

# 2024 Benefits Guide

January 1- December 31, 2024



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# Introduction

Dear Valued Team Member,

As an RTS employee, we ask that you review this guide carefully, your benefits are a valuable addition to your overall compensation package. We are proud to offer our employees and their families a comprehensive benefit package that delivers quality and affordable coverage to choose from.



To get the most out of your benefits, we encourage you to be a savvy consumer. This guide will help answer some of the basic questions you may have about benefits being offered to you. We invite you to take advantage of the programs, savings opportunities, resources and tools that will help you leverage your benefits to their fullest advantage.

You will complete your enrollment through your secure Workday login credentials. If you are declining benefits, you must decline them in the Workday system.

Please be aware this brochure describes the basic features of the benefit plans available and is not the complete official Plan Document, if there is a conflict between the Plan Document and this brochure, the Plan Document governs. Plan Documents are available to employees through Workday or at a request to [Benefits@ResolveTech.com](mailto:Benefits@ResolveTech.com).

We prioritize our employees so they can put their health and wellness first in all they do.

# Accessing your benefits

Coverage	Carrier	Phone	Website
Medical		(800) 244-6224	<a href="http://www.cigna.com">www.cigna.com</a>
Virtual Visits		(888) 726-3171	<a href="http://www.MDLIVE.com/cigna.com">www.MDLIVE.com/cigna.com</a>
Dental		(800) 244-6224	<a href="http://www.cigna.com">www.cigna.com</a>
Vision		(877) 478-7557	<a href="http://Eyedoctorlocator.eyemedvisioncare.com">Eyedoctorlocator.eyemedvisioncare.com</a>
Life/AD&D		(866) 274-9887	<a href="http://www.equitable.com">www.equitable.com</a>
Disability			
Employee Assistance Program (EAP)			<a href="http://www.guidanceresources.com">www.guidanceresources.com</a>
Health Savings Account (HSA)		(866) 451-3399	<a href="http://www.wexbenefitsyou.com">www.wexbenefitsyou.com</a>
Retirement Savings		(800) 338-4015	<a href="http://empower-retirement.com">empower-retirement.com</a>
Human Resources			<a href="mailto:benefits@resolvetech.com">benefits@resolvetech.com</a>

## How do I enroll?

1

You will log into your personal **Workday** employee portal.

2

Find **Open Enrollment Task** in your Workday inbox. Click on **Let's Get Started!**

3

Review your benefit elections and **make changes as needed**. **Review and Sign**, then click **Submit** when you are done.

# Eligibility

You are eligible to participate under the Company's benefits plans if you are a regular, full-time active employee working an average of 32 hours per week.

Choosing the proper care is essential for protecting you and your family's health. The Company allows you adequate time and substantial training to help you understand how to choose the plans that will fit your lifestyle best. Please review and enroll timely to avoid disruption of coverage offered.

## You have three opportunities to enroll in or make changes to your benefits:

### New Hire

Plans selected are effective the first of the month following 30 days.

If you fail to enroll on time, you WILL NOT qualify for coverage unless you have a qualifying life event during our next open enrollment (except for company-paid benefits).

### Open Enrollment

Changes made during Open Enrollment are effective January 1<sup>st</sup>, 2024 through December 31<sup>st</sup>, 2024.

### Qualifying Life Event

Within 30 days of a qualifying event.

## Annual Notices

Various state and federal laws require that employers provide disclosure and annual notices to their plan participants. Please reference the end of this guide for all notices to read at your convenience.

## Eligible Dependents Include:

- Your legal spouse
- Children under the age of 26, regardless of student, dependency, or marital status
- Children over the age of 26 who are fully dependent on you for support due to a mental or physical disability and who are indicated as such on your federal tax return.

## Qualifying Life Event Under When Coverage Begins

Due to IRS regulations, you can not change your elections until the next annual Open Enrollment period, unless you have a qualified life event during the year.

Examples of qualified life events:

- Marriage or divorce
- Birth or adoption of a child
- Child reaching the maximum age limit
- Death of a spouse, DP, or child
- Loss of coverage under your spouse's/DP's plan
- You gain access to state coverage under Medicaid or CHIP

To make changes to your benefit elections, you must contact Human Resources within 30 days of the qualified life event (including newborns).

Be prepared to show documentation of the event such as a marriage license, birth certificate or divorce decree.

If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

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### Required Information

When you enroll, you will be required to enter a Social Security number (SSN) for all covered dependents. The Affordable Care Act (ACA), otherwise known as health care reform, requires the company to report this information to the IRS each year to show that you and your dependents have coverage. This information will be securely submitted to the IRS and will remain confidential.

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# Understanding your benefits

## Definitions

**Calendar Year** - January 1 through December 31 of each year.

**Coinsurance** - The percent of eligible charges that the plan pays.

**Copayment (Copay)** - The amount paid by a covered person to a network provider at the time services are rendered. Copayments for covered services are not applied to your deductible.

