: Individual—\$750 All other tiers—\$1,500		N/A		N/A	
Out-of-Pocket Max (Includes deductible, copays, and coinsurance) Individual/Family	\$4,750/\$9,500	\$4,750/\$9,500	\$5,000/\$10,000	\$10,000/\$20,000	\$4,500/\$9,000	\$9,000/\$18,000
Preventive Care	Plan pays 100%	40% after ded.	Plan pays 100%	50% after ded.	Plan pays 100%	40% after ded.
Physician Services						
Primary Care Physician	20% after ded.	40% after ded.	\$25 copay ¹	50% after ded.	\$20 copay ¹	40% after ded.
Specialist	20% after ded.	40% after ded.	\$40 copay	50% after ded.	\$30 copay	40% after ded.
LiveHealth Online ²	20% after ded.	Not covered	\$15 copay	N/A	\$10 copay	N/A
Urgent Care	20% after ded.	40% after ded.	PCP: \$25 copay Specialist: \$40 copay	50% after ded.	PCP: \$20 copay Specialist: \$30 copay	40% after ded.
Lab/X-Ray						
Diagnostic Lab/X-Ray	20% after ded.	40% after ded.	30% (ded. waived)	50% after ded.	20% (ded. waived)	40% after ded.
High-Tech Services (MRI, CT, PET)	20% after ded.	40% after ded.	30% (ded. waived)	50% after ded.	20% (ded. waived)	40% after ded.
Hospital Services						
Inpatient	20% after ded.	40% after ded.	30% after ded.	50% after ded.	20% after ded.	40% after ded.
Outpatient	20% after ded.	40% after ded.	30% after ded.	50% after ded.	20% after ded.	40% after ded.
Emergency Room	20% after ded.		\$200 copay; waived if admitted		\$150 copay; waived if admitted	
Prescription Drugs	Essential PDL					
Tier 1: Preferred Generic	20%/30% after ded. ³	30% after ded.	\$10/\$20 copay ³	\$20 copay	\$10/\$20 copay ³	\$20 copay
Tier 2: Generic	20%/30% after ded. ³	30% after ded.	30% up to \$50/\$60 ²	30% up to \$60	30% up to \$50/\$60 ²	30% up to \$60
Tier 3: Preferred Brand	20%/30% after ded. ³	30% after ded.	30% up to \$75/\$85 ²	30% up to \$85	30% up to \$75/\$85 ³	30% up to \$85
Tier 4: Non-Preferred Brand and Specialty	20%/30% after ded. ³	Not covered	30% up to \$75/\$85 ³	Not covered	30% up to \$75/\$85 ³	Not covered
Mail Order (Up to a 90-day supply)	20% after ded.	Not covered	2x retail copay	Not covered	2x retail copay	Not covered
Preventive Drugs	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%

(1) Certain providers may be Enhanced Personal Healthcare (EPH) providers which will be a lower copay of \$10.

(2) LiveHealth Online psychology visit copays are \$25 for the KeyCare Standard PPO Plan and \$20 for the KeyCare Choice PPO Plan.

(3) Members will pay the lower amount for their prescriptions when they select a Choice Tier Network pharmacy. For more information visit

MEDICAL INSURANCE

Effective January 1, 2022, members residing in Arizona, Florida, or Georgia will move to new Local Select Networks. Your benefits will stay the same.

WHAT'S CHANGING?

Your local Select Network is based on the state in which you reside.

- ▶ **Arizona:** Blue Alternative
- ▶ **Florida:** NetworkBlue
- ▶ **Georgia:** Blue Open Access POS

These local doctors and hospitals have agreed to a discounted rate. So, when you go to them, those savings will pass on to you. Most local hospitals and providers participate in the local network so you will have several high-quality and cost-effective providers to choose from. When you travel outside of your home state, and therefore out of the Select Network area, you will still have access to the BlueCard PPO network.

All Select Network members will receive new ID cards for 2022. Be sure to use your new card when you seek care.

Please note that the following providers/facilities are not in network:

- ▶ **Arizona:** Mayo Foundation including Mayo Clinic, Mayo Hospital, and Mayo Family Clinics
- ▶ **Georgia:** Quest Diagnostics

To locate an in-network provider, visit [anthem.com/find-care](https://www.anthem.com/find-care), choose Guest, and enter the following information:

- ▶ **What type of care are you searching for?** Select Medical from the drop down list
- ▶ **What state do you want to search?** Select your home state, either Arizona, Florida, or Georgia
- ▶ **What type of plan do you want to search with?** Select Medical (Employer-Sponsored)
- ▶ **Select a plan/network:** Choose the appropriate network based on your state (Arizona: Blue Alternative, Florida: NetworkBlue, Georgia: Blue Open Access POS), then click Continue

KEY TERMS TO KNOW



Copay

A fixed dollar amount you may pay for certain covered services. Typically, your copay is due at the time of service.



Deductible

The amount you must pay each year for certain covered health services before your insurance plan will begin to pay.



