



Your Benefits

January 1 - December 31, 2015

Digital**Risk**®

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Dear Team Member:

As a team member of the Digital Risk community, you may participate in a wide range of group benefits designed to:

- Promote the health and wellness of you and your family;
- Protect your income while you are working;
- Build financial security for retirement; and
- Help you balance your personal responsibilities and work life.

Benefit programs give you important financial protection when you need it most. You may not think about your benefits every day — you expect them to be there when you need them. Enrolling in benefit plans for you and your family is quick and easy.

Please spend a few minutes to review the benefit programs that Digital Risk offers and choose the plans that are right for you. Your next opportunity to make changes is within 30 days of a qualified Family Status Change or during the next Annual Enrollment period. If you have questions about the benefits please contact our Employee Benefits Hotline (1-800-394-6111).

This Benefit Options guide is designed to provide a high level overview of the benefits that are offered to you. In all cases, the plan provisions and benefits are governed by the plan descriptions and contracts that can be found on the Digital Risk Benefit Portal.

Digital Risk reserves the right to modify, change, revise, amend or terminate these benefits plans at any time.

Enrollment Guidelines

Benefits Eligibility

Who is Eligible for Benefits?

All full-time benefits-eligible employees who regularly work 30 or more hours per week are eligible for coverage on the first of the month following 30 days of employment.



Dependent Eligibility

An eligible dependent is defined as a covered employee's legal spouse or a dependent child of the employee or employee's spouse. A dependent child is defined as:

- A biological child
- A step-child
- A legally adopted child
- A child placed for adoption
- A child for whom legal guardianship has been awarded to the covered employee or the employee's spouse
- Unmarried children of any age who are disabled, not self-supporting due to a mental or physical handicap or disability, and who are dependent on the subscriber for support.

Eligibility for dependent children varies by coverage:

- **Medical:** Children can be covered through the end of the calendar year in which they reach age 26 regardless of student or marital status.
- **Dental & Vision:** Children can be covered through the end of the calendar year in which they reach age 26 regardless of student status.
- **Dependent Child Life Insurance:** Unmarried dependent children can be covered through their 19th birthday if they are not full-time students. If unmarried and a full-time student, coverage is available up to 26 years of age.

Qualifying Status Change Events

Coverage elections made at Annual Enrollment cannot be changed until the next Annual Enrollment period. The only exception to this IRS Section 125 Rule is if you experience a "Qualifying Event." A Qualifying Event allows you to make a change to your benefit elections mid-year.

Examples of Qualifying Events include, but are not limited to:

- Marriage
- Divorce or legal separation
- Birth, adoption or legal custody of a dependent child
- A change in your spouse's employment status
- Loss of other group insurance coverage
- Death



If you have a qualified status change, you must access Employee Self Service (<http://www.explainmybenefits.biz/digitalrisk/>) within 30 days of the event to make changes to your benefit elections. **Note:** An employee or eligible dependent may prospectively revoke an election mid-year in certain conditions related to the availability of coverage through the Marketplace (Exchange). Retroactive changes are not permitted.

Note: If you or an eligible dependent experiences a change in Medicaid or CHIP Coverage, you may make changes to your coverage within **60** days of the event.

Medical Insurance

Cigna

Group: 337667

www.cigna.com

1-800-244-6224



The company offers you and your eligible dependents the opportunity to enroll in one of four health plans provided by Cigna: Basic OAPIN, Enhanced OAPIN, OAP (POS), and High Deductible Health Plan (HDHP) with optional Health Savings Account (HSA).

The Basic or Enhanced OAPIN Plans are not offered in Alabama, Oklahoma, Puerto Rico, Utah, or Rhode Island.



If you elect the Basic OAPIN, please review the Network Information Insert.

Digital Risk offers you the opportunity to purchase supplemental products to help pay for expenses that your medical plan may not cover. Information is available on page 12 of this guide.

	Basic OAPIN / LocalPlus	Enhanced OAPIN
Network Access	In-Network Only	In-Network Only
Calendar Year Deductibles (CYD)		
Individual/Family	<i>Only applies to services with "CYD" below</i>	
	\$5,000 / \$10,000	\$3,000 / \$6,000
Basic Plan Information	You Pay	You Pay
Coinsurance	20%	20%
Out-of-Pocket Maximum (Individual/Family)	Includes all covered expenses \$6,600 / \$13,200	Includes all covered expenses \$5,000 / \$10,000
Professional Services		
Primary Care Physician (PCP) Office Visits	\$40	\$35
Specialist Office Visits	\$80	\$70
Preventive Care Visits	\$0	\$0
Independent Lab / X-Ray	\$0	\$0
Outpatient Complex Imaging (MRI, MRA, CT, & PET Scans)	\$300 per scan	\$250 per scan
Facility Services		
Inpatient Hospitalization	CYD + 20%	CYD + 20%
Outpatient Surgery	CYD + 20%	CYD + 20%
Urgent Care Center	\$75	\$50
Emergency Room (waived if admitted)	\$400	\$400
Pharmacy		
Pharmacy Deductible	N/A	N/A
Retail (up to 30 days)		
Generic	\$10	\$10
Preferred Brand	\$30	\$40
Non-Preferred Brand	\$50	\$60
Specialty	20%	N/A
Mail Order (up to 90 days)		
Generic	\$25	\$25
Preferred Brand	\$85	\$100
Non-Preferred Brand	\$145	\$150
Specialty	20%	N/A

Note: This is a summary of your benefit options. Please refer to the plan descriptions and contracts available on the Benefit Portal for complete descriptions.