**Deductible** - The amount you pay each calendar year before the plan begins to pay for certain covered health care expenses.

**Guarantee Issue** - The amount of coverage pre-approved by the insurance carrier regardless of health status.

**High Deductible Health Plan** - A health insurance plan with lower premiums and higher deductibles than a traditional health plan. It is intended to incentivize consumer-driven healthcare. Being covered by an HDHP is also a requirement for having a health savings account.

**Medical Emergency** - A sudden, serious, unexpected and acute onset of an illness or injury where a delay in treatment would cause irreversible deterioration resulting in a threat to the patient's life or body part.

**Network Benefits** - The benefits applicable for the covered services of a network provider.

**Non-Network Benefits** - The benefits applicable for the covered services of a non-network provider.

**Open Enrollment** - The period during which employees are given the opportunity to enroll or change their current coverage elections.

**Out-of-Pocket Maximum** - The total amount paid each year by the member for the deductible and coinsurance. After reaching the out-of-pocket maximum, the plan pays 100% of the allowable charges for covered services for the remainder of the calendar year.

**Plan Year** - January 1 through December 31 of each year.

**Preferred Provider Organization (PPO)** - A network of health care providers contracted to provide medical services to covered employees and dependents at negotiated rates. You may seek care from either a network or non-network provider, but network care is covered at a higher benefit level and the employee is responsible for a greater portion of the cost when using a non-network provider.

**Qualified Life Event** - A significant change in an individual's circumstances that allows them to make changes to their health coverage outside of the typical open enrollment or new hire period. These events have governed regulations, and include, but not limited to; marriage, birth or adoption, and loss of coverage.

**Usual and Customary Rates** - Non-network health plan expenses are considered for reimbursement at usual and customary (U&C) rates. U&C rates are determined to be the prevailing charge made for a service by a similar provider in the same geographic area. Charges above U&C are not covered by the plan and are the responsibility of the participant.

We are proud to offer you a choice of **four different medical plans** to choose from that can provide comprehensive medical and prescription drug coverage. These plans also offer many resources and tools to help you and your family maintain a healthy lifestyle.

## Cigna PPO Buy-up \$1,250, Base \$2,500, & Comfort \$5,000

These 3 plan options give you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Open Access Plus network. The calendar year deductible must be met before certain services are covered.

### To locate an in-network provider please visit [Cigna.com](https://www.cigna.com);

1. Enter your Address, City, or ZIP
2. Select if you would like to search by Doctor Type, Doctor by Name, or Health Facilities
3. Then follow the continuing prompts
4. You may be asked to Log In/Register, but you can also continue as guest
5. All 4 medical plans are in the **Open Access Plus** network

## Cigna HDHP/HSA \$3,500

Like the PPO plans, a High-Deductible Health Plan (HDHP) gives you the freedom to seek care from the provider of your choice. You will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the Open Access Plus network. In addition, the HDHP comes with a health savings account (HSA) that allows you to save pre-tax dollars to pay for any qualified health care expenses as defined by the IRS, including most out-of-pocket medical, prescription drug, dental and vision expenses. For a complete list of qualified health care expenses, visit [www.irs.gov/pub/irs-pdf/p302.pdf](https://www.irs.gov/pub/irs-pdf/p302.pdf)

### How it works

#### Annual Deductible

You must meet the entire annual deductible before the plan starts to pay for non-preventative medical and prescription drug expenses.

#### Coinsurance

Once you've met the plan's annual deductible, you are responsible for a percentage of your medical expenses, which is called coinsurance. For example, the plan may pay 80 percent and you may pay 20 percent.

#### Out-of-Pocket Maximum






Once your deductible and coinsurance add up to the plan's annual out-of-pocket maximum, the plan will pay 100 percent of all eligible covered services for the rest of the calendar year.



# Where to go for care



Where you decide to go for your medical needs will have a big impact on your out-of-pocket costs. Although virtual care or visiting your primary care provider may be the most cost-effective services, there are times when you might need to go to a facility other than your doctor's office. The cost of medical care can vary widely amongst these other facilities, and knowing the facts can help you manage your health and your healthcare dollars.