Coinsurance

After you meet your deductible, you may pay coinsurance, which is your share of the costs of a covered service.



Out-of-Pocket Max

This includes copays, deductibles, and coinsurance. Once you meet this amount, the plan pays 100% of covered services the rest of the year.

MEDICAL INSURANCE

ANTHEM TOOLS AND RESOURCES

Anthem Member Portal

See your benefits, coverage, and costs in one place with the Anthem member portal. Log into [anthem.com](https://www.anthem.com) to manage spending for your care, understand your claims, keep your health history in one secure place, and more.

ConditionCare

Managing an ongoing health condition isn't easy, and having a little extra assistance can make a big difference. Anthem provides ConditionCare with one-on-one support, tools, and resources to support members.

Conditions include:

- ▶ Asthma (pediatric or adult)
- ▶ Chronic obstructive pulmonary disease (COPD)
- ▶ Coronary Artery disease
- ▶ Diabetes, types 1 and 2 (pediatric or adult)
- ▶ Heart Failure

Anthem may reach out to you or you may call Anthem at 866-960-0812 for more information.

Health Care Cost Estimator

Lab tests, X-rays, and procedures such as back surgeries and knee replacements can vary a lot in price depending on where you go. With the Estimate Your Cost online tool, find out the cost for hundreds of procedures before setting foot in a doctor's office.

Enhanced Personal Healthcare Providers

If you are enrolled in the KeyCare Standard PPO or KeyCare Choice PPO, you will pay less for primary care office visits when you choose an Enhanced Personal Healthcare (EPH) provider. The cost for a primary care visit with an EPH provider is a \$10 copay.

ANTHEM HEALTH GUIDE—NEW!

Anthem Health Guide agents work closely with health care professionals like nurses, health coaches, social workers, and other health care providers to guide you through the health care system to find the right care, at the right time, for the right cost.

Agents can help you:

- ▶ Connect with programs and support covered by your benefits.
- ▶ Stay on top of exams, tests, or preventive screenings by reminding you to make an appointment.
- ▶ Compare costs on health care services, find in-network doctors, and much more.

Call 833-388-1400 to speak with a live health guide agent. You can also visit [anthem.com](https://www.anthem.com) and click on the "Customer Support" tab to chat with an agent.

LARK PREDIABETES PROGRAM

One in three Americans has prediabetes, but most don't know it. To help you address prediabetes and prevent type 2 diabetes, Lark has teamed up with Anthem to offer you digital personalized support **AT NO COST**.

24/7 coaching support includes:

- ▶ A customized program that fits your lifestyle.
- ▶ Convenient access to a coach through the Lark mobile app.
- ▶ Personalized feedback and daily check-ins.
- ▶ Information on prediabetes and how to prevent type 2 diabetes.
- ▶ A free wireless smart scale when you enroll.

Learn if you qualify—take the one-minute quiz at lark.com/anthem.

MEDICAL INSURANCE

In-network preventive care is free for medical plan members.

The cost of your preventive care is covered 100% by the Centurion medical plans. This means you won't have to pay anything out of your pocket.



WHAT IS PREVENTIVE CARE?

Preventive health care is meant to **DETECT** issues at an early stage when treatment is likely to work best and **PREVENT** future health problems.



WHY IS PREVENTIVE CARE IMPORTANT?

It is important that you have a preventive health exam each year—even if you feel healthy and are symptom free—in order to **IDENTIFY FUTURE HEALTH RISKS**.



WHAT'S COVERED?

Covered preventive services vary by age and gender. Talk with your provider to determine which **SCREENINGS, TESTS, AND VACCINES** will be covered and that are right for you.

SAVE MONEY ON YOUR HEALTH CARE



Choose in-network providers and labs.

When you stay in network you'll pay less out of your pocket. Why? Because in-network doctors and facilities contract with the insurance company and agree to charge a lower price for services. When your doctor orders a test, confirm that an in-network lab will be used.



Check your explanation of benefits.

After your appointment, review your explanation of benefits (EOB) and provider bill to confirm you were billed correctly.



Use a Choice Tier Network Pharmacy.