Medical Insurance



The OAP (POS) and HDHP with HSA plans offer in- and out-of-network benefits, though you will experience significantly higher benefit levels if you use in-network providers. **If you go out-of-network, balance billing (additional charges) will apply; these do not count towards, and are in addition to, your out-of-pocket maximum.**

The HDHP may be paired with a Health Savings Account (HSA), which allows you to contribute tax-free dollars into an account to pay for qualified health expenses. Please see pages 6-7 for additional information on this benefit.


	OAP (POS)		HDHP with HSA	
Network Access	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Year Deductibles (CYD)				
Individual/Family	Only applies to certain services, see CYD below \$1,500 / \$3,000 \$3,000 / \$6,000		Applies to all services except preventive care \$2,000 Single \$4,000 Single \$4,000 Family \$8,000 Family	
Basic Plan Information				
	You Pay		You Pay	
Coinsurance	20%	40%	20%	40%
Out-of-Pocket Maximum (Individual/Family)	Includes all covered expenses \$3,000 / \$6,000 \$6,000 / \$12,000		Includes all covered expenses \$3,000 / \$6,000 \$6,350 / \$12,700	
Professional Services				
Primary Care Physician (PCP) Office Visits	\$30	CYD + 40%	CYD + 20%	CYD + 40%
Specialist Office Visits	\$50	CYD + 40%	CYD + 20%	CYD + 40%
Preventive Care Visits	\$0	CYD + 40%	\$0	CYD + 40%
Independent Lab / X-Ray	\$0	CYD + 40%	CYD + 20%	CYD + 40%
Outpatient Complex Imaging (MRI, MRA, CT, & PET Scans)	CYD + 20%	CYD + 40%	CYD + 20%	CYD + 40%
Facility Services				
Inpatient Hospitalization	CYD + 20%	CYD + 40%	CYD + 20%	CYD + 40%
Outpatient Surgery	CYD + 20%	CYD + 40%	CYD + 20%	CYD + 40%
Urgent Care Center	\$50	\$50	CYD + 20%	Network CYD + 20%
Emergency Room (waived if admitted)	\$200	\$200	CYD + 20%	Network CYD + 20%
Pharmacy				
Pharmacy Deductible	N/A	N/A	Medical deductible must be met before coinsurance applies	
Retail (up to 30 days)				
Generic	\$10	40%	CYD + 20%	CYD + 40%
Preferred Brand	\$30			
Non-Preferred Brand	\$50			
Mail Order (up to 90 days)				
Generic	\$25	40%	CYD + 20%	CYD + 40%
Preferred Brand	\$75			
Non-Preferred Brand	\$125			
Health Savings Account				
Eligible Expenses	Not Eligible		Available funds may be used to pay for deductible and coinsurance	


The Summary of Benefit Coverage (SBC) required by Health Care Reform is available on the Benefit Portal. Please contact The Employee Benefits Hotline if you have any questions.

Health Savings Account (HSA)



Optum Bank

 www.optumbank.com

 1-866-234-8913

Employees who elect the Cigna High Deductible Health Plan (HDHP) may* be eligible to open a Health Savings Account with Optum Bank. A Health Savings Account (HSA) works with a HDHP, and lets you set aside a portion of your paycheck on a pre-tax basis to help you pay for qualified health expenses that are not paid for by your plan. It can also help you plan for future health expenses.

You can defer up to **\$3,350** if you have single coverage or **\$6,650** if you cover yourself and any dependents, on a pre-tax basis in 2015. If you are age 55 or older, you may defer an additional \$1,000 per year as a “catch-up” contribution.

Like a regular bank account, only money you have actually contributed to your HSA is available for withdrawal.