 <b>TELEMEDICINE</b> <ul style="list-style-type: none"><li>• Available 24 / 7</li><li>• Lowest out-of-pocket cost</li><li>• Call from the comfort of your home or office</li></ul> <b>FOR HELP WITH</b> <ul style="list-style-type: none"><li>• Allergies</li><li>• Cold &amp; Flu</li><li>• Rash</li><li>• Fever</li><li>• Stomachache</li></ul> <b>\$</b>	 <b>DOCTOR'S OFFICE OR HEALTH CLINIC</b> <ul style="list-style-type: none"><li>• Lower out-of-pocket cost</li><li>• Typically located close to home or work for minor medical problems</li><li>• Wait times are limited</li></ul> <b>FOR HELP WITH</b> <ul style="list-style-type: none"><li>• Routine Exams</li><li>• Vaccines</li><li>• Minor Injuries</li><li>• Earache</li><li>• Throat Pains</li><li>• Common Infections</li></ul> <b>\$</b>	 <b>URGENT CARE PROVIDER</b> <ul style="list-style-type: none"><li>• Open evenings, weekends and holidays</li><li>• Used when your doctor's office is closed, and they're urgent conditions, but not life threatening</li></ul> <b>FOR HELP WITH</b> <ul style="list-style-type: none"><li>• Sprains/ Strains</li><li>• Minor Infections</li><li>• Small Cuts (Stitches)</li><li>• Minor Burns</li></ul> <b>\$\$</b>	 <b>FREE STANDING EMERGENCY ROOM</b> <ul style="list-style-type: none"><li>• Open 24 / 7</li><li>• Wait time is typically less than a Hospital ER</li><li>• Services do not include trauma care</li></ul> <b>FOR HELP WITH</b> <ul style="list-style-type: none"><li>• Most Major Injuries (Except Trauma)</li><li>• Severe Pains</li></ul> <b>\$\$\$</b>	 <b>HOSPITAL EMERGENCY ROOM (ER)</b> <ul style="list-style-type: none"><li>• Open 24 / 7</li><li>• Highest out-of-pocket cost</li><li>• Wait time average 2.5 - 3 hours unless true emergency</li></ul> <b>FOR HELP WITH</b> <ul style="list-style-type: none"><li>• Life Threatening Conditions</li><li>• Sudden Loss of Consciousness</li><li>• Chest Pain</li><li>• Broken Bones</li></ul> <b>\$\$\$\$</b>
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It's important to verify that the facilities you visit are within your plan's network to minimize your potential out-of-pocket costs.

**IMPORTANT:** Out-of-network facilities may provide the same level of care, but your expenses will be much higher than if you visit an in-network facility. All emergency facilities will be considered in-network in the event that you are admitted to the hospital for additional care, regardless of the facility's network status with Cigna. It is important to note, if you are not admitted during your treatment at an out-of-network facility, the services will not be considered emergent care and will be processed as out-of-network claims.

# Medical Plans at a Glance



Please review this side-by-side overview of our current plans coverage offered. Out-of-network benefits are covered; however, you will always pay more out-of-network. For complete coverage details, please refer to Workday and the Summary Plan Description.

	Buy-Up Plan PPO \$1,250	Base Plan PPO \$2,500	Comfort Plan PPO \$5,000	HDHP HSA \$3,500
	In-network	In-network	In-network	In-network
<b>Deductible</b> (per calendar year)				
Individual / Family	\$1,250 / \$2,500	\$2,500 / \$7,500	\$5,000 / \$10,000	\$3,500 / \$7,000
<b>Out-of-Pocket Maximum</b> (per calendar year)				
Individual / Family	\$2,500 / \$5,000	\$4,000 / \$12,000	\$5,000 / \$10,000	\$5,000 / \$10,000
<b>Coinsurance</b>				
(What Member Pays)	20%	30%	0%	20%
<b>Company Contribution to Your Health Savings Account (HSA)</b> (per calendar year; prorated for new hires/newly eligible)				
Individual / Family	N/A	N/A	N/A	\$500 / \$1,000
<b>Covered Services</b>				
Office Visits (Physician / Specialist)	\$30 / \$30 copay	\$30 / \$30 copay	No charge	Deductible, then 20%
Routine Preventive care	No charge	No charge	No charge	No charge
Telemedicine	\$30 Copay	\$30 Copay	No charge	Deductible, then 20%
Outpatient Diagnostic (Lab / Xray)	No charge	No charge	No charge	Deductible, then 20%
Ambulance	Deductible, then 20%	Deductible, then 30%	Deductible, then 0%	Deductible, then 20%
Emergency Room	\$250 copay	\$100 copay then 30%	\$250 copay then 20%	Deductible, then 20%
Urgent Care Facility	\$75 copay	\$55 copay	No charge	Deductible, then 20%
Inpatient Hospital Stay	Deductible, then 20%	Deductible, then 30%	Deductible, then 0%	Deductible, then 20%
Outpatient Surgery	Deductible, then 20%	Deductible, then 30%	Deductible, then 0%	Deductible, then 20%
<b>Prescription Drugs (Tiers)</b>				
Retail Pharmacy (30-day supply)	\$20 / \$35 / \$50	\$20 / \$40 / \$60	\$20 / \$40 / \$60	Deductible, then 20%
Mail Order (90-day supply)	3x Retail	3x Retail	3x retail	3x retail



Coinsurance percentages and copy amounts shown in the above chart represent what the member is responsible for paying. 1. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount



# Health Savings Account (HSA)



To be eligible for an HSA, you must be enrolled in the RTS \$3,500 HDHP/HSA plan, and cannot be covered through Medicare Part A or Part B or TRICARE programs. See the plan documents for full details.