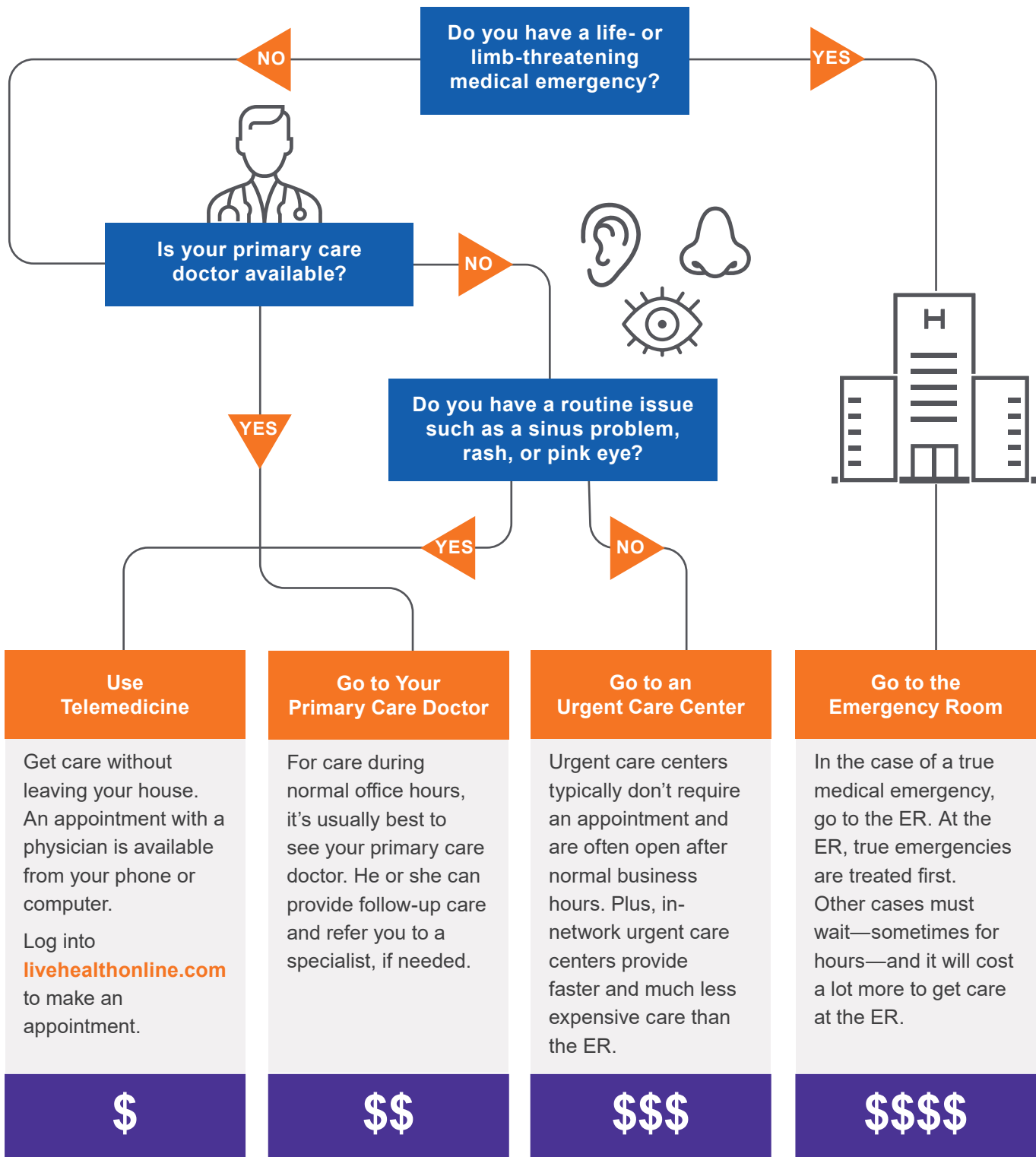
Members will pay a lower amount for their prescriptions when they select a Choice Tier Network pharmacy. For more information visit anthem.com.

Note: Some services are generally not considered preventive if you get them as part of a visit to diagnose, monitor, or treat an illness or injury. Please be aware that you will be responsible for the cost of any non-preventive care services you receive at your preventive care exam based on your plan design. Learn more about preventive care at anthem.com.

MEDICAL INSURANCE

Know where to go for your health care.

Where you go for medical services can make a big difference in how much you pay and how long you wait to see a health care provider. Use the chart below to help you choose where to go for care.





WELLNESS PROGRAMS

Centurion supports you in your total health and wellbeing, and believes that you should take responsibility for personal choices that may impact your health status.

WELLNESS PREMIUM CREDIT—NEW REQUIREMENTS

Earn the Wellness Premium Credit and pay less for your medical insurance by completing an annual wellness exam by November 30 with your physician, registering for the Centurion mobile app, and completing the health risk assessment within the Centurion mobile app. The exam is covered 100% by all Anthem medical plans if performed by an in-network doctor. There is no paperwork required to receive this benefit—Anthem will automatically notify Centurion when you fulfill this requirement and complete your wellness exam. The premium credit will apply to your medical costs for the upcoming plan year. The wellness premium credit will be applied via payroll deductions.

WELLNESS ACTIVITY SUBSIDY

Centurion encourages participation in ongoing fitness and weight management programs designed to promote your overall health and wellbeing. If you participate in a fitness-related facility or weight management program, you may qualify for our Wellness Activity Subsidy. The Wellness Activity Subsidy is available for benefit-eligible employees working at least 30+ hours per week and will help cover 50% of the cost (up to \$200) of your fitness or weight management program per year.

To qualify, you must have participated in a program to improve your overall health and have been in an active full-time status for at least three consecutive months. Deadline for submission is June 30 of each year. To find more information, please go to the Centurion Portal and click on HR Benefits.