A Health Savings Account (HSA):

- **Is yours.** Funds in your HSA account stay with you, even if you change jobs or leave the company. If you are no longer covered by a qualified HDHP, your account stays active and you can use any remaining funds for qualified health expenses.
- **Reduces your taxable income.** Funds are tax-free both when you put them in, and when you take them out to cover **qualified health expenses**. Qualified expenses generally include medical deductibles and care, dental care, vision care, and prescription drugs. You may access a list of qualified health expenses by clicking [here](#) (see below for URL).
If you use money in your HSA account for non-qualified expenses, the funds will become taxable income and penalties may apply.
- **Provides investment options.** Once your balance reaches a certain balance, you may choose to invest a portion of your additional dollars into mutual funds giving you the opportunity for tax-free earnings. *Note: There are risks associated with the investment of funds in your HSA. Please contact Optum Bank for additional details.*
- **Helps you plan for the future.** Until you turn 65, withdrawals used for eligible expenses are tax free. After you turn 65, or if you become disabled, your HSA account becomes similar to a regular Individual Retirement Account (IRA). Withdrawals for non-eligible expenses will be taxed at your regular tax rate but you will not have any additional penalties.

Because the money in your HSA is your money, you can choose whether to pay for qualified expenses either from your HSA or out of your pocket. Some people choose not to pay all of their expenses from their HSA so they can save tax-free money for future expenses and so the money in their HSA can grow.

*HSA and Medicare:

You are **not eligible** for an HSA after you have enrolled in Medicare. If you had an HSA before you enrolled in Medicare, you can keep it. However, you cannot continue to make contributions to an HSA after you enroll in Medicare. If you received any Veterans Administration benefits in the past three months, you are also ineligible to contribute to an HSA.

Please note: Even if you are not eligible for an HSA, you may still enroll in the HDHP with Digital Risk. If you are not eligible for an HSA and enroll in the HDHP, you may contribute to a Health Care FSA.

Qualified Expenses List URL:

www.optumbank.com/using-your-health-savings-account/withdrawals-payments/qualified-medical-expenses/

Health Savings Account—Examples



Let's look at two examples to see how employees can use a Health Savings Accounts to save for current and future healthcare expenses.

1

Mary enrolled in the HDHP with **individual** coverage. She may contribute up to \$3,350 into her HSA on a pre-tax basis. Because her deductible is \$2,000, she chooses to contribute **\$2,500** to cover her deductible plus an additional \$500 in expenses.

During the year, Mary has in-network health care expenses of \$1,000 that are not considered preventive care. Because her deductible is \$2,000, Mary is responsible for all of these costs. She chooses to pay only \$600 of these expenses from the money in her HSA because she wants to begin saving for her future healthcare needs. She pays the remaining \$400 out-of-pocket.

In this scenario, Mary begins next year with \$1,900 saved up to help pay for qualified medical expenses. She also saved an *estimated* \$775 in annual federal taxes.

Mary's Expense Summary	
HSA Contribution	\$ 2,500
Total Non-Preventive Expenses	\$ 1,000
Health Plan Pays	\$ 0
Paid from the HSA	\$ 600
Remaining out-of-pocket expenses	\$ 400
Amount remaining in the HSA to carry-over to next year	\$ 1,900
Estimated reduction in annual taxes (31%: Federal Income + FICA)*	\$ 775

**Mary earns \$40,000 per year, so her estimated income taxes are 31%.
(\$775 is 31% of \$2,500)*

2

John enrolled in the HDHP with **family** coverage for himself, his wife, and two children. He may contribute up to \$6,650 into his HSA on a pre-tax basis. John chooses to contribute **\$5,000** to cover his family deductible of \$4,000 plus an additional \$1,000 in expenses.

During the year, John and his family have in-network health care expenses of \$6,000 that are not considered preventive care. John's deductible is \$4,000, so he is responsible for all of these costs. The health plan pays 90% of the remaining \$2,000 (or \$1,800), so John is also responsible for the remaining \$200.

In all, John is responsible for \$4,200 in medical expenses for the year. He chooses to pay for all of these expenses with his HSA.

In this scenario, John and his family begin next year with \$800 saved up to help pay for qualified medical expenses. He and his family also saved an *estimated* \$1,550 in annual federal taxes.

John's Expense Summary	
HSA Contribution	\$ 5,000
Total Non-Preventive Expenses	\$ 6,000
Health Plan Pays	\$ 1,800
Paid from the HSA	\$ 4,200
Remaining out-of-pocket expenses	\$ 0
Amount remaining in the HSA to carry-over to next year	\$ 800
Estimated reduction in annual taxes (31%: Federal Income + FICA)*	\$ 1,550

**John earns \$40,000 per year, so his estimated income taxes are 31%.
(\$1,550 is 31% of \$4,000)*





Important: If your HSA Account is effective January 1, 2015, you may only use the funds in your account to pay for expenses that were incurred on or after January 1, 2015.

Flexible Spending Accounts (FSA)

TASC

 www.tasconline.com

 1-800-422-4661

 608-245-3623



Flexible Spending Accounts (FSA) give you an opportunity to use pre-tax dollars deducted from each paycheck to pay for your eligible health care and dependent care expenses. You benefit by reducing your taxable income and not having to pay FICA or Federal withholding taxes on your contributions.