You may contribute to your HSA through pre-tax payroll deductions to help offset your annual deductible and pay for qualified health care expenses. **In addition, RTS will contribute up to \$500 annually to your HSA if you enroll in employee-only coverage and up to \$1,000 annually if you enroll yourself and one or more family members onto the plan.**

Your HSA is yours for life. The money is yours to spend or save, regardless of whether you change health plans, retire or leave the company. There is no “use it or lose it” rule. Your account grows tax free over time as you continue to roll over unused dollars from year to year. You decide how or if you want to spend your HSA funds. You can use them to pay for you and your dependents doctor’s visits, prescriptions, braces, glasses or even laser vision correction surgery.

	IRS 2024 Maximum	RTS Annual Contribution	Your 2024 Annual Maximum
Employee Only	\$4,150	\$500	\$3,650
Family (Employee + 1 or more)	\$8,300	\$1,000	\$7,300

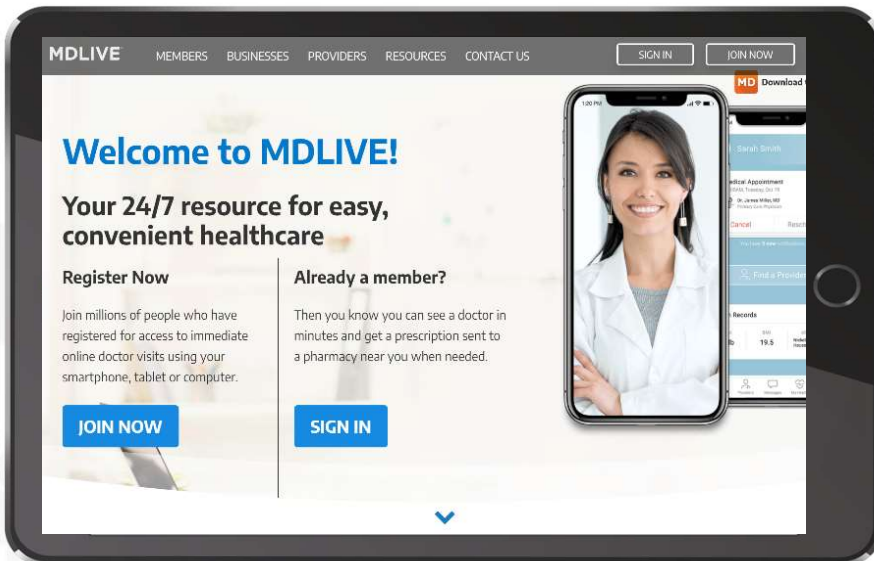
**Catch up:** If you are age 55 or older you can contribute an additional \$1,000 annually

## How to Open an Account?

You will receive two debit cards in the mail within the first few weeks of enrollment. You can manage your HSA claims and expenses and request new debit cards through the WEX mobile app. Per US Patriot Act requirements you may be required to confirm your identity with WEX before your account is finalized. You will receive a mail and/or email notice from WEX requesting specific forms of identity verification like your social security card, US passport, VISA, etc. to activate your account. You must respond to this notice with proof of the requested documents within 60 days, otherwise your HSA will be closed. Should you have any questions, please contact WEX customer service.



MDLive allows you to get the care you need - including some prescriptions - for a wide range of minor conditions. You can connect with a board-certified doctor via video chat or phone without leaving your home, when, where and how it works best for you. Get care 24/7/365 for minor medical and behavioral/mental health virtual care.



