

2024 BENEFITS GUIDE

BENEFIT PLANS EFFECTIVE JANUARY 1-DECEMBER 31, 2024

Healthcare beyond patient care, healthcare for humanity.



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HOW BENEFITS WORK

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ADDITIONAL INFORMATION

At Centurion, we are invested in you. That's why we've designed a benefits package that helps to support your total wellbeing physically, emotionally, and financially.

Use this guide as a tool to help you make the best benefits decisions for you and your family for the 2024 plan year (January 1–December 31, 2024). The information inside this guide can help you review your health coverage options, check out tax savings opportunities, and learn about voluntary benefits options.



ELIGIBILITY

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 if hired on the first of the month.

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.

DEPENDENT DOCUMENTATION

Beginning on January 1, 2024, all employees who cover dependents will be required to submit documentation confirming that each individual meets the eligibility requirements. Documentation may include a marriage license or birth certificate.

ENROLLMENT

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 your benefits enrollment in the Paycom mobile app or at
- During the annual benefits enrollment period: See page 4.
- Within 31 days of a qualifying life event: Contact the Benefits Department.

The choices you make at this time will remain in place through December 31, 2024, 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.

HOW TO ENROLL

MOBILE APP DOWNLOAD AND LOGIN INSTRUCTIONS

- Search "Paycom" in the
- Follow the prompts to download the Paycom mobile app.
- Open the Paycom mobile app on your device.
- Enter your standard Centurion Single-Sign-On (SSO) credentials—your company email address and password.
- Enable push notifications so that you receive important, time-sensitive messages.

or the

WEB BROWSER ACCESS AND LOGIN INSTRUCTIONS

- Visit
 - » If logged into a Centurion device on the Centurion network: No further login credentials required.
 - » If not logged in to a Centurion device on the Centurion network: Enter your standard Centurion Single-Sign-On (SSO) credentials—your company email address and password.

HOW TO ENROLL IN BENEFITS

- Open the Paycom mobile app (or) or visit
 - » If logged into a Centurion device on the Centurion network: No further login credentials required.
 - » If using the mobile app or if not logged into a Centurion device on the Centurion network: Enter your standard Centurion Single-Sign-On (SSO) credentials—your company email address and password.
- From the Notifications Center, tap the current year's Benefits Enrollment. Review the instructions and tap "Start Enrollment."
- Review your information. Tap "Edit" to change anything or "Next" to continue.
- · Complete the Pre-Enrollment Questions and tap "Save and Next."
- Choose to enroll in or decline a plan by checking the appropriate option. If necessary, choose which dependents to add. When finished, tap "Enroll." Continue for each benefit plan.
- When finished, review your enrollment and tap "Finalize." Then, tap "Sign and Submit" in the pop-up window. To view
 your current benefits at any time, navigate to Benefits > Current Benefits.

QUESTIONS?

Call the Benefits Support Center at 833-782-7404. Benefits counselors are ready to assist you Monday–Friday from 8 a.m. to 8 p.m. ET. Or, schedule an appointment with a benefits counselor at **employeeconnects.com/centurion**.



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
- Benefits Support Center: Call 833-782-7404 Monday–Friday from 8 a.m. to 8 p.m. ET to talk with a benefits counselor or schedule an appointment with a benefits counselor through the benefits website.
- Centurion Central: Visit

CHANGING YOUR BENEFITS

Due to IRS regulations, once you have made your elections for 2024, 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:

- Birth or adoption of an eligible child.
- Marriage, divorce, or legal separation.
- Spouse's work status changed affecting their benefits.
- $\circ\,$ Death of your spouse or covered child.
- Child's eligibility for benefits changed.
- Qualified Medical Child Support Order.

To request a benefits change, notify the Benefits Team at

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.

within 31 days of the

KEY TERMS TO KNOW

Take the first step to understanding your benefits by learning these five common terms.

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 MAXIMUM

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

WORKING SPOUSE SURCHARGE

This monthly surcharge applies if an employee covers a spouse under our medical plans when the spouse has medical coverage available through their employer.