Note: You do not have to be enrolled in the medical plan through Digital Risk to have a Flexible Spending Account.

Health Care FSA

If you are enrolled in the Enhanced OAPIN, Basic OAPIN, or OAP (POS) medical plan, you may use your Health Care FSA to pay for various eligible out-of-pocket medical expenses including:

- Deductibles, copayments and coinsurance related to medical expenses for physician and hospital services
- Prescription drug expenses
- Diabetic supplies, including insulin and test strips
- Dental and orthodontic expenses
- Vision care expenses, including eye exams, prescription eyeglasses and contact lenses

The entire amount you elect to contribute is available on the first day of the plan year, allowing you to receive the care you need without worrying about the availability of your funds.

The annual maximum contribution for 2015 is \$2,000 per employee per plan year.

NOTE: If you are enrolled in the HDHP plan and eligible to contribute to a Health Savings Account (HSA), you are not eligible for a Health Care FSA. You may use the funds in your HSA to pay for eligible health expenses.



Not sure if a Health or Dependent Care expense qualifies as 'eligible'?
Visit tasconline.com and select "eligible expenses" under the login area.

Dependent Care FSA

Digital Risk offers a Dependent Care FSA to pay for qualifying dependent care expenses with pre-tax money. These expenses must be incurred on behalf of a "Qualifying Individual" and be necessary for you and your spouse (if you're married) to look for work, be gainfully employed, or attend school full-time. The annual maximum contribution is **\$5,000**, or **\$2,500** for married associates filing separately. Only the amount you've contributed to your account year-to-date is available for reimbursement at any given time. For additional information on this benefit, please contact the Employee Benefits Hotline.




Dental Insurance

Cigna

 **Group:** 3337667

 www.cigna.com

 1-800-244-6224



You and your eligible dependents may enroll in one of two dental plans offered through Cigna. You may receive covered services from any dentist you choose; however, you may save money by electing to use a dentist in the Cigna network. Network dentists will not “balance bill” you for charges that are in excess of the Cigna network fee schedule. You can locate a participating dentist in your area on www.cigna.com by clicking “Find a Doctor”. Please note, Cigna has two tiers of dentists. You will experience the most cost savings by using a DPPO Advantage dentist. If a DDPO Advantage dentist is not available, a DPPO dentist is your next best option for cost savings. This information is available on www.cigna.com. **(Cigna does not have a dental network available in Montana, South Dakota, or USVI).**

	Basic plan			Enhanced plan		
Network Access	In-Network Advantage	In-Network DPPO	Out-of-Network	In-Network Advantage	In-Network DPPO	Out-of-Network
Benefit Maximum/Year	\$1,000	\$1,000	\$1,000	\$2,000	\$2,000	\$2,000
Your Benefit Plan	You Pay			You Pay		
Calendar Year Deductible-CYD	\$50 / \$150	\$50 / \$150	\$50 / \$150	\$50 / \$150	\$50 / \$150	\$50 / \$150
Preventive Services (Type I)	0% (no CYD)	20% (no CYD)	20% (no CYD)	0% (no CYD)	0% (no CYD)	0% (no CYD)
Basic Services (Type II)	CYD + 20%	CYD + 40%	CYD + 40%	CYD + 20%	CYD + 20%	CYD + 20%
Major Services (Type III)	CYD + 50%	CYD + 60%	CYD + 60%	CYD + 50%	CYD + 50%	CYD + 50%
Child & Adult Orthodontia						
Benefit	Not Covered			50%	50%	50%
Lifetime Maximum per person	Not Covered			\$2,000	\$2,000	\$2,000
Reimbursement	Fee Schedule	Fee Schedule	Fee Schedule	Fee Schedule	Fee Schedule	90% U&C
Can my dentist balance bill?	No	No	Yes	No	No	Yes


In-network costs are always based on the fees that Cigna negotiates with the dentist, this is your lowest possible cost for care. 90% UCR (out-of-network on the Enhanced Plan) means that Cigna pays your dentist based on what 9 out of 10 dentists in your area charge. Fee Schedule (out-of-network on the Basic Plan) means that Cigna pays the same dollar amount whether you go in or out network. In either case, out-of-network dentists are able to bill you for the difference between what Cigna pays and what they charge (Balance Billing). If you use an Advantage or DPPO dentist, however, you will not be balance billed for care.

Vision Insurance

Advantica

 **Group:** DRFL

 www.advanticaeyecare.com

 1-866-425-2323



You and your eligible dependents have the opportunity to enroll in the Vision program through Advantica. To locate a participating provider in your area, please visit www.advanticaeyecare.com. Your plan is the Select Plus 150 plan.