DISEASE MANAGEMENT

Anthem offers disease management programs to help members manage chronic conditions. If you are enrolled in an Anthem medical plan, an Anthem representative may contact you to help you manage your chronic condition. Their goal is to help you improve your health. This service is confidential and no personal information is shared with Centurion. You can decline participation in this program at any time.

DENTAL INSURANCE

Centurion offers a dental insurance plan through Delta Dental of Virginia.

The dental plan provides in- and out-of-network benefits, allowing you the freedom to choose any dentist. The amount you pay varies based on whether you see a Delta Dental PPO dentist, Delta Dental Premier dentist, or out-of-network (non-participating) dentist. Locate a Delta Dental network provider at deltadentalva.com.

- ▶ Preventive exams do not apply toward your annual maximum benefit.
- ▶ You will pay less out of your pocket when you see a Delta Dental PPO dentist.
- ▶ Delta Dental PPO and Premier dentists file claims directly with Delta Dental and accept Delta Dental's reimbursement in full for covered services. When you see a PPO or Premier dentist, you will only be responsible for your deductible and coinsurance for covered services. Non-covered services are subject to balance billing.
- ▶ If you choose to see an out-of-network dentist, you will incur additional out-of-pocket expenses, and you will be billed the total amount the dentist charges (balance billing).
- ▶ When you see a Delta Dental PPO or Premier dentist, you are protected from balance billing for covered services.

The table below summarizes key features of the dental plan. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

Summary of Covered Benefits	Delta Dental Plus Premier Dental Plan		
	PPO	Premier	Out of Network
Plan Year Deductible Individual/Family		\$50/\$150	
Plan Year Benefit Maximum		\$1,500	
Preventive Care (Oral exams, cleanings, x-rays)		Plan pays 100%	
Basic Services (Amalgam & composite fillings, simple extractions)	10% after ded.	20% after ded.	20% after ded.
Major Services (Bridges, crowns [inlays/onlays], dentures [full/partial], implants)	50% after ded.	50% after ded.	50% after ded.
Orthodontia Services (Coverage includes children and adults)		50%	
Orthodontia Lifetime Maximum		\$1,500	

MaxOver

The MaxOver benefit allows you to carry forward a portion (\$375) of your unused annual benefit maximum for use in future years. In order to be eligible, you must have at least one preventive exam and cleaning during the year and your claims must be less than the \$750 MaxOver claims limit paid during the year.

DENTAL COSTS

Listed below are the per-pay-period deductions (26 pay periods per year) costs for dental insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis.

LEVEL OF COVERAGE	Delta Dental Plus Premier PPO Dental Plan
Employee Only	\$12.02
Employee + Spouse	\$21.39
Employee + Child(ren)	\$22.57
Employee + Family	\$34.07

VISION INSURANCE

Centurion offers a vision insurance plan through VSP.

You have the freedom to choose any vision provider. However, you will maximize the plan benefits when you choose a network provider. Locate a VSP network provider at vsp.com.

The table below summarizes key features of the vision plan. Please refer to the official plan documents for additional information on coverage and exclusions.

Summary of Covered Benefits	VSP Vision Plan	
	In Network	Out of Network
Eye Exam (Every 12 months)	\$10 copay	Up to \$69 reimbursement
Standard Plastic Lenses (Every 12 months) Single/Bifocal/Trifocal	\$25 copay	Up to \$31/\$50/\$65 reimbursement
Frames (Every 24 months)	\$150 allowance ¹	Up to \$77 reimbursement
Contact Lenses (Every 12 months in lieu of standard plastic lenses)		
Elective	\$130 allowance	Up to \$115 reimbursement
Medically Necessary	\$25 copay	Up to \$320 reimbursement

(1) \$80 Costco allowance.

Extra Discounts and Savings*

- ▶ **Laser vision correction:** Average 15-20% off the regular price or 5% off the promotional price; discounts only available from VSP-contracted facilities.
- ▶ **Retinal screening:** No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam.
- ▶ **Featured frame brands:** Extra \$20 to spend on featured frame brands. Visit vsp.com/specialoffers for details.
- ▶ **Glasses and sunglasses:** 20% savings including lens enhancements on additional glasses and sunglasses, from any VSP provider within 12 months of your last WellVision Exam.
- ▶ **KidsCare:** Meets the needs of eye care and eye wear for growing children.
 - » This program allows for two eye exams per year.
 - » Frame allowance every 12 months.
 - » Additional lens benefit if there is a .50 or greater diopter change.