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. See page 8 for an overview of the plan benefits.

ASK YOURSELF THESE QUESTIONS:

Can you set aside money from your paycheck to save for out-of-pocket health care costs?

Consider the KeyCare

HDHP. You will have the option to fund a health savings account (HSA) that can save you money on your health care costs.

Often, the KeyCare HDHP is the best value plan option.

Do you prefer to pay less when you visit the doctor's office?

Consider the KeyCare Choice PPO. While you will pay more from your paycheck each month for coverage, you will only be responsible for a small copay or cost share when you need care. Do you or your covered family members take any prescription medications on a regular basis?

Consider choosing the KeyCare Standard or Choice PPO. With these plans, you'll consistently pay a smaller copay or cost share when you pick up your medication(s) than you would with the HDHP.

Note: Consider a 90-day supply through prescription mail order.

MEDICAL COSTS

Listed below are the per-pay-period (26 pay periods per year) deductions (costs) for medical insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis, which means you don't pay taxes on the amount you pay for coverage.

WORKING SPOUSE SURCHARGE

A working spouse surcharge of \$75 per month will apply to the "employee + spouse" and "employee + family" coverage levels if your spouse is offered medical insurance through their employer and enrolls in a Centurion medical plan.

Level of Coverage		KeyCare Standard PPO	
Employee Only	\$28.45	\$83.12	\$199.73
Employee + Spouse	\$130.38	\$225.75	\$492.15
Employee + Child(ren)	\$78.88	\$172.39	\$348.87
Employee + Family	\$197.46	\$328.27	\$674.11

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.

	KeyCar In Network		KeyCare Sta In Network	andard PPO Out of Network		
Plan Year Deductible Individual/Family	\$3,200	/\$6.400	\$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 contribution Individual All other tie	account (HSA) match up to: —\$1,000		/A	N	
Out-of-Pocket Max		Ir	ncludes deductible, co	pays, and coinsuran	ce	
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 Specialist LiveHealth Online ² Urgent Care	20% after ded. 20% after ded. 20% after ded. 20% after ded.	40% after ded. 40% after ded. Not covered 40% after ded.	\$25 copay ¹ \$40 copay \$0 copay PCP: \$25 copay Specialist: \$40 copay	50% after ded. 50% after ded. Not covered 50% after ded.	\$20 copay ¹ \$30 copay \$0 copay PCP: \$20 copay Specialist: \$30 copay	40% after ded. 40% after ded. Not covered 40% after ded.
Lab/X-Ray						
Diagnostic Lab/X-Ray High-Tech Services (MRI, CT, PET)	20% after ded. 20% after ded.	40% after ded. 40% after ded.	30% (ded. waived) 30% (ded. waived)	50% after ded. 50% after ded.	20% (ded. waived) 20% (ded. waived)	40% after ded. 40% after ded.
Hospital Services						
Inpatient Outpatient	20% after ded. 20% after ded.	40% after ded. 40% after ded.	30% after ded. 30% after ded.	50% after ded. 50% after ded.	20% after ded. 20% after ded.	40% after ded. 40% after ded.
Emergency Room	20% af	ter ded.	\$200 copay; wa	aived if admitted	\$150 copay; wa	ived if admitted
Prescription Drugs			Essent	ial 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 ³	30% up to \$60	30% up to \$50/\$60 ³	30% up to \$60
Tier 3: Preferred Brand	20%/30% after ded. ³	30% after ded.	30% up to \$75/\$85 ³	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 result in a lower copay of \$10.

(2) LiveHealth Online psychology visit copays are \$0 for the KeyCare Standard PPO and KeyCare Choice PPO plans.

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

LOCAL SELECT NETWORK

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

- Florida: NetworkBlue
- Georgia: Blue Open Access POS
- Maryland/DC: Blue Choice Advantage Open Access
- Missouri: Blue Access Choice (St. Louis)
- Northern Virginia*: Blue Choice Advantage Open Access
- Tennessee: Network S
- Arizona: Blue Alternative

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, which means 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.