	Participating Provider (You Pay)	Non-Participating Provider (Reimbursement)	Frequency
Vision Exam with dilation	\$10	Up to \$40	12 Months
Lenses (Single/Bifocal/Trifocal) Other Options	\$10 Additional copays apply	Up to: \$20/\$40/\$60 See Summary	12 Months
Frames	\$10*	Up to \$60	12 Months
Contact Lenses (in lieu of glasses)	Exam: \$40 Allowance \$150 Allowance	No Reimbursement Up to \$80	12 Months
Contact Lenses (medically necessary)	\$250 Allowance	Up to \$250	12 Months
Laser Vision Correction	Discount Pricing	No Reimbursement	-

* No Copay if included with Eyeglass Lenses; paid in full on Special Frame Selection; outside of the Selection, \$150 allowance (less applicable copay)

Life Insurance and AD&D

Lincoln Financial Group

For questions, contact the Employee Benefit Hotline or [Employee Self Service](#)



Basic Life / AD&D Insurance

Digital Risk provides Basic Group Life and Accidental Death and Dismemberment (AD&D) Insurance to all eligible employees at no cost to you. Hourly Employees receive \$25,000 in coverage; Salary Employees receive \$50,000. This policy will reduce to 50% of the original value at age 70. In addition, if you leave Digital Risk, you are able to convert this policy. Employees are able to apply for and purchase voluntary life insurance in addition to the Basic policy provided by Digital Risk. Life insurance begins on the first day of the month following 30 days from the date of hire.



Enrollment in the Basic Life/AD&D plan is automatic; however please be sure to complete the beneficiary section on the Benefit Portal.

Supplemental Life Insurance

Eligible employees may purchase supplemental Life Insurance for yourself and your eligible dependents through Lincoln Financial Group. Employee and spouse coverage rates vary depending on your age and benefit amount; cost information is available in the Benefit Portal.

- **Employee Coverage** – As an employee, you may apply for supplemental Life Insurance in increments of \$10,000 up to 7 times your annual salary to a maximum of \$500,000. Evidence of Insurability (EOI) and approval by Lincoln Financial will be required for coverage in excess of \$200,000.
- **Spouse Coverage** – If you purchase supplemental life insurance for yourself, you may apply for supplemental Life Insurance for your spouse in increments of \$5,000. The amount you purchase may not exceed 50% of the employee's coverage amount up to a maximum of \$250,000. Evidence of Insurability (EOI) and approval by Lincoln Financial will be required for coverage in excess of \$40,000.
- **Child(ren) Coverage** – As an employee, you may purchase supplemental Life Insurance in the amount of \$10,000 for your child(ren).

Evidence of Insurability (EOI) - If you elect to enroll as a newly eligible employee, you are guaranteed up to \$200,000 of Voluntary Life Insurance coverage with *no Evidence of Insurability (EOI) required*. EOI and approval by Lincoln Financial Group will be required for any amount of Employee coverage requested over \$200,000. During the company's defined Annual Enrollment period, you or your spouse may elect up to two increments on a guaranteed acceptance basis, provided you or your spouse have not been previously declined for coverage.

Trustmark Universal Life with Long Term Care

Trustmark



www.trustmarksolutions.com



1-800-918-8877



Trustmark Universal Life with Long Term Care is a permanent life insurance policy that is designed to match your needs throughout your lifetime. It pays a higher death benefit during your working years when expenses are high and you need maximum protection. Coverage is available for employees, spouses, and children.

- Priced to remain the same cost to you until age 100
- The death benefit reduces at age 70 when the need for life insurance typically decreases
- The Living Benefit, Long Term Care, never reduces and is 4% of the original death benefit per month for up to 25 months.

If you use the Long Term Care benefit, your death benefit amount does not reduce

Your cost will vary depending on your age and the coverage elected; your Benefit Enrollment Counselor can assist you in determining your cost for coverage.

Claims assistance for Universal Life provided by Explain My Benefits (EMB): 321-296-8060, Option 1 | www.explainmybenefits.biz

Disability Insurance

Lincoln Financial Group

For coverage questions, contact the Employee Benefit Hotline or [Employee Self Service](#)



Short-Term Disability Benefits

Claim questions? Call 1-800-423-2765

If you are a regular full-time benefits-eligible employee earning at least \$15,000 annually, you may purchase voluntary Short-Term Disability (STD) insurance through Lincoln Financial Group. STD coverage provides income replacement benefits to you in the event you are unable to work due to a covered injury or illness, not work-related. Digital Risk, as two STD plans for you to choose from:

- **Basic STD Plan:** Benefits begin on the 8th consecutive day for an injury (accident) or the 15th consecutive day for an illness.
- **Enhanced STD Plan:** Benefits begin on the 1st day for an injury (accident) or the 8th consecutive day for an illness.

Both plans pay 60% of your weekly income (excluding bonuses and overtime pay) to a maximum of \$1,000 per week. Benefits begin at the end of the elimination period listed above, and continue while you are disabled up to 26 weeks. Pre-existing limitations do apply for newly enrolled employees. Your cost for coverage will depend on your salary and your coverage election. Please refer to the Benefit Portal for a complete description of the STD plans.

