

SummaryofEmployeeBenefits







2024-2025 CA only

About This Guide

Trilliant provides comprehensive employee benefits as part of our total compensation program. Options in cost and plan design are intended to provide you with the opportunity to customize your benefit plan to meet your lifestyle and personal choices, while offering protection, flexibility and security to you and your family. The decisions you make regarding your enrollment in benefits deserves your careful consideration.

Your choices will be in effect for the plan year: 10/1/24 to 9/30/25. You will be able to make changes during the plan year only in the event of an IRS qualified Family Status Change. Be sure to review the plan's covered and non-covered services and any restrictions regarding your choice of providers.

Benefits Eligibility

Regular employees, actively working a minimum of 30 hours per week, are eligible to enroll in the Trilliant Employee Benefits Program on the first of the month following date of hire.

Benefits-eligible employees who do not enroll at the time of their initial eligibility period have the opportunity to enroll in our benefit plans during our annual open enrollment. You may make changes to your benefits, or add or drop your dependents during this time. Mid-plan year changes are not permitted unless you experience an IRS qualified Family Status Change. You must notify Human Resources within 30 days of a change in family status.

Employee Costs for the 2024 - 2025 Plan Year

Please contact the Human Resource department to determine your cost (payroll deduction amounts) for the Medical, Dental, Vision and Voluntary Life coverage.

All employee premium contributions are deducted per pay period on a pre-tax basis.

Medical Plans

 $\underline{PPOPlan!} ndividuals on the CIGNAPPO plans may receive carefrom any provider and/or facility however, CIGNA has negotiated discounted fees with contracted CIGNAN etwork providers. This means that by using in-network provider syou will reduce your out-of-pocket expenses. You are not required to designate a Primary Care Physician (PCP) on this plan.$

HMOPlan!ndividualsenrolledontheClGNAOAPIn-NetworkplanmustselectaPrimaryCarePhysician(PCP)withintheCignaOAPnetworkYourPCPwilkcoordinateyourcareandwillreferyou to specialists within their medical group when necessary. There are no out-of-network benefits under this plan.

<u>KaiserHMO</u>IndividualsenrolledontheKaiserHMOmustselectaPrimaryCarePhysician(PCP)withintheKaisemetworkandutilizeKaiserfacilities(exceptinthecaseofemergencies). YourPCP will coordinate your care and will refer you to specialists within Kaiser when necessary. There are no out-of-network benefits under this plan.

Cigna.	CIGNA Medical Plans			Kaiser	
KAISER PERMANENTE	OAP \$250/90-70 PPO Plan		OAP In-Network Plan	HMO 20 Plan	
Medical Plan Features	In-Network	Out-of-Network	In-Network Only	In-Network Only	
Calendar Year Deductible: Per Person Per Family	\$250 \$750	\$250 \$750	None None	None None	
Annual Out-of-Pocket Max: Per Person Per Family	\$2,500 \$5,000	\$6,500 \$13,000	\$3,000 \$6,000	\$1,500 \$3,000	
Preventive Care: Physical Exams Labs/X-rays/Screenings	\$0 \$0	30% after ded. 30% after ded.	\$0 \$0	\$0 \$0	
Office Visits (PCP Specialist):	\$20 \$20	30% after ded.	\$20 \$40	\$20 \$20	
Outpatient Lab & X-ray: Advanced Imaging:	\$0 10% after ded. 10% after ded.	30% after ded. 30% after ded.	\$0 \$0	\$10 \$50	
Hospital Medical Services: Inpatient Outpatient	10% after ded. 10% after ded.	30% after ded. 30% after ded.	\$250perdayupto3days \$125 per procedure	\$250 per Admission \$100 per Procedure	
MentalHealth/SubstanceAbuse: Inpatient Outpatient	10% after ded. \$20	30% after ded. 30% after ded.	\$250perdayupto3days \$40	\$250 per Admission \$20 per Visit	
Emergency Room Visit:	10% after plan deductible		\$150 (waived if admitted)	\$50 (waived if admitted)	
Retail Prescription Drugs (Rx): Tier 1 Tier 2 Tier 3	(Up to 30 day supply) \$10 \$30 \$50	Not covered	(Up to 30 day supply) \$15 \$30 \$50	(Up to 30 day supply) \$10 Generic \$30 Brand-Name N/A	

