










2024 Frequently Asked Questions (FAQs)

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Overview

What is our approach to benefits?

Today more than ever, we're a single, integrated company harnessing the power of one to inspire customer success and redefine the future of our industry. We're working together as a unified organization that combines a century-old heritage with modern insights on how we can help our people be their best at work and at home.

In July, we began our efforts to fully harmonize our benefits program with the consolidation of our benefits administration platform to Businessolver. Now, we're creating one comprehensive benefits package that offers all employees flexible, cost-effective and competitive coverage and promotes a culture of shared accountability and choice.

What benefits are being harmonized for 2024 and which carriers provide them?

See the chart below for a summary of our harmonized benefits and carriers.

HEALTH AND WELLBEING	
Benefit	Carrier
Medical (including Telehealth)* (Bronze HSA; Silver HSA; Gold HSA; \$500 PPO)	Anthem
Prescription Drug	Express Scripts
Health Savings Account (HSA)	HSA Bank
Dental (Basic; PPO; PPO Plus)	Delta Dental
Vision (VSP Base; VSP Enhanced)	VSP
Employee Assistance Program (EAP)	Lyra Health
Wellbeing Program and Incentives	Virgin Pulse
Chronic Condition Management	Livongo
Maternity, Family Building and Parenting	Ovia Health
Health Advocacy and Second Opinion	Included Health

* Regional plan (Kaiser and HMSA) will continue to be offered in California and Hawaii. In addition, the TRICARE Supplement Plan will be available to eligible retired military.

FINANCIAL SECURITY	
Benefit	Carrier
Supplemental Insurance (Accident; Critical Illness; Hospital Indemnity)	Voya
Life and AD&D Insurance (Basic; Optional Life; Optional AD&D)	The Hartford
Disability (Short-Term; Long-Term)	The Hartford
Legal Plan	MetLife
Identity Protection	Allstate
Pet Insurance	Nationwide
Employee Purchase Program	Purchasing Power
Employee Discount Program	PerkSpot
Student Loan Program	SoFi
401(k) Savings Plan	Fidelity

How did Amentum choose which benefits would be offered to employees—and which insurance carriers to select?

Amentum carefully reviewed all vendors and evaluated their offerings—not just in terms of cost but also the services and user experiences provided as well as market competitiveness—to determine which ones would best serve our company’s entire population. Our goal was to take a best-of-both-worlds approach to minimize disruption as much as possible and focus on the long-term value gained through strategic decision making and our increased negotiating power with carriers.

How does the company manage its benefit program and costs?

The choice, flexibility and wellness support we offer is a shared cost between our company and our people. You can do your part—learn about your benefit options for 2024, make informed choices for your individual situation and use the available resources to improve your physical, emotional, financial and social wellbeing. This helps us do our part—maintain an affordable benefits program, focus on strategic, long-term benefit investments and strengthen our culture of wellbeing. Overall, given the current market conditions and the external factors causing increases to many insurance premiums, we’re pleased with the outcomes of our harmonization efforts and our ability to limit employee contribution increases for 2024.

When is Open Enrollment?

Open Enrollment begins on **November 21, 2023** and ends on **December 5, 2023** at 11:59 p.m. EST.

What happens if I don’t enroll?

If you don’t enroll for benefits coverage during Open Enrollment, you will not have coverage in 2024. None of your current elections will carry over to next year.

When do my new benefits take effect?

The benefits you elect during Open Enrollment will be effective January 1, 2024.

Medical plans

What medical plans are offered?

You have four medical plan options—all administered by Anthem: Gold HSA, Silver HSA, Bronze HSA and \$500 PPO. Depending on where you live, a regional plan (Kaiser or HMSA) may also be available. Additionally, if you are retired military, you may be eligible for the TRICARE Supplement Plan.

Why are there three Health Savings Account (HSA)-eligible plans?

We provide three HSA-eligible medical plans to give you medical plan choices that meet your physical and financial needs. The three plans have different deductibles and out-of-pocket maximums, so you can choose the one that's right for your situation, and still have access to a tax-advantaged HSA where you can save pre-tax dollars for eligible healthcare expenses today—or even into retirement. The HSA plans allow you to save for eligible healthcare expenses in a portable account—meaning the money is always yours to keep.