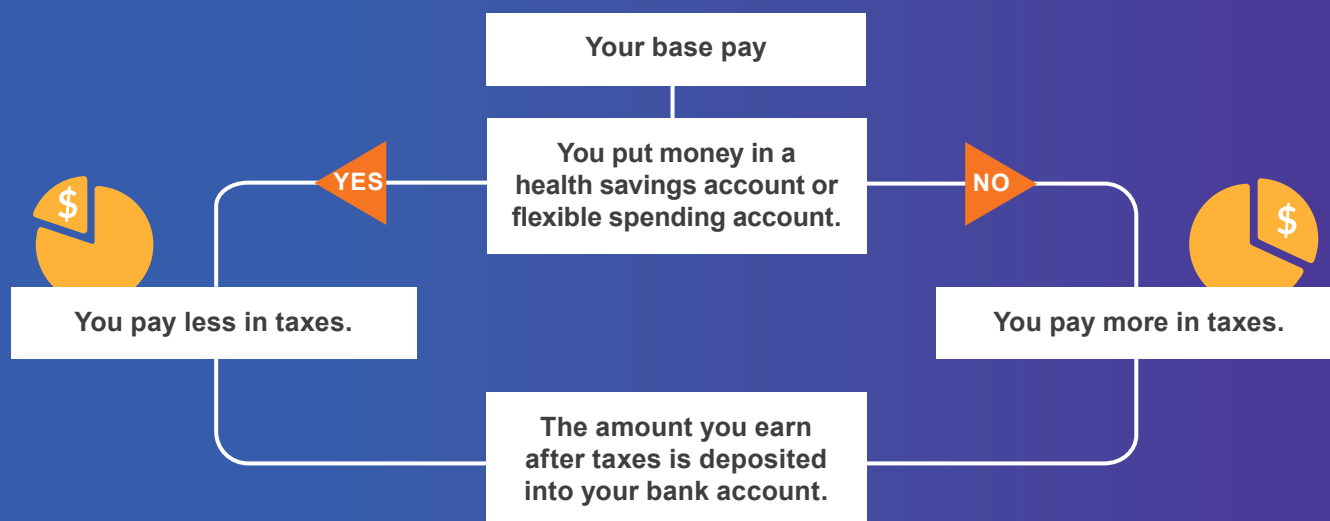
*Most providers do not allow insurance combined with discounts, specials, and other insurance plans.

VISION COSTS

Listed below are the per-pay-period deductions (26 pay periods per year) costs for vision insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis.

LEVEL OF COVERAGE	VSP Vision Plan
Employee Only	\$2.80
Employee + Spouse	\$4.91
Employee + Child(ren)	\$5.26
Employee + Family	\$8.40

BUDGETING FOR YOUR CARE



When you put money into a health savings account or flexible spending account, you can save about 20%* on your care. This is because you don't pay taxes on your contributions.

COMPARE YOUR OPTIONS

	Health Savings Account <small>More Information on Page 16</small>	Health Care Flexible Spending Account <small>More Information on Page 17</small>	Limited Purpose Flexible Spending Account <small>More Information on Page 17</small>
Eligible plans	KeyCare HDHP	KeyCare Standard PPO and KeyCare Choice PPO	KeyCare HDHP
Eligible expenses	Medical, dental, and vision	Medical, dental, and vision	Dental and vision
Centurion contribution available in full on January 1, 2022	No	No	No
Your election is available on January 1, 2022	No	Yes	No
You can change your election throughout the year	Yes	No	No
You can take income tax deductions for expenses you pay with your account	Yes	No	No
Funds roll over from one year to the next	Yes	Grace period: Claims may be incurred until March 15, 2023	Grace period: Claims may be incurred until March 15, 2023

*Percentage varies based on your tax bracket.

HEALTH SAVINGS ACCOUNT

MAXIMIZE YOUR TAX SAVINGS WITH AN HSA



SPEND

Use your HSA dollars today to pay for eligible health care expenses such as: deductibles, copays, dental expenses, eye exams, and prescriptions.



SAVE

Save your HSA funds for the future. An HSA allows you to save and roll over money year to year. The money in the account is always yours, even if you change health plans or even jobs.



INVEST

The money in your HSA can be invested and grows tax free—including interest and investment earnings. After you reach age 65, you can spend your HSA dollars penalty free on any expense.

If you enroll in the KeyCare HDHP, you may be eligible to open and fund a health savings account (HSA) through PNC.

An HSA is a savings account that you can use to pay out-of-pocket health care expenses with pre-tax dollars.

CENTURION CONTRIBUTION

If you enroll in the KeyCare HDHP, Centurion will help you save by matching your contribution to your account.

- ▶ **Employee-only:** \$750
- ▶ **All other coverage levels:** \$1,500

2022 IRS HSA CONTRIBUTION MAXIMUMS

Contributions to an HSA (including the Centurion contribution) cannot exceed the IRS allowed annual maximums.

- ▶ **Individuals:** \$3,650
- ▶ **All other coverage levels:** \$7,300

If you are age 55+ by December 31, 2022, you may contribute an additional \$1,000.

HSA ELIGIBILITY

You are eligible to fund an HSA if:

- ▶ You are enrolled in the KeyCare HDHP.

You are NOT eligible to fund an HSA if:

- ▶ You are covered by a non-HSA eligible medical plan, health care FSA, or health reimbursement arrangement.
- ▶ You are eligible to be claimed as a dependent on someone else's tax return.
- ▶ You are enrolled in Medicare, TRICARE, or TRICARE for Life.

Refer to **IRS Publication 969** for additional eligibility details. If you are over age 65, please contact the Benefits Department.