Dental & Vision Plans

GUARDIAN'	Guardian Dental Guard Preferred PPO		
Services	In-Network	Out-of-Network	
Calendar Year Deductible	\$0 / Individual \$0 / Family	\$50 / Individual \$150 / Family	
Preventative Cleanings, Exams, X-Rays	100% No deductible	100% of UCR No deductible	
Basic Services SimpleExtractions,Diagnostics	100% No deductible	80% of UCR After deductible	
Major Services Crowns,Bridges,Dentures	60% No deductible	50% of UCR After deductible	
Annual Maximum	\$1,500 per Individual*		
OrthoServices(ChildOnly)	50%	50% of UCR	
OrthoLifetimeMaximum	\$1,500 per Child		
Non-participatingdentistscanbillyouforchargesabovetheUCR(Usual,Customary&Reasonable			

Non-participating dentists can billy out for charges above the UCR (Usual, Customary & Reasonable) amount covered by the dental plan (balance billing). To maximize your benefits, we encourage yout ovisit a participating provider. *Maximum Rollover feature is available-see plan document.

sion Care

VSP (Vision Service Plan)

	VSI (VISIOITS ET VICET IUIT)		
Services	In-Network*		
Copays	\$10 for Exam \$10 Materials		
Exam (every 12 months)	Covered at 100% after copay		
Lenses (every 12 months) (per pair)	Covered at 100% (Single, Bifocal, Trifocal, Lenticular)		
Frames (every 12 months)	\$150 Allowance		
Contact Lenses Elective (in lieu of glasses)	\$130 Allowance		

*VSPProviderNetwork: Choice-callMemberServices at (800) 877-7195 for Out-of-Network coverage and benefit details.

Employer-Paid Benefits

Trilliant is pleased to offer the following Life/AD&D and Disability benefits to eligible employees. *The premiums for these benefits are paid 100% by Trilliant*.

Life/AD&D	Short Term Disability	Long Term Disability
1 x Annual Salary	60% of weekly earnings up to	60% of monthly earnings up to
up to a \$250,000 Maximum	\$2,309 maximum / week	\$9,000 maximum / month
(GuaranteelssueAmount:\$250,000)	(7 day elimination period)	(180 day elimination period)



Employee-Paid Benefits

Trilliant is pleased to offer the following Voluntary Life/AD&D benefits to eligible employees and dependents. *The premiums for these benefits are paid for 100% by the employee.*

Voluntary Employee Life	Voluntary Spouse Life	Voluntary Child(ren) Life	
Increments of \$10,000 up to a Maximum of \$300,000 or 5 x's your annual salary (Guarantee Issue Amount: \$70,000)	Increments of \$5,000 up to a Maximum of \$50,000 or 50% of employee's Vol. Life amount (Guarantee Issue Amount: \$25,000)	Increments of \$5,000 up to a Maximum of \$10,000 (Guarantee Issue Amount: \$10,00	NEW LIFE

EmployeeAssistanceProgram(EAP)&TravelAssistance

All eligible employees enrolled in the New York Life group Life/Disability benefits have access to a confidential EAP and Travel Assistance program.

- EAPProvidescoveredemployeesandfamilymemberswithconsultationsinformationandreferralstocommunityresourcesforavarietyofconcernsinduding stress, financial advice, depression, relationship issues, legal problems. child/elder care and more!
- TravelAssistanceGethelpwithpre-tripassistance,emergencytransportationservices,24-hourhealthinformation,medicalandlegalassistance,missing luggage assistance and much more.

Get Help Anytime 24/7! EAP: (800) 344.9752 | Travel: U.S. (888) 226-4567 / Other: (20

Wellness Allowance Program

Trilliant is pleased to provide eligible employees a Wellness Allowance program, give employees the Power of Choice for health & wellness! This program is intended to help employees with the expenses that support your overall well-being, physical, emotional and mental health. This program allowance can be used for eligible expenses, such as:

- Memberships:Annual/Monthly/Seasonal-Gymmembership,initiationfees,registrationfees,healthcenterfees,bikeshare,tennis,swimclubs,rockclimbing,skilift tickets, skate park, tournament fees.
- Fitness trackers*: Apple Watch, Fitbit, Jawbone, Garmin, or similar wearable; health apps.
- Equipment*:In-homegymequipment;snowboards;skis,bicycle;tennisracket,golfclubs,yogamat,skates,fitnesshulahoop;equipmentforanyphysicalsport.
- Lessonsorpersonaltraining:Pilates,golf,swimming,tennis,dance,personaltrainingfees,music,art,andageappropriateeducational/selfhelpbooks.
- Classes:Yoga,aerobics,Zumba,Pilates,spin,martialarts,meditation,kickboxing,dance,nutritionalordietitianclassesfromwellnessexperts,weightmanagement, karate,taekwondo,music,archery,boxing,cricket,CrossFit,horsebackriding,iceskating,skatingpasses,mentalwellnessclasses(artofliving,etc.),andothersimilar fitness classes.
- Exercise technology*: Videos, subscriptions, games, and apps: Wii Fit, Peloton, mental health apps, or similar.
- Personal services: Massage, nutrition counseling, meal planning services (but not food purchases).
- Purifiers and humidifiers*: Water or air purifiers, and humidifiers.