Why is the \$500 PPO offered?

We are committed to offering you and your family medical plan choices. The \$500 PPO provides an additional option that might meet the physical and financial circumstances of some employees and families. The \$500 PPO offers lower deductibles and out-of-pocket maximums, and most services are paid for with flat-dollar copays. But, you and your family will pay more in bi-weekly premiums for coverage.

What do all four Anthem medical plans offer?

All four Anthem medical plan options:

- ▶ **Cover in-network preventive care at 100%.** Be sure to take advantage of preventive care (annual physicals, tests, screenings, etc.) so you can stay well.
- ▶ **Cover the same types of expenses.** However, the amount you pay varies by plan.
- ▶ **Provide a “safety net.”** All plans feature an out-of-pocket maximum to protect you if you have a serious condition or illness.
- ▶ **Give you access to a variety of health and wellbeing resources,** including a team of concierge-level customer service experts, a family advocate, one-on-one behavioral health coaching and 24/7 Nurseline.

What are the main differences between the four Anthem medical plans?

The medical plans have a few key differences to consider:

- ▶ **The type of tax-advantaged account(s) you can use with each plan.** If you enroll in an HSA plan, you can enroll in an HSA and a Limited Purpose Flexible Spending Account (FSA). If you enroll in the \$500 PPO or waive medical coverage, you won't have access to an HSA or Limited Purpose FSA, but you can enroll in a Health Care Flexible Spending Account (FSA). **Note:** Limited Purpose FSA is available to legacy Amentum employees only.
- ▶ **How much you pay.** Your premium costs and out-of-pocket costs (the amount you pay when you have a healthcare expense) will both vary depending on the plan you choose.
- ▶ **What and how you pay for prescription medications.** If you enroll in one of the HSA plans, you pay the full cost of prescription drugs until you meet your deductible, then you pay coinsurance. With the \$500 PPO, you just pay a copay. In both plans, certain preventive medications are covered at 100%; for those prescriptions, you do not need to meet the deductible or pay a copay.

Do all four medical plans cover preventive care?

Yes. All four medical plan options cover in-network preventive care at 100%. When you enroll in a medical plan, you and your covered dependents have access to in-network preventive care at no cost to you.

What kind of preventive care is covered?

Common types of preventive care include annual physicals; blood pressure, diabetes and cholesterol tests; routine immunizations; well-baby and well-child doctor's visits; nutritional counseling; screening, counseling and vaccines to ensure a healthy pregnancy; and many cancer screenings, including mammograms and colonoscopies.

Are there resources available to help me determine which medical plan may be right for me and my family?

The company provides access to a variety of tools that can help you select the medical plan that's right for you. Visit amentum2024benefits.com to access the MyChoice Recommendation EngineSM.

How do I find an in-network doctor?

To find a medical provider, go to anthem.com/find-care.

- ▶ Enter your alpha prefix in the **Enter Member ID number** or **Prefix** box.

If you live in	Enter this alpha prefix
DMV (DC, MD, and VA metro) area	N8A
Florida	N7A
Utah	R7A
All other areas	L6A

- ▶ Enter the city or ZIP code where you want to search, and select a type of doctor.
- ▶ Next, choose who you want to see. You can search for a doctor nearby or use the doctor's name.
- ▶ Select a provider to see more details, such as:
 - » Specialties
 - » Gender
 - » Languages spoken
 - » Training
 - » A map of their office location
 - » Phone number

What if my provider is no longer in-network?

If you or a covered dependent are currently receiving care from your provider for a serious health condition (for example, you are receiving treatment for an acute, serious or chronic medical or behavioral health condition or you are pregnant), you may be eligible for transition of care support. This support gives new Anthem members the option to request extended coverage from their current, out-of-network health provider at in-network levels for a limited time. For more information, contact an Anthem Health Guide at **833-371-0212**, Monday-Friday, 8 am-8 pm EST.

Is there a spousal surcharge if I want to cover my spouse and they have access to another group health plan?

No. There is no surcharge for covering a spouse even if they have access to another group health plan.

Prescription drugs

Who provides my pharmacy benefits?