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

- Georgia: Quest Diagnostics
- Tennessee: Methodist Hospital (Memphis)
- Arizona: Mayo Foundation including Mayo Clinic, Mayo

Hospital, and Mayo Family Clinics

To locate an in-network provider, visit , choose Select a Plan for basic search, and enter the following information:

- What type of care are you searching for? Select Medical Plan or Network from the dropdown list
- What state do you want to search? Select your home state: Florida, Georgia, Maryland/DC, Missouri, Northern Virginia, Tennessee, or Arizona
- How do you get health insurance? Select Medical (Employer-Sponsored)
- Select a plan/network: Choose the appropriate network based on your state (Florida: NetworkBlue, Georgia: Blue Open Access POS, Maryland/DC: Blue Choice Advantage Open Access, Missouri: Blue Access Choice (St. Louis), Northern Virginia*: Blue Choice Advantage Open Access, Tennessee: Network S, Arizona: Blue Alternative), then click Continue

*The Select Network in Northern Virginia is limited to individuals who reside in the Town of Vienna, City of Fairfax, and east of State Route 123. All others who reside in VA will choose the same as they do today, which is KeyCare PPO.

PREVENTIVE CARE

In-network preventive care is 100% free for medical plan members. You won't have to pay anything out of your pocket when you receive in-network preventive care. Practice preventive care and reap the rewards of a healthier future.

Preventive care helps keep you healthier long-term.

An annual preventive exam can help **IDENTIFY FUTURE HEALTH RISKS** and treat issues early when

care is more manageable and potentially more effective.

Preventive care helps keep your costs low.

With a preventive care exam each year, you can **TARGET HEALTH ISSUES EARLY** when they are less expensive to treat. You can also effectively manage chronic conditions for better long-term health.

Preventive care keeps your health up to date.

Yearly check-ins with your doctor keep your health on track with **ANNUAL EXAMS AND SCREENINGS** that could save your life.

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 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-onone 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

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 innetwork doctors, and much more.

Call 833-388-1400 to speak with a live health guide agent. You can also visit 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

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 by taking the one-minute quiz at



TELEMEDICINE

You have access to telemedicine through Anthem BlueCross BlueShield. Get the care you need wherever you need it. Whether you're on the go, at home, or at the office, care comes to you in the form of telemedicine.

KeyCare Standard PPO and KeyCare Choice PPO plan members pay a \$0 copay for telemedicine visits. KeyCare HDHP members pay a \$55 copay before their deductible is met. Due to HIPAA regulations, children who are 18 years of age or older must set up their own Anthem account in order to make telehealth appointments for themselves.

Get care for non-emergency conditions.

Telemedicine can connect you to a doctor, without an appointment, from your phone, computer, or tablet. Receive care for common health issues like allergies, asthma, sore throat, fever, headache, rashes, and much more.

Receive mental health support and counseling.

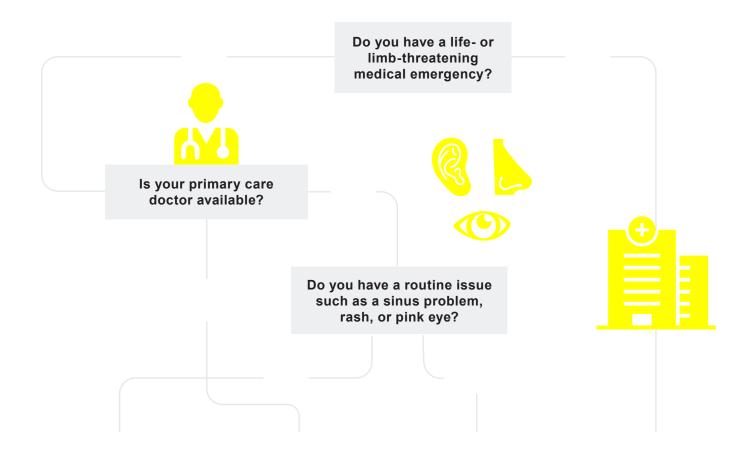
Licensed counselors and psychiatrists can help diagnose, treat, and even prescribe medication when needed for depression and anxiety, substance abuse and panic disorders, PTSD, men and women's issues, grief and loss, and more.