**Access care** from just about anywhere via **video or phone**

**Get minor medical virtual care 24/7/365** - even on weekends and holidays

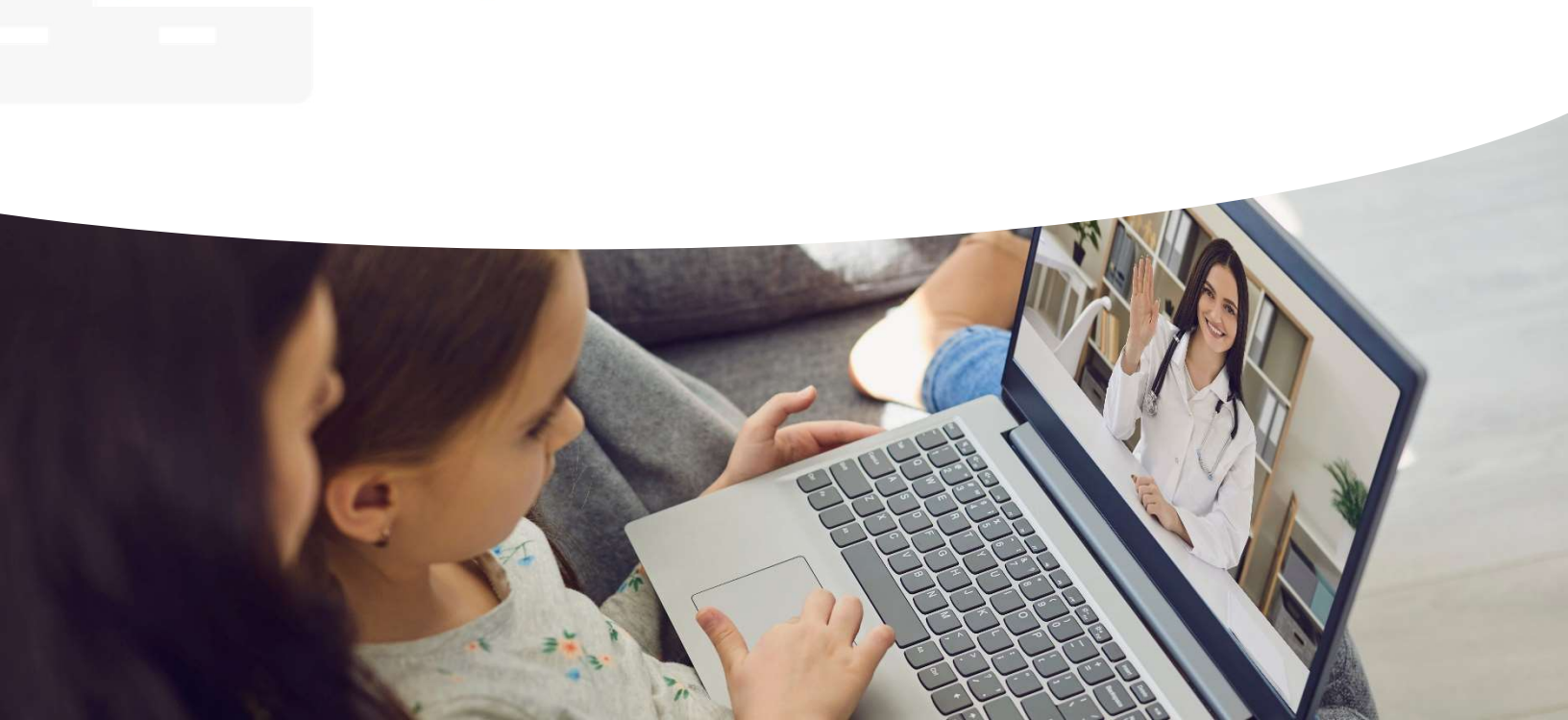
**Schedule a behavioral/mental health** virtual care appointment online within minutes

**Access board-certified doctors and pediatricians** as well as licensed counselors and psychiatrists

Have a **prescription sent directly** to a local pharmacy if appropriate

## Connect with virtual care your way.

- › Contact your in-network provider or counselor
- › Talk to an MDLIVE medical provider on demand on **myCigna.com**
- › Schedule an appointment with an MDLIVE provider or licensed therapist on **myCigna.com**
- › Call MDLIVE 24/7 at 888.726.3171



# Dental Plan



## Cigna Dental PPO

Our Cigna dental plans offer you the freedom and flexibility to use the dentist of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a dentist who participates in the Cigna DPPO network.

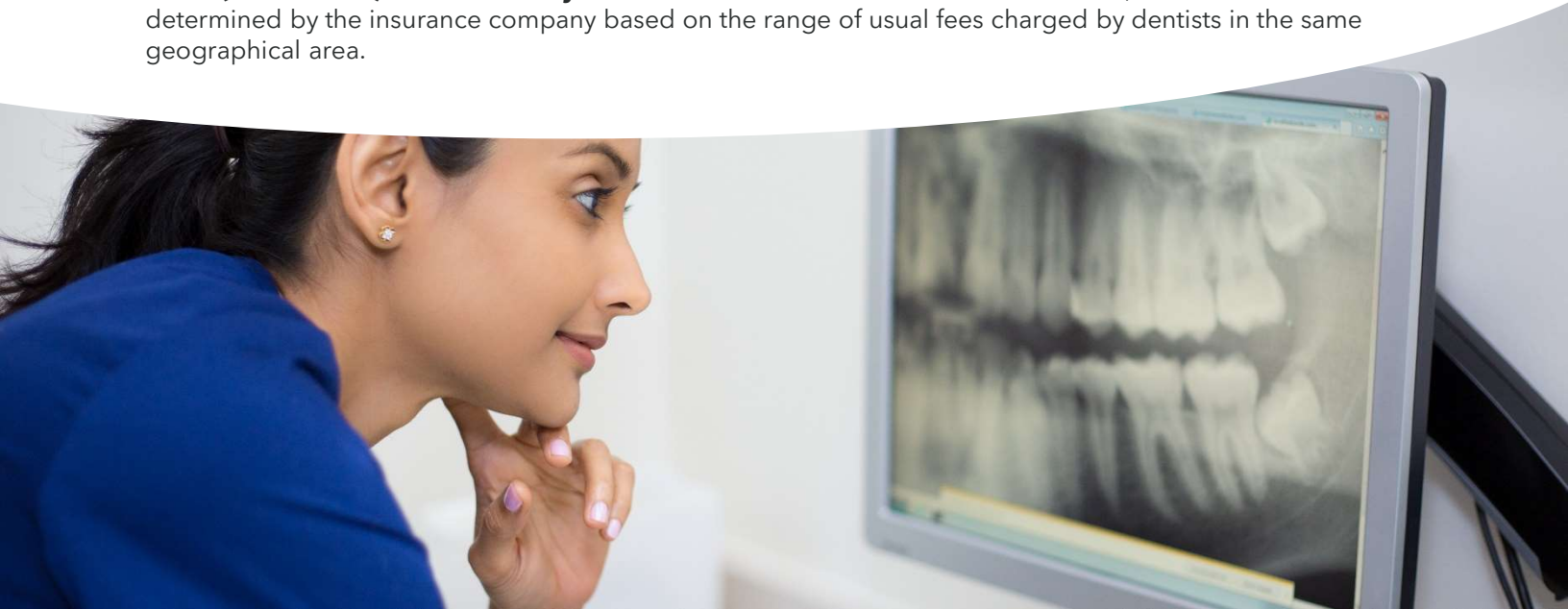
To locate an in-network provider please visit [Cigna.com](http://Cigna.com)