FLEXIBLE SPENDING ACCOUNTS

Centurion offers three flexible spending account (FSA) options administered by TRI-AD.

Log into your account at tri-ad.com/fsa to: view your account balance(s), calculate tax savings, view eligible expenses, download forms, view transaction history, and more.



HEALTH CARE FSA (NOT ALLOWED IF YOU FUND AN HSA)

Pay for eligible out-of-pocket medical, dental, and vision expenses with pre-tax dollars.

The health care FSA maximum contribution is \$2,750 for the 2022 calendar year.



LIMITED PURPOSE HEALTH CARE FSA (IF YOU FUND AN HSA)

If you fund an HSA, you can also fund a limited purpose health care FSA. The limited purpose health care FSA can only be used for dental and vision expenses.

The limited purpose health care FSA maximum contribution is \$2,750 for the 2022 calendar year.



DEPENDENT CARE FSA

The dependent care FSA allows you to pay for eligible dependent day care expenses with pre-tax dollars. Eligible dependents are children under 13 years of age, or spouse, a child over 13, or elderly parent residing in your home who is physically or mentally unable to care for him or herself.

You may contribute up to \$5,000 to the dependent care FSA for the 2022 plan year if you are married and file a joint return or if you file a single or head of household return. If you are married and file separate returns, you can each elect \$2,500 for the 2022 plan year.

Note: These limits are subject to change for 2022 (2022 limits not released at time of production).

SAVE
\$1,000
PER YEAR

When you fund a dependent care FSA to the maximum amount (\$5,000), you will save \$1,000 per year.* This is because you don't pay taxes on your FSA contributions.

*Amount varies based on your tax bracket.

LIFE AND AD&D INSURANCE

Centurion provides basic life and AD&D insurance to all benefits-eligible employees **AT NO COST**. You have the option to purchase supplemental life and AD&D insurance.

BASIC LIFE AND AD&D INSURANCE



Centurion automatically provides basic life and AD&D insurance through New York Life (formerly Cigna) to all benefits-eligible employees **AT NO COST**. If you die as a result of an accident, your beneficiary would receive both the life benefit and the AD&D benefit. **Please be sure to keep your beneficiary designations up to date.**

- ▶ **Employee life and AD&D benefit:** 1x annual earnings up to a maximum of \$150,000
- ▶ **Spouse life benefit:** \$10,000

Depending on your personal situation, basic life and AD&D insurance might not be enough coverage for your needs. To protect those who depend on you for financial security, you may want to purchase supplemental coverage.

Use the calculator [here](#) to find the right amount for you.

SUPPLEMENTAL LIFE INSURANCE

Centurion provides you the option to purchase supplemental life insurance for yourself, your spouse, and your dependent children through New York Life.

You must purchase supplemental coverage for yourself in order to purchase coverage for your spouse and/or dependents. Supplemental life rates are age-banded. Benefits will reduce to 65% at age 65, 45% at age 70, 30% at age 75, and to 20% at age 80.



- ▶ **Employee:** \$10,000 increments up to \$1,250,000 or 4x annual salary, whichever is less—guarantee issue: 4x annual earnings up to \$200,000
- ▶ **Spouse:** \$5,000 increments up to 100% of the employee's election or \$250,000, whichever is less—guarantee issue: \$25,000
- ▶ **Dependent children:** \$10,000—guarantee issue: \$10,000

**ELECT
COVERAGE
NOW!**

If you elect supplemental coverage when you're first eligible to enroll, you may purchase up to the guarantee issue amount(s) without completing a statement of health (evidence of insurability). If you do not enroll when first eligible, and choose to enroll during a subsequent annual open enrollment period, you will be required to submit evidence of insurability for any amount of coverage. Coverage will not take effect until approved by New York Life.

DISABILITY INSURANCE



INJURY

+



DISABILITY
INSURANCE

=



FINANCIAL
PROTECTION

Disability insurance is designed to help you meet your financial needs if you become unable to work due to an illness or injury.

SHORT-TERM DISABILITY INSURANCE

Centurion automatically provides short-term disability (STD) insurance through New York Life (formerly Cigna) to all benefits-eligible employees after six months of continuous employment **AT NO COST**. STD insurance is designed to help you meet your financial needs if you become unable to work due to an illness or injury. Benefits will be reduced by other income, including state-mandated STD plans.

- ▶ **Benefit:** 60% of base weekly pay up to \$1,000 per week
- ▶ **Elimination period:** 14 days
- ▶ **Benefit duration:** Up to 13 weeks

VOLUNTARY LONG-TERM DISABILITY INSURANCE

Centurion provides the option to purchase voluntary long-term disability (LTD) insurance through New York Life to all benefit-eligible employees after six months of continuous employment. LTD insurance is designed to help you meet your financial needs if your disability extends beyond the STD period.

- ▶ **Benefit:** 60% of base monthly pay up to \$6,000 per month
- ▶ **Elimination period:** 90 days
- ▶ **Benefit duration:** Two years own occupation then any occupation to age 65

ACCIDENT INSURANCE

Centurion provides you the option to purchase accident insurance through The Hartford.