Talk with a doctor by phone or video, 24/7.

Use telemedicine to prioritize your health by getting the care you need when you need it. Visit livehealthonline.com or download the LiveHealth Online mobile app to get started.

KNOW WHERE TO GO FOR 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 choose where to go for care.



Get care without leaving your house. An appointment with a physician is available from your phone or computer.

Log into livehealthonline.com to make an appointment.

For care during normal office hours, it's usually best to see your primary care doctor. He or she can provide follow-up care and refer you to a specialist, if needed.

Urgent care centers typically don't require an appointment and are often open after normal business hours. Plus, in-network urgent care centers provide faster and much less expensive care than the ER. In the case of a true medical emergency, go to the ER. At the ER, true emergencies are treated first. Other cases must wait sometimes for hours and it will cost a lot more to get care at the ER.

5\$



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

Earn the Wellness Premium Credit and pay less for your medical insurance by completing an annual wellness exam by November 30 with your physician. 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 Wellness 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 Benefits page of Centurion Central.

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.

TALKSPACE

Your employee assistance program (EAP) provides you with access to Talkspace—an online therapy service that connects you to a dedicated, licensed therapist from anywhere, anytime you need. You have access to three EAP sessions via face to face, video/phone, or messaging (seven days of messaging = one EAP session).

Talkspace can assist with issues including:

∘ Stress	 Healthy living 	∘ Sleep
∘ Anxiety	∘ Trauma and grief	 Identity struggles
• Depression	 Eating disorders 	 Chronic issues
 Relationships 	 Substance use 	 And more

With Talkspace, you can connect with a licensed therapist in your area via unlimited, private, text, video, or audio messages. Therapists engage during business hours five days a week, so assistance is regularly available.

Get started with Talkspace today:

- Visit
- Complete the QuickMatch survey
- Review your best matches and choose your personal therapist

BUDGETING FOR YOUR CARE

Centurion offers two types of pre-tax accounts: a health savings account (HSA) and flexible spending accounts (FSAs).

Enrolled in the KeyCare HDHP? Enrolled in the KeyCare HDHP? Enrolled in the KeyCare Standard or Choice PPO? Paying for child or elder care expenses?

Consider funding a an HSA.

- Centurion
 contributes to your
 HSA on a monthly
 basis:
 - » Individual—Up to \$1,000 per year
 - » Family—Up to \$2,000 per year
- Roll over all funds each year
- \$5 minimum contribution

Consider funding a limited purpose FSA. You can choose to fund both a limited purpose FSA and an HSA.

- No Centurion contribution
- Dental and vision expenses only
- Claims may be incurred until March 15, 2025
- \$5 minimum contribution

Consider funding a health care FSA.

If you fund an HSA, you cannot fund a health care FSA.

- No Centurion contribution
- Claims may be incurred until March 15, 2025
- \$5 minimum contribution

You may fund a dependent care FSA.

- No Centurion contribution
- No roll over allowed
- Dependent care expenses only
- Claims may be incurred until March 15, 2025
- \$5 minimum contribution



*Percentage varies based on your tax bracket.

THREE MORE REASONS TO FUND AN HSA

When you enroll in the KeyCare HDHP, you'll pay less for your health coverage each month and have the opportunity to fund an HSA—a tax-advantaged savings account. **Here's are three reasons to fund an HSA:**

- **1. Keep the money in your HSA, no matter what.** You own your HSA—even if you change jobs. The money you deposit is always yours. After age 65, spend HSA dollars on any expense penalty-free.
- **2. Use your HSA for anyone in your family.** Funds in your HSA can be used for your expenses and those of your spouse and eligible dependents, even if they are not covered by the HDHP.
- **3.** Get a discount on your health care expenses. What you spend on your eligible expenses is not taxed and on average people save 20%.