	Cigna DPPO - Base	Cigna DPPO - Buy-Up
	In-network	In-network
<b>Deductible</b> (per calendar year)		
Individual / Family	\$50 / \$150	\$50 / \$150
<b>Benefit Maximum</b> (per calendar year; Preventive, Basic, and Major Services combined)		
Individual / Family	\$1,000	\$2,000
<b>Covered Services</b>		
Preventive Services (oral exams, cleanings, routine x-rays, etc.)	No charge	No charge
Basic Services (oral surgery)	20%	20%
Major Services (root canal, dentures, repairs, crowns/inlays/outlays, etc.)	50%	50%
Ortho (Child(ren) under 19)	N/A	50% \$2,000

**Coinurance percentages shown in the above chart represent what the member is responsible for paying.** If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.

**Balance Billing** is when an out-of-network provider bills you for the difference between the providers charge and the usual and customary amount. For example, if the out-of-network provider's charge is \$100 and the usual and customary amount is \$70, the out-of-network provider may bill you for the remaining \$30. An in-network provider may NOT balance bill you for the remaining \$30 for an in-network service.

**Usual (Reasonable) and Customary** or sometimes referred to as **Allowed Amount**, the cost of a service is determined by the insurance company based on the range of usual fees charged by dentists in the same geographical area.



# Vision Plan



## Cigna Vision Plan

The Cigna vision plan gives you the freedom to seek care from the provider of your choice. However, you will maximize your benefits and reduce your out-of-pocket costs if you choose a provider who participates in the EyeMed Vision network.

To locate an in-network provider please visit [eyedoctorlocator.eyemedvisioncare.com/Cigna](http://eyedoctorlocator.eyemedvisioncare.com/Cigna).

Cigna Vision PPO		
	In-network / Out-of-network	Out-of-network Reimbursement
<b>Exam</b> (once every 12 months)	\$10	Up to \$45
<b>Materials Copay</b>	\$20	N/A
<b>Lenses</b> (once every 12 months)		
Single Vision	No charge after materials copay	Up to \$32
Lined Bifocal		Up to \$55
Lines Trifocal		Up to \$65
Lenticular		Up to \$80
<b>Frames</b> (once every 24 months)	\$130 allowance + 20% off remaining balance	Up to \$71
<b>Contact Lenses</b> (once every 12 months; in lieu of glasses)	\$130 allowance	Up to \$105



Discussing what might happen to your family if you were not around to provide for them financially isn't an easy conversation to have, but it is necessary. Life and AD&D benefits provide financial assistance in an absence and can help your appointed beneficiary plan for the unexpected. Having a life benefit should give you comfort in knowing that those who depend on you will be provided for. Life insurance provides your named beneficiary(ies) with a benefit in the event of your death.

Accidental Death and Dismemberment (AD&D) Insurance provides specified benefits to you in the event of covered accidental bodily injury that directly causes dismemberment (i.e., the loss of a hand, foot, or eye.). If your death occurs due to a covered accident, both the Life and AD&D benefit would be payable.

## Basic Life / AD&D (Company paid)

RTS provides eligible employees up to 1X their annual base salary, or up to a maximum of \$100,000 of Life and AD&D at NO COST.

You must designate your beneficiaries through the Workday system.

## Voluntary Supplemental Life / AD&D (Employee paid)

In addition to the basic life coverage offered by the company, you have the option to purchase additional coverage for yourself and your eligible family members. Benefit costs are based on age and coverage volume and will be calculated for you through the Workday system.

	Benefit Option	Guaranteed Issue*
Employee	\$10,000 increments to a maximum of \$500,000	\$100,000 (If less than age 65)
Spouse / RDP	\$5,000 increments to a maximum of \$150,000 (not to exceed 50% of your additional life coverage)	\$25,000 (If less than age 65)
Child(ren)	Under age 26 - Up to \$10,000	\$10,000

\*During your initial eligibility period only, you can receive coverage up to the Guaranteed issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.