Express Scripts (ESI) is our prescription drug administrator, managing our prescription drug formulary list, home delivery, specialty pharmacy and customer service medication questions.

How can I calculate the cost of my medications through ESI?

If you are currently enrolled in a medical plan through the company and have prescription drug coverage through ESI, visit [express-scripts.com](https://www.express-scripts.com). Log in to the site and click on the “**Price a Medication**” tool. If you currently do not have prescription drug coverage through ESI, visit [express-scripts.com/amentum](https://www.express-scripts.com/amentum), choose a medical plan option and then click “**Price a Medication**.” **Note:** The “**Price a Medication**” calculator does not imply a guarantee of coverage, as covered products or categories are subject to individual plan restrictions and/or limitations. The “**Price a Medication**” tool displays cost and coverage information for the current calendar year.

How can I locate an in-network pharmacy?

If you are currently enrolled in a medical plan through the company and have prescription drug coverage through ESI, visit [express-scripts.com](https://www.express-scripts.com). Log in to the site and click on the “**Locate a Pharmacy**” tool. If you currently do not have prescription drug coverage through ESI, visit [express-scripts.com/amentum](https://www.express-scripts.com/amentum), choose a medical plan option and then click “**Find a Pharmacy**” and enter your ZIP code to see network pharmacies in your area.

Does ESI offer a home delivery option?

Yes. The Express Scripts Pharmacy is a home delivery service available as part of your prescription drug plan. With Express Scripts home delivery, you may save money when you fill up to a 90-day supply of your long-term prescriptions.

If I'm a legacy Amentum employee and have a current mail-order prescription with CVS Caremark, will my prescription be automatically transferred to Express Scripts?

Mail-order prescriptions with open refills will be transferred to Express Scripts Pharmacy, Express Scripts home delivery service. Some medicines cannot be transferred. These include controlled substances, prescriptions which have never been filled, expired prescriptions, compounds and prescriptions with no refills left.

How do I know whether my medication is covered?

Our preferred drug list (formulary) contains thousands of commonly prescribed drugs. If you are currently enrolled in a medical plan through the company and have prescription drug coverage through ESI, you can see if a medication is covered on our 2024 drug list by going to [express-scripts.com](https://www.express-scripts.com), logging in and selecting “**Price a Medication**” from the drop-down menu under “**Prescriptions**.” If you currently do not have prescription drug coverage through ESI, visit [express-scripts.com/amentum](https://www.express-scripts.com/amentum), choose a medical plan option and then click “**National Preferred Formulary**.” This is a list of medications that are covered by our medical plans. If your drug is not preferred, you may want to talk with your doctor to identify an appropriate alternative that will effectively treat your condition.

What is prior authorization?

Prior authorization is a coverage management program administered by ESI to determine whether your use of certain medications meets your plan's conditions of coverage. In some cases, a coverage review may be necessary to determine whether a prescription can be covered under your plan.

Do I get a pharmacy ID card, separate from my medical ID card?

No. Your medical ID card from Anthem will include your pharmacy information. For 2024, everyone will receive a new medical plan ID card in the mail. Digital ID cards will be available on [anthem.com](https://www.anthem.com) if you need your card before your physical ID card arrives.

Tax-advantaged accounts

What is a Health Savings Account (HSA)?

An HSA is an account that you can use to set aside tax-free money if you enroll in one of the HSA medical plan options. The money goes into your account tax free, it can grow tax free through investment earnings and it comes out tax free if you use it to pay for qualified healthcare expenses today—or even into retirement.

Can I always keep the money in my HSA?

Yes. The money in your HSA is portable—it's yours to keep, save and use, even if you leave the company. There's no "use it or lose it" feature like there is with Flexible Spending Accounts (FSAs).

What types of healthcare expenses can I pay for using my HSA?

Common qualified healthcare expenses include: deductibles (the amount you pay out of pocket before the medical plan pays any portion of a claim), coinsurance (the percentage of the cost you pay for services after you meet the medical plan deductible), prescription drugs, contact lenses and eyeglasses, LASIK surgery, doctor's visits, physical therapy and healthcare supplies and equipment. For a full list of qualified healthcare expenses, visit [irs.gov](https://www.irs.gov) and search Publications 502 and 969.