Accident insurance helps protect against the financial burden that accident-related costs can create. This means that you will have added financial resources to help with expenses incurred due to an injury, to help with ongoing living expenses, or to help with any purpose you choose. Claims payments are made in flat amounts based on services incurred during an accident.

ACCIDENT INSURANCE COSTS

Listed to the right are the per-pay-period (26 pay periods per year) costs for accident insurance. The amount you pay for coverage is deducted from your paycheck on a post-tax basis.

LEVEL OF COVERAGE	Accident Insurance
Employee Only	\$3.45
Employee + Spouse	\$5.42
Employee + Child(ren)	\$5.73
Employee + Family	\$9.02

CRITICAL ILLNESS INSURANCE

Centurion provides you the option to purchase critical illness insurance through The Hartford.

Critical illness insurance provides a financial, lump-sum benefit upon diagnosis of a covered illness. These covered illnesses are typically very severe and likely to render the affected person incapable of working. Because of the financial strain these illnesses can place on individuals and families, critical illness insurance is designed to help you pay your mortgage, seek experimental treatment, or handle unexpected medical expenses.

- ▶ **Employee:** \$5,000, \$10,000, \$20,000 or \$30,000—guarantee issue: \$30,000
- ▶ **Spouse:** 100% of employee's election—guarantee issue: 100% of employee's election
- ▶ **Dependent children:** Up to age 26: 50% of employee's election—guarantee issue: 50% of employee's election
- ▶ **Health screening benefit:** \$100

HOSPITAL INDEMNITY INSURANCE

Centurion provides you the option to purchase hospital indemnity insurance through the Hartford.

Hospital indemnity insurance will pay benefits that help you with costs associated with a hospital visit such as a covered accident, illness, or childbirth. This benefit pays you a lump-sum upon admittance so that you can choose how best to cover your expenses. You also receive a \$50 wellness benefit every year when you complete a health screening.

- ▶ **Hospital admission:** Low plan \$1,000 per admission; High plan \$1,500 per admission
- ▶ **Daily hospital confinement:** Low plan \$100 per day*; High plan \$150 per day*
- ▶ **Hospital intensive care unit confinement:** Low plan \$200 per day*; High plan \$300 per day*

*Up to 30 days per calendar year

HOSPITAL INDEMNITY COSTS

Listed to the right are the per-pay-period (26 pay periods per year) costs for hospital indemnity insurance. The amount you pay for coverage is deducted from your paycheck on a post-tax basis.

LEVEL OF COVERAGE	Low Plan	High Plan
Employee Only	\$7.70	\$11.30
Employee + Spouse	\$14.27	\$20.89
Employee + Child(ren)	\$13.42	\$19.73
Employee + Family	\$20.94	\$30.72



401(k) RETIREMENT SAVINGS PLAN

Centurion offers a 401(k) retirement savings plan, which is administered by Transamerica Retirement Solutions.

You are eligible to participate on the Monday after receiving your first paycheck and may enroll over the phone by calling 800-755-5801 or online at my.trsuretirement.com.

Here are some specifics about the plan:

- ▶ Full- and part-time employees may elect to defer up to 75% of their compensation on a pre-tax and/or after-tax basis up to the IRS annual limit (\$19,500 for 2021).
- ▶ If you are age 50+ by December 31, 2021, you may make additional contributions (\$6,500 for 2021).
- ▶ Centurion matches 50% of the first 3% you elect to defer, up to a maximum of 1.5% per-pay-period for eligible earnings.
- ▶ Employees are immediately vested in the matching contributions.
- ▶ The plan provides 19 different mutual funds and 11 target date funds from which to choose for investing.

Note: These limits are subject to change for 2022 (2022 limits not released at time of production).

COMMUTER BENEFITS

Centurion allows you to pay up to \$270 per month for commuter transit costs and \$270 per month for commute-related parking costs with tax-free dollars through TRI-AD.

PUBLIC TRANSPORTATION AND VANPOOLS

- ▶ **Commuter check vouchers:** Commuter checks can be used to purchase transit passes, tickets, fare cards, or other fare media for the transit authority of your choice. They can also be used to pay for vanpool expenses. Commuter checks come in flexible denominations to meet your transit needs and are valid for 15 months.
- ▶ **Commuter check card:** This card is accepted at transit agencies or designated transit retail centers where only transit and vanpool passes, tickets, and fare cards are sold.* The card can be also used at fare vending machines. This saves you time waiting in line and time locating a customer service desk or staffed sales area.
- ▶ **Fare media:** Various transit passes, tickets, and fare cards are offered by participating transit authorities (tolls are not eligible) across the nation. They are sent directly to your home, so you avoid waiting in line to purchase your transit passes.

*For compliance reasons, the commuter check card can only be accepted at designated outlets that sell transit products exclusively, such as transit stations and kiosks. Stores that sell other products, such as station sundry shops, will not accept the commuter check card.