HEALTH SAVINGS ACCOUNT

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

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 and contribute to the WealthCare HSA, Centurion will help you save for HSAeligible out-of-pocket health care expenses by matching your HSA contribution on a dollar-for-dollar basis, up to the maximum employer contribution listed below.

- Employee-only: \$1,000 per year
- All other coverage levels: \$2,000 per year

2024 IRS HSA CONTRIBUTION MAXIMUMS

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

- Individuals: \$4,150
- All other coverage levels: \$8,300

If you are age 55+ by December 31, 2024, 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 for additional eligibility details. If you are over age 65, please contact Human Resources.

MAXIMIZE YOUR TAX SAVINGS WITH AN HSA

Spend.

Pay for eligible expenses such as deductibles, dental and vision exams, menstrual care products, and prescriptions.

Save.

Roll over funds every year to boost your long-term savings. Even if you switch health plans or jobs, the money is yours to keep. Dollar-for-dollar matching basis up to the maximum will help you save by contributing to your account.

Invest

Invest and grow HSA funds tax free—including interest and investment earnings. After age 65, spend HSA dollars on any expense penalty-free.

FLEXIBLE SPENDING ACCOUNTS

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

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 \$3,200 for the 2024 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 \$3,200 for the 2024 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 a 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 2024 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 up to \$2,500 for the 2024 plan year.

HOW TO USE AN FSA

Contribute.

Decide how much to contribute to your FSA on a plan year basis up to the maximum allowable amounts. This amount will be evenly divided by the number of pay periods and deducted on a pre-tax basis from your paycheck.

Pay.

Use your FSA debit card to pay for eligible expenses at time of service or submit a claim for reimbursement at . Keep all receipts in case TRI-AD requires you to verify the eligibility of a purchase.

Use it or lose it.

FSA dollars are use it or lose it (no roll over allowed). However, you have until March 15, 2025, to incur claims.

DENTAL BENEFITS

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

- 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.

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	

DENTAL COSTS

Listed below are the per-pay-period (26 pay periods per year) deductions (costs) for dental insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis, which means you don't pay taxes on the amount you pay for coverage.

Employee Only	\$12.38
Employee + Spouse	\$22.03
Employee + Child(ren)	\$23.25
Employee + Family	\$35.10



DENTAL BENEFITS

Dental plan members have access to the following programs through Delta Dental of Virginia.

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.

-SPECIAL HEALTH CARE NEEDS BENEFIT

Specifically for our members with special health care needs who may be eligible for additional services including exams, hygiene visits, dental case management, and sedation/anesthesia. Special health care needs include any physical, developmental, mental, sensory, behavioral, cognitive, or emotional impairment or limiting condition that requires medical management, health care intervention, and/or use of specialized services or programs. The condition may be congenital, developmental, or acquired through disease, trauma, or environmental cause and may impose limitations in performing daily self-maintenance activities or substantial limitations in major life activity.

Eligible members should let their dentist know that their Delta Dental group plan includes the special health care needs benefit and that they have a qualifying need.

- Extra exam benefits are included for additional consultations with the dentist that may be necessary to help patients understand what to expect prior to treatment.
- Up to four dental cleanings in a benefit year.
- Treatment delivery modifications, including anesthesia, necessary for dental staff to provide oral health care for patients with sensory sensitivities, behavioral challenges, severe anxiety, or other barriers to treatment.

VISION BENEFITS

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

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			

(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 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 eye care and eye wear needs of 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 (26 pay periods per year) deductions (costs) for vision insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis, which means you don't pay taxes on the amount you pay for coverage.

Employee Only	\$2.80
Employee + Spouse	\$4.91
Employee + Child(ren)	\$5.26
Employee + Family	\$8.40

Healthcare beyond patient care, healthcare for humanity.



LIFE AND AD&D BENEFITS

Centurion's comprehensive benefits package includes financial protection for you and your family in the event of an accident or death.