Long-Term Disability Benefits

Claim questions? Call 1-800-423-2765

If you are unable to work after 180 days due to a disability caused by the same or a related sickness or injury, Long-Term Disability (LTD) coverage can provide continuing income protection to you. LTD is available to full-time benefits-eligible employees.

If you have elected this benefit and you meet the requirements as set forth by Lincoln Financial, you may be eligible to receive up to 60% of your pre-disability earnings, up to a maximum of \$10,000 per month. Your pre-disability earnings are based on your average salary or base pay. If you are unable to perform the duties of your own occupation for 24 months, LTD benefits may be payable until age 65 or longer (depending when you become disabled). If you are eligible for income from other sources such as Social Security and/or Worker's Compensation, LTD benefits are adjusted so that the maximum monthly benefits you receive from all sources does not exceed the allowable payment amount.

Additional Benefits



Digital Risk provides all employees with a variety of "additional benefits". Details are available on the Benefit Portal.


RDV Sportsplex Gym Membership:

Digital Risk currently has a partnership with RDV Sportsplex. Employees may enroll in a discounted monthly gym membership with no enrollment fee or contract. All employees are eligible to enroll upon hire. For additional information, please log onto the Benefit Portal or speak with an RDV Specialist.

401(k) Retirement Savings

Transamerica

 www.TA-Retirement.com

 1-800-401-8726



Digital Risk offers all eligible employees the ability to contribute funds to a 401(k) retirement plan. There is no waiting period for this plan; you may enroll and begin contributions after your first paycheck.

Go to www.TA-Retirement.com/myconversion and enter the site ID "Mphasis Corporation" - Our website provides you with 24-hour access to conversion information including notices, investment choices, and upcoming events. Contact Center (800) 401-8726 - Transamerica representatives are available to assist and answer questions from 8 a.m. to 8 p.m., Monday through Friday, Eastern Time.

Individual Worksite Options




Digital Risk provides employees with the opportunity to purchase supplemental products through Trustmark, Transamerica, and APL. These products are voluntary and are paid for 100% by the employee. Highlights for all plans include:

- Ownership – Policies are fully portable and belong to you if you leave Digital Risk (same price, same plan)
- Benefits are payroll deducted
- Level premiums – Rates do not increase with age
- Cash benefits are paid directly to you, not to a hospital or to a doctor
- Benefits are paid regardless of any other coverage you may have
- Guaranteed Renewable
- Designed to provide additional cash flow to assist with out-of-pocket medical costs and other bills

Claims assistance for all Worksite options provided by Explain My Benefits (EMB): 321-296-8060, Option 1 | www.explainmybenefits.biz

Trustmark Accident Plan

 www.trustmarksolutions.com

 1-800-918-8877

Pays cash directly to you if you are injured in an accident on or off the job (24/7 coverage).

Wellness benefit is included. Benefits are paid for:

- Fractures and Dislocations
- Tendon/Ligament Tears
- Burns and Stitches
- Hospitalization
- Medical Expenses & Various Medical Treatments
- Doctor visits and more

Your cost for coverage will vary by state and is available during the online enrollment process.




Wellness Benefit!

Pays **\$100** per member up to **two** times each year for wellness screenings!

Transamerica Cancer Plan

 www.transamericaemployeebenefits.com

 1-888-763-7474

Cancer Insurance pays benefits directly to you if you are diagnosed with cancer. Some benefits pay by the day or treatment, while others reimburse you for expenses you incur.


- **“First Occurrence”** Benefit pays cash to you upon diagnosis of internal Cancer.
- Pays additional benefit for a variety of items as treatment progresses such as: Hospitalization, Surgery, Anesthesia, Chemotherapy, Radiation, Bone Marrow / Stem Cell Transplant, and more.
- Employee and family coverage available
- Wellness Benefit Included

Semi-Monthly Cost:	Employee	Employee & Spouse	Employee & Children	Family*
	\$12.93	\$23.39	\$14.75	\$23.39

*Dependents through age 25 can be covered regardless of student status.

APL Hospital Indemnity Plan

 www.ampublic.com

 1-800-256-8606


The Hospital Plan can help offset your out-of-pocket expenses including deductible, coinsurance and copays, and services not covered in your group health coverage for Hospitalization and Outpatient surgery.


This policy is portable via COBRA.

Semi-Monthly Cost:	Employee	Employee & Spouse	Employee & Children	Family
	\$15.12	\$28.19	\$19.93	\$32.42

Employee Assistance Program (EAP)

Cigna

 www.mycigna.com

 1-800-244-6224



To help you and your household members cope with everyday life challenges, stress, family problems, and other personal issues, Digital Risk offers an Employee Assistance Program (EAP) through Cigna.