PARKING

- ▶ **Monthly direct pay:** This solution allows TRI-AD to send payments directly to your parking provider each month, so you don't have to worry about writing checks and mailing payments.
- ▶ **Commuter check for parking vouchers:** These vouchers are made payable to the parking provider of your choice and can be used to pay for parking expenses. Commuter check for parking vouchers may be used to purchase one or more types of parking, and you can order as many vouchers as needed for multiple parking providers. They come in flexible denominations and are valid for 15 months.
- ▶ **Commuter check card:** This prepaid card offers the functionality and convenience of a reloadable, personalized debit card for use at parking facilities nationwide. No receipts are necessary with this solution—just swipe and go.
- ▶ **Parking cash reimbursement:** You can elect a monthly amount to be set aside from your paycheck into a pre-tax spending account. Once you have incurred out-of-pocket parking expenses, simply complete a claim form and submit it with receipts for reimbursement.

HOW TO ENROLL

Visit tri-ad.com/commute to enroll in the commuter benefits. You must enroll by the tenth day of the month for your election to be effective on the first day of the following month. For example, enroll by June 10 for your election to be effective July 1.

For more information visit tri-ad.com/commute or call 888-844-1372 Monday through Friday from 8 a.m. to 9 p.m. EST.

Note: These limits are subject to change for 2022 (2022 limits not released at time of production).

ADOPTION ASSISTANCE

Centurion offers \$1,000 in adoption assistance to all eligible full-time employees who have completed at least one year of continuous service and are going through the adoption process. The full policy and forms can be found on Centurion Benefits Department's portal page.

VOLUNTARY PET INSURANCE

Centurion provides you the option to purchase voluntary pet insurance through Nationwide. You have two plan options to choose from: My Pet Protection and My Pet Protection with Wellness. My Pet Protection includes accidents, illnesses, and surgeries, while My Pet Protection with Wellness includes wellness exams, vaccinations, dental cleanings, and more. You can purchase a plan that best suits your budget. For pricing and additional information, contact Nationwide at 888-899-4874 or petinsurance.com/centurion.

Note: Pre-existing conditions are not covered.

EMPLOYEE ASSISTANCE PROGRAM

Your employee assistance program (EAP) services are provided **AT NO COST** to you and your household through Cigna.

Your EAP is a free, strictly confidential service that includes 24/7 online and telephonic counseling and up to **three free face-to-face visits** per person, per issue, per year with a licensed counselor.

Assistance is available for the following personal and work-life situations and more:

- ▶ Stress management
- ▶ Anxiety
- ▶ Work-life balance
- ▶ Addiction
- ▶ Career goals
- ▶ Personal and family goals
- ▶ Depression
- ▶ Conflict at work

Access your EAP by calling 877-622-4327 or logging into mycigna.com.

No personal information is ever shared with Centurion.



I'm in over my head. I wish I had someone to talk to.



I need help finding care for my mom.



Ugh, what else is going to go wrong?



The free EAP can support you. Call the EAP 24/7 at 877-622-4327 or visit mycigna.com.

CONTACT INFORMATION

If you have any questions regarding your benefits or the material contained in this guide, please call the Benefits Support Center at 833-782-7404 Monday–Friday from 9 a.m. to 5 p.m. EST for the following items:

- ▶ Enrollment support
- ▶ General benefit questions
- ▶ Finding in-network providers
- ▶ UltiPro login assistance
- ▶ Qualifying event/demographic changes
- ▶ ID card assistance

For any inquires outside of the items above, please contact the Benefits Team.

800-416-3649

benefits@teamcenturion.com

Provider/Plan	Contact Number	Website
Medical—Anthem BCBS	833-630-6742	anthem.com
Dental—Delta Dental of Virginia	800-237-6060	deltadentalva.com
Vision—VSP	800-877-7195	vsp.com
Health Savings Account—PNC	833-592-9956	anthem.com
Flexible Spending Accounts—TRI-AD	888-844-1372	tri-ad.com/fsa
Life and Disability Insurance— New York Life (formerly Cigna)	STD Claims: 800-362-4462 LTD Claims: 800-732-1603	mynylgbs.com
Accident Insurance—The Hartford	866-547-4205	thehartford.com/employee-benefits/ voluntary
Critical Illness Insurance—The Hartford	866-547-4205	thehartford.com/employee-benefits/ voluntary
Hospital Indemnity Insurance— The Hartford	866-547-4205	thehartford.com/employee-benefits/ voluntary
401(k) Retirement Savings Plan— Transamerica Retirement Solutions	800-755-5801	my.trsretire.com
Commuter Benefits—TRI-AD	888-844-1372	tri-ad.com
Pet Insurance—Nationwide	888-899-4874	petinsurance.com/centurion
Employee Assistance Program—Cigna	877-622-4327	mycigna.com

This summary of benefits is not intended to be a complete description of the terms and Centurion insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan. In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although Centurion maintains its benefit plans on an ongoing basis, Centurion reserves the right to terminate or amend each plan, in its entirety or in any part at any time.

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