RefertotheWellnessAllowanceProgramdocumentfordetailsoneligibility,allowanceamounts,ineligibleexpenses,reimbursementprocessandmore!

Questions? Contact HR! HR@trilliant.com

^{*} May be subject to reimbursement quantity limits.

Flexible Spending Accounts (FSA)

Eligible employees may enroll in the company-sponsored FSA plan administered through The Advantage Group (TAG). You may make pre-tax contributions to your FSA account and use the funds for eligible health and family care expenses approved by the IRS. Please note that the FSA plans run on a calendar year 1/1 - 12/31. Open enrollment for the FSA benefits are held each year in the month of December.

- $Health Care FSA \hbox{-} for calendary ear 2024, you may set as ideup to \$3,200 per family annually to use one ligible expenses, including the set of the properties of the prop$ physician fees, deductibles, copayments, dental and vision expenses.
- $Dependent Care FSA {\it for calendary ear 2024, yournay set as ideup to \$5,000 per family annually to use one ligible dependent care expenses.}$ If you are married and filing separately, you may set aside up to \$2,500 annually.

Each pay period, a dollar amount specified by you will be deducted from your pay (pre-tax) and contributed to your FSA account. Any unclaimed balances remaining in your FSA will be forfeited and do not roll over into the following year. **Budget wisely!**

Commuter Benefit

Eligible employees may enroll in the company-sponsored Commuter Benefit administered by The Advantage Group (TAG). The TAG Commuter Benefit allows you to pay for eligible transit and parking expenses using pre-tax dollars. Save up to 20%-40% in your commuter expenses! 2024 IRS Maximum Allowed Monthly Contributions: \$315 Parking & Transit

Eligible commuter expenses include:

BART, Subway, Commuter Train
Ferry
Bus & Van pooling



- Parkingatornearyourworkplace
- Transit Station Parking

401(k) Retirement Plan

Trilliant offers a 401(k) Retirement Plan to eligible employees and it is administered through Ascensus. Human Resources will provide the plan information and required paperwork for getting setup with the 401(k).

Access/ouraccount24

www.ascensus.com

Trilliant's Benefit Website

A personalized benefits website has been created for Trilliant employees:

https://mybenefits.cc/trilliant/

This website houses direct links to all the carriers' websites, group numbers, detailed plan descriptions, and contact information. You can search for in-network doctors and dentists by following the links to directories for each carrier. You can also review plan details and benefit coverage information, or download forms to enroll/make changes to your benefits coverage. All documents relating to the Trilliant Employee Insurance Benefits Program, including the Summary Plan Descriptions, HIPAA Privacy Notice, General COBRA Notice and any other relevant Plan Documents or Notices, are available to you and dependents, electronically through Trilliant's website. You may receive a paper copy of any of the above documents free of charge by contacting the Human Resources department.

Important Benefit Contact Information			
Carrier / Administrator	Group Number	Phone	Website
CIGNA Medical Kaiser Medical	616683 602631	866.494.2111 800.464.4000	www.mycigna.com www.kp.org
Guardian Dental	0553500	800.541.7846	www.guardiananytime.com
VSP Vision Service Plan (Vision)	30085469	800.877.7195	www.vsp.com
New York Life Life/Disability & VTL	1-31180958	888.842.4462	www.mynylgbs.com
NYL Assistance (EAP) NYL Secure Travel Assistance	Web ID: NYLGBS SOK0605460	800.344.9752 U.S.888.226.4567 NonU.S.202.331.7635	https://www.guidanceresources.com/ops@us.generaliglobalassistance.com/
TAG FSA & Commuter Benefit Ascensus 401(k) Retirement	N/A N/A	877.506.1660 888.652.8086	www.enrollwithtag.com www.ascensus.com

Acrisure West Client Services Manager:

Sara Packard 925.299.7213 spackard@acrisure.com

If vou have ... eligibility questions or unresolved claim issues and need assistance, please contact your Human Resources department, or your Acrisure Client Services Manager noted above. This summary is intended for reference only. Please refer to your official plan documents for more information.