# Voluntary Disability Insurance



EQUITABLE

RTS offers additional protection coverage for you and your family in case of an accident. These benefits are 100% voluntary through Equitable.

Disability insurance provides benefits that replace part of your lost income when you are unable to work due to a covered injury or illness. These benefits are 100% voluntary through Equitable. Benefit costs are age-rated and will be calculated for you during your enrollment process through Workday.

## Pre-Existing Condition

Benefits will not be paid for any disability which begins in the first 12 months after an employee is insured which is due to the results from a pre-existing condition for which treatment was received in the 3 months prior to the effective date

Voluntary Short-term Disability		Voluntary Long-term Disability	
Benefit Percentage	60%	Benefit Percentage	60%
Weekly Benefit Maximum	\$2,000	Monthly Benefit Maximum	\$10,000
When Benefits Begin	9 <sup>th</sup> day of disability	When Benefits begin	91 <sup>st</sup> day of disability
Maximum benefit Duration	12 weeks	Maximum Benefit Duration	Social Security Retirement Age

# Accident Insurance



EQUITABLE

Where most medical insurance plans only pay a portion of bills, voluntary accident insurance can help. This plan provides benefits for covered accidental injuries, such as falls, sports injuries or other unexpected accidents to help with out-of-pocket expenses incurred.

As a policyholder, you will receive cash payments, via direct deposit or a check in the mail, and can use the money however you see fit. For example, you can use the payment to help cover deductibles or copayments, or for any everyday necessities such as rent or groceries. Coverage through this plan can essentially help cover surprise expenses you may face if injured in an accident.

Accident	
Event: You are traveling and are involved in a car accident and transported to the hospital	
Hospital Admission	+\$1,000
Hospital Confinement (1 day)	+\$200
Ground Ambulance	+\$400
Ankle Fracture (non-surgical)	+\$325
X-ray	+\$25
Concussion	+\$150
Potential Reimbursement	<b>\$2,100</b>

## How does it work?

1. Enroll in accident coverage for you and/or family through RTS's Workday portal
2. In the event of a covered accident, submit a claim through Equitable
3. Payment is made directly to you, and can be used on the incurred medical expenses or as you see fit

For a complete list of services covered, please see the plan details in the Workday portal.

# Cost of Benefits

## Bi-Weekly contributions (26 pay periods)

	Buy-Up Plan PPO \$1,250	Base Plan PPO \$2,500	Comfort Plan PPO \$5,000	HDHP HSA \$3,500
Employee	\$55.38	\$26.33	\$50.77	\$5.00
Employee + Spouse	\$323.08	\$284.40	\$311.54	\$223.25
Employee + Child(ren)	\$286.15	\$247.93	\$274.62	\$194.61
Family	\$489.23	\$400.80	\$461.54	\$314.62

	Low Cigna DPPO	High Cigna DPPO		Vision PPO
Employee	\$0.00	\$3.69	Employee	\$0.00
Employee + Spouse	\$14.37	\$20.77	Employee + Spouse	\$2.97
Employee + Child(ren)	\$17.61	\$25.38	Employee + Child(ren)	\$3.00
Family	\$28.38	\$41.08	Family	\$4.59

### Voluntary Benefit Options

Cost for voluntary benefit vary depending on age, and coverage volume elected. Rate per pay period can be confirmed through Workday upon enrollment.

Supplemental Life & AD&D Insurance -  
Employee  
Spouse  
and Child(ren)

Short-Term Disability  
Long-Term Disability

### Accident

Employee	\$4.25
Employee + Spouse	\$7.33
Employee + Child(ren)	\$8.03
Family	\$11.11



# Employee Assistance Program (EAP)



EQUITABLE

Life is full of challenges and balancing it alone can be difficult. We provide a confidential program dedicated to supporting the emotional health and well-being of our employees and their families. The employee assistance program (EAP) is provided at **NO COST** to you through Equitable in partnership with IBH (Integrated Behavioral Health).

## EAP Benefits

Assistance for you and your household members

**Up to three in-person sessions with a counselor per issue, per year, per individual**

Unlimited toll-free phone access and online resources

**Contact your Employee Assistance Program for 24/7 support, resources & information**

**Online:** [guidanceresources.com](https://guidanceresources.com)

**App:** GuidanceNow

**Web ID:** EQUITABLE3

**Call:** (833) 256-5115

**TDD:** (800) 697-0356

# Emergency Travel Assistance



EQUITABLE

## Support before, during and after travel

You and your dependents are now part of the Emergency Travel Assistance Program provided by AXA Assistance USA, Inc. As a member, you can access a broad range of worldwide travel, emergency medical transportation and concierge services 24 hours a day, 365 days a year.