- Legal and Financial Concerns
- Emotional Support
- Grief, depression, substance use or abuse
- Relationship Struggles
- Parenting Challenges
- Anxiety, stress, work/life balance

All employees who enroll in Cigna Medical coverage through Digital Risk have access to the Employee Assistance Program. Your EAP **free to use**, confidential, and available to **24 hours a day, 7 days a week**. Up to three face-to-face visits are included at no charge; any subsequent visits will go through the mental health benefit in your chosen medical plan. In addition, your EAP provides you with access to a wide range of health and well-being resources though one toll-free telephone number. These resources include health coaching, access to health information, and minor injury/symptom support.

Paid Time Off



Holidays:

Digital Risk observes the following seven holidays. All Full-Time and Part-Time employees are eligible for holiday pay upon hire with no waiting period.

- New Years Day
- Independence Day
- Thanksgiving
- Christmas Day
- Memorial Day
- Labor Day
- Day after Thanksgiving

Vacation/PTO:

Digital Risk believes that annual vacations are necessary to allow you to refresh yourself physically and mentally. Your annual vacation allowance is based on your length of service from the date of full time employment, as shown on the following tables:

Vacation:


<u>Years of Service</u>	<u>Number of Weeks/ Bi-weekly Granting</u>	<u>Maximum Granting Level</u>
Years 0-4	2 weeks / 3:05 hours	Max of 200 hours
Years 5-9	3 weeks / 4:37 hours	Max of 260 hours
Years 10-20	4 weeks / 6:10 hours	Max of 280 hours

Personal Time Off (PTO):

<u>Years of Service</u>	<u>Number of Days/ Bi-weekly Granting</u>	<u>Maximum Granting Level</u>
Years 0-20	6 days / 1:51 hours	Max of 200 hours

Employee Benefits Hotline

Gallagher

 1-800-394-6111

Available 8:30am - 5:00pm EST



Our insurance consultant, Gallagher, has an Employee Benefit Hotline to help our team members understand and get the most from our benefit programs.

Gallagher will help you or a member of your family with:

- Benefit questions - enrollment questions too!
- Solving a problem
- Any claims that you believe haven't been properly paid
- Further clarification on any insurance matters
- Questions regarding a bill sent by a doctor, dentist, lab or hospital
- Questions about your specific benefits selected
- Replacement provider cards
- Dependent coverage questions
- Qualifying event questions
- In-Network Provider Assistance

Important Contacts



Digital Risk provides you with a variety of resources to help you manage your benefits. The table below will help you determine who to contact to get your questions answered and any problems solved.

As a reminder, you are always welcome to contact the individual insurance companies using the contact information located in each section of this guide.