BASIC LIFE AND AD&D INSURANCE

Centurion automatically provides basic life and AD&D insurance through New York Life to all benefits-eligible employees . 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

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 dependent children. Supplemental life rates are age-banded. Benefits will reduce to 65% at age 65, 45% at age 70, 30% at age 75, and 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: Live birth to 6 months: \$500; 6+ months: \$10,000—guarantee issue: \$10,000

Supplemental Life Insurance Costs

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

	Supplemental Life Insurance		
AGE		Spouse ¹	
<20	\$0.030	\$0.030	
20-24	\$0.028	\$0.028	
25-29	\$0.031	\$0.031	
30-34	\$0.038	\$0.038	
35-39	\$0.046	\$0.046	
40-44	\$0.061	\$0.061	
45-49	\$0.099	\$0.099	\$0.092
50-54	\$0.156	\$0.156	
55-59	\$0.271	\$0.271	
60-64	\$0.428	\$0.428	
65-69	\$0.720	\$0.720	
70-74	\$1.125	\$1.125	
75+	\$1.125	\$1.125	

(1) Spouse rates are based on spouse age.

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 BENEFITS

Disability insurance keeps you and your family financially protected 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 to all benefits-eligible employees after six months of continuous employment . 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

Voluntary LTD Insurance Costs

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

AGE	Voluntary LTD Insurance Per \$100 Covered Payroli	
Under 30	\$0.223	
30–34	\$0.289	
35–39	\$0.305	
40–44 45–49	\$0.360	
45–49	\$0.381	
50–54	\$0.406	
55–59	\$0.421	
60+	\$0.366	

ACCIDENT BENEFITS

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. You also receive a \$50 wellness benefit every year when you complete a health screening.

ACCIDENT INSURANCE COSTS

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

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

CRITICAL ILLNESS BENEFITS

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 BENEFITS

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) deductions (costs) for hospital indemnity insurance. The amount you pay for coverage is deducted from your paycheck on a post-tax basis.

	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

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

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 (\$23,000 for 2024).
- If you are age 50+ by December 31, 2024, you may make additional contributions (\$7,500 for 2024).
- Centurion matches 50% of the first 6% you elect to defer, up to a maximum of 3% per-pay-period for eligible earnings.
- Effective April 15, 2023, new enrollees will be on an updated vesting schedule in which 40% of employer contributions are vested after one (1) year of service, reaching 100% after two (2) years of service.
- The plan provides 19 different mutual funds and 11 target date funds from which to choose for investing.





COMMUTER BENEFITS

Centurion allows you to pay up to \$315 per month for commuter transit costs and \$315 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 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

or call 888-844-1372 Monday through Friday from 8 a.m. to 9 p.m. ET.

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 the Benefits page of

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 Note: Pre-existing conditions are not covered.

EMPLOYEE ASSISTANCE PROGRAM

Assistance is always available for you. The 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 visits per person, per issue, per year with a licensed counselor. In addition, your EAP provides access to

Talkspace, an online therapy service. Refer to page 13 for details.

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
- No personal information is ever shared with Centurion and access to the EAP is completely confidential.

Tools and resources

Browse tools and resources to help you make life's big decisions.

Care options

Find child and elder care to support you and your family's day-to-day needs.

Legal and financial guidance

Receive guidance for buying a home, retirement, budgeting, and more.

Support all year

Connect with a mental health professional about addiction, family, and individual counseling.

CONTACTS

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 8 a.m. to 8 p.m. ET for the following items:

- Enrollment support
- General benefit questions
- Finding in-network providers

- Paycom navigation assistance
- Qualifying event/demographic changes
- ID card assistance

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

Provider/Plan		Website
Medical Anthem BCBS	833-630-6742	anthem.com
Dental Delta Dental of Virginia	800-237-6060	deltadentalva.com/members/centurion
Vision VSP	800-877-7195	vsp.com
Health Savings Account WealthCare	833-388-1400	anthem.com
Flexible Spending Accounts TRI-AD	888-844-1372	tri-ad.com/fsa
Life and Disability Insurance New York Life	Life Claims: 800-362-4462 Disability Claims: 888-842-4462	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
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
401(k) Retirement Savings Plan Transamerica Retirement Solutions	800-755-5801	my.trsretire.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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