### Emergency Medical Transportation:

- Emergency medical evacuation
- Medical repatriation
- Return of mortal remains
- Transportation of travel companion
- Transportation of family member to accompany patient
- Escort of dependent children

**Concierge Services:** Make your life simpler and easier. Concierge services are designed to fulfill various travel and entertainment requests, including restaurant and entertainment recommendations, locating available business services, airfare and car rental and much more.

**International Medical Teleconsultation:** With the international medical teleconsultation service, you and your family can receive virtual medical care when traveling abroad.

For minor ailments and conditions, licensed medical practitioners provide medical advice, treatment options, assistance with prescription refills and provider referrals, through your smartphone or tablet.

### Call AXA Assistance if you require:

- Medical and dental referrals
- Emergency medical evacuation or repatriation
- Hospital admission and critical care monitoring
- Return of mortal remains
- Dispatch of prescription medication
- Lost document and luggage assistance
- Emergency cash and bail assistance
- ID theft assistance
- General travel information
- Concierge services

## How to contact:

### Within the United States

(855) 327-1476

### Outside the United States

(312) 356-5980

### Medical Assistance:

- Medical and dental referrals
- Coordination of hospital admission
- Critical care monitoring
- Dispatch of physician
- Dispatch of prescription medication



# Cigna Healthy Rewards

Log into [myCigna.com](https://myCigna.com) and navigate to Healthy Rewards Discount Program or call (800) 870-3470.

## Active&Fit Direct

The Active&Fit Direct program is a flexible, comprehensive low-cost fitness program offered through American Specialty Health Fitness Inc. It's one of America's fastest growing fitness programs. The Active&Fit Direct program's mission is to help you become more active without breaking the bank. To get started go to <https://discoverhealthyrewards.sites.cigna.com>.

Participating Gym Include;

- LA Fitness
- Gold's Gym
- Crunch
- YMCA
- Anytime Fitness
- Snap Fitness
- Chuze Fitness
- Blink Fitness
- Curves
- EOS Fitness

## What's all Included?

- A gym membership to your choice of 12,000+ standard gyms and/or 5,700+ premium exercise studios with 20%-70% discounts on most.
- You can switch gyms or cancel anytime
- Over 9,300 on-demand workout videos so you can work out at home or on the go
- Once enrolled, you can enroll your spouse or domestic partner
- A variety of workout classes available anytime on YouTube and Facebook
- Activity tracking through the Active&Fit Direct Connected tool, which aggregates data from over 250 wear able fitness trackers and apps
- Digital resources and classes
- No-long-term contracts

## How Can I Enroll?

Log in to [myCigna.com](https://myCigna.com) > Wellness > Exercise > Start Savings (under the Healthy Rewards Section)

Once enrolled you will have the ability to print your Active&Fit fitness card or save it to your phone. Take it with you and present it at the gym or studio.

# 401(k) Savings Plan



A consistent savings plan throughout your career is the foundation for security during your retirement years. Resolve Tech Solutions' (RTS) 401(k) plan, administered by Empower Retirement, can be a powerful tool in promoting financial security upon reaching your retirement.

Participating in the Resolve Tech Solutions 401(k) retirement plan is voluntary. All full-time employees, age 21 and over are eligible to participate in the plan after completing 2 months of active employment. Part-Time employees will become eligible after meeting the service requirements.

## Matching Employer Contributions

RTS provides a match of 50% of deferrals up to the first 6% an employee contributes into their 401(k) plan.

You will be able to access your deferrals through your personal and secure Empower login.

## Vesting

You are always 100% vested in the value of your contributions.

The employer discretionary match contribution is immediately 100% vested.

## Pretax 401(k) & Roth (after tax) options

Pretax contributions allow you to reduce your current taxable income. In addition, any earnings on your contributions are tax deferred. When you contribute to the Roth program, you contribute after tax, it does not lower your taxable income.

## Auto Enroll

You will automatically be enrolled at a 6% contribution after the completion of two (2) months of active employment. Your contributions will be disbursed to a managed targeted fund based on your retirement date. To change your deferral election and update your investment options, login to your empower portal.

## Investment Advice & Resources

Please click on the [resources | intelligents](#) link for access to financial resources and advice throughout the year. If you need any assistance on your 401(k) you can contact them at 877-680-4015.

You contribute	RTS 401(k) Match
1%	0.5%
2%	1%
3%	1.5%
4%	2%
5%	2.5%
6%+	3%

## Investment Options

You may direct your contributions to any of the investments options offered within the RTS 401(k) plan.

Changes to your investments can be made directly through the Empower website at [www.empowermyretirement.com](http://www.empowermyretirement.com) or by calling 800-338-4015. Either method is available 24 hours a day, 7 days a week.

**Enrollment is done directly through your Empower portal at [empower-retirement.com](http://empower-retirement.com) or by calling (800) 338-4015.**



## 2024 RTS Benefits Guide

For more information or questions

Reach out to  
[\*\*Benefits@resolvtech.com\*\*](mailto:Benefits@resolvtech.com)