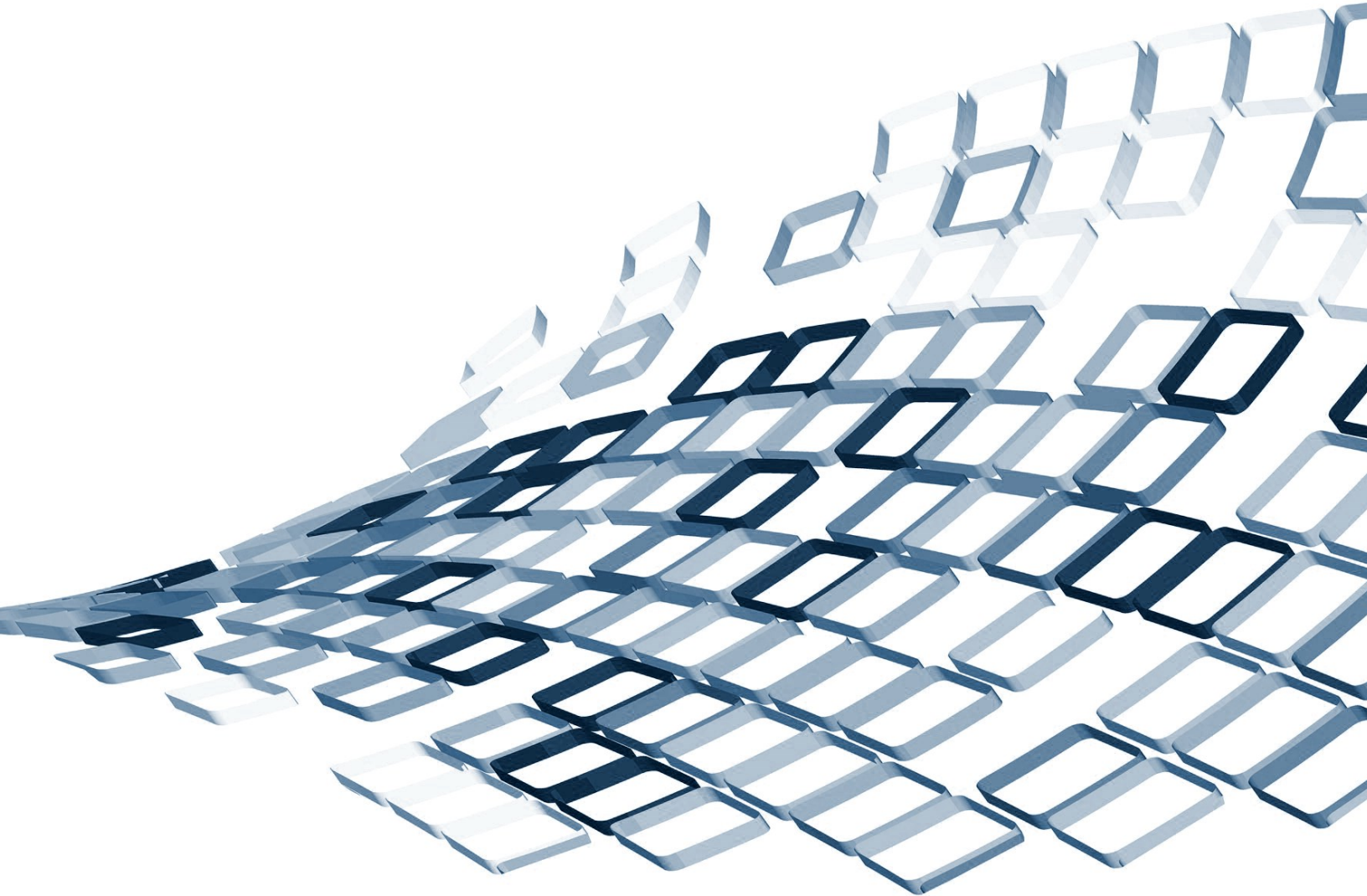
If you need help with or have questions about....	Contact....
Making changes to your benefits (qualifying events)	Employee Self Service: www.explainmybenefits.biz/digitalrisk
Life Insurance Beneficiaries	Employee Self Service: www.explainmybenefits.biz/digitalrisk
View Current Benefits	Employee Self Service: www.explainmybenefits.biz/digitalrisk
Payroll Deductions for Benefits	Payroll@DigitalRisk.com
Insurance Claim Questions (Medical, Dental, Vision)	Employee Benefit Hotline 1-800-394-6111
Finding a network provider	Employee Benefit Hotline 1-800-394-6111
Specific benefit questions	Employee Benefit Hotline 1-800-394-6111
Dependent coverage or eligibility	Employee Benefit Hotline 1-800-394-6111
401(k) Retirement Plan	Transamerica 1-800-401-8726

Employee Deductions



Semi-Monthly Cost for Coverage (24 deductions per year)

Medical Insurance		Total Monthly Premium	Employee Monthly Contribution	Employee Deduction (24 per year)
Basic OAPIN / LocalPlus	Employee Only	\$411.11	\$84.58	\$42.29
	Employee + Spouse	\$880.60	\$339.27	\$169.64
	Employee + Child(ren)	\$839.42	\$308.78	\$154.39
	Employee + Family	\$1,259.50	\$532.44	\$266.22
Enhanced OAPIN	Employee Only	\$455.25	\$178.34	\$89.17
	Employee + Spouse	\$975.08	\$496.40	\$248.20
	Employee + Child(ren)	\$929.49	\$467.53	\$233.77
	Employee + Family	\$1,394.60	\$582.78	\$291.39
OAP (POS)	Employee Only	\$549.13	\$210.42	\$105.21
	Employee + Spouse	\$1,175.99	\$741.32	\$370.66
	Employee + Child(ren)	\$1,120.99	\$689.04	\$344.52
	Employee + Family	\$1,681.86	\$1,133.67	\$566.83
HDHP with Optional HSA	Employee Only	\$459.24	\$148.62	\$74.31
	Employee + Spouse	\$984.05	\$498.01	\$249.01
	Employee + Child(ren)	\$938.01	\$466.38	\$233.19
	Employee + Family	\$1,407.59	\$615.25	\$307.62
Dental Insurance		Employee Monthly Contribution		Employee Deduction (24 per year)
Basic Plan	Employee Only	\$23.36		\$11.68
	Employee + Spouse	\$46.90		\$23.45
	Employee + Child(ren)	\$57.12		\$28.56
	Employee + Family	\$80.11		\$40.06
Enhanced Plan	Employee Only	\$30.87		\$15.44
	Employee + Spouse	\$60.52		\$30.26
	Employee + Child(ren)	\$73.70		\$36.85
	Employee + Family	\$103.39		\$51.70
Vision Plan		Employee Monthly Contribution		Employee Deduction (24 per year)
Vision Plan	Employee Only	\$7.93		\$3.97
	Employee + Spouse	\$15.49		\$7.75
	Employee + Child(ren)	\$13.56		\$6.78
	Employee + Family	\$21.19		\$10.60



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