If I currently have an HSA, what will happen to it in 2024?

If you stay in an HSA-eligible medical plan for 2024, your HSA balance rolls over and you and the company can continue contributing to your account. If you are currently enrolled in an HSA-eligible medical plan and you switch to the \$500 PPO for 2024, you can continue using your HSA for qualified healthcare expenses, but you and the company cannot add new funds to the account in 2024. Instead, you can contribute to a Health Care Flexible Spending Account (FSA) where you can set aside pre-tax dollars to pay for qualified healthcare expenses. However, any remaining FSA balance will not roll over to the following year.

Will the company contribute to my HSA in 2024?

Yes, you are eligible to earn contributions if you are enrolled in either the Gold HSA or Silver HSA and you participate in the wellness program administered by Virgin Pulse in 2024. For employees enrolled in the Bronze HSA or \$500 PPO, you are eligible to earn a gift card for participating in the wellness program. How much you earn depends on the medical plan you choose, your coverage tier and your participation in healthy activities.

How much can I contribute to my HSA in 2024?

You can contribute up to the IRS annual maximum for 2024 (individual coverage: \$4,150; family coverage: \$8,300). If you are age 55 or older, you may make an additional catch-up contribution of up to \$1,000. **Note:** These limits include any contributions you receive from the company.

What is a Flexible Spending Account (FSA)?

An FSA is an account you can use to set aside pre-tax money for eligible expenses. There are three types of FSAs:

- ▶ **Health Care FSA:** If you enroll in the \$500 PPO or waive medical coverage, you can use this account for eligible medical, dental and vision expenses.
- ▶ **Limited Purpose FSA (available to legacy Amentum employees only):** If you enroll in an HSA plan, you can use this account for eligible dental and vision expenses only.
- ▶ **Dependent Care FSA:** All employees can use this account for eligible day care and elder care expenses.

Can I contribute to both an HSA and a Health Care FSA?

No. Because both tax-advantaged accounts cover the same types of expenses, the IRS will not allow you to contribute to both accounts. If you enroll in one of the HSA-eligible plan options, you cannot contribute to a Health Care FSA but you can contribute to a Limited Purpose FSA; if you enroll in the \$500 PPO option, you cannot contribute to an HSA.

What types of expenses can I pay for using my FSA?

Common qualified healthcare expenses for the Health Care FSA include: deductibles (the amount you pay out of pocket before the medical plan pays any portion of a claim), coinsurance (the percentage of the cost you pay for services after you meet the medical plan deductible), prescription drugs, contact lenses and eyeglasses, LASIK surgery, doctor's visits, physical therapy and healthcare supplies and equipment.

The Limited Purpose FSA can only be used for eligible dental and vision expenses.

Common qualified day care expenses for the Dependent Care FSA include child or dependent care facilities or services in your home (or someone else's home) while you or a spouse is working, looking for work or attending school full time.

For a full list of qualified expenses, visit [irs.gov](https://www.irs.gov) and search Publications 502 and 969.

If I am already participating in an FSA will my current FSA balance automatically roll over?

No. Unlike the HSA, the funds in a Health Care, Limited Purpose or Dependent Care FSA do not roll over each year. There's a "use it or lose it" feature to the FSAs. If you would like to participate in an FSA for 2024, you must actively elect your contribution amount during Open Enrollment.

Does the company contribute to FSAs?

No.

How much can I contribute to an FSA in 2024?

You can contribute up to the IRS annual maximum for 2024 (Health Care FSA: \$3,200; Limited Purpose FSA: \$3,200; Dependent Care FSA: \$5,000 [\$2,500 if you are married and filling taxes separately]).

If you are a highly-compensated employee (HCE), defined by the IRS as those earning \$150,000 or more in 2023, your contribution to the Dependent Care FSA will be limited to \$1,600 in 2024.

Dental and vision plans

What dental plan options are offered?

You have three options—Basic, PPO and PPO Plus—all administered by Delta Dental of Virginia.

What is the same for all dental plan options?

All options include preventive care at no charge and coverage for basic dental care, such as fillings, tooth repairs and extractions.

Q: What are the main differences between the dental plan options?

The dental plan options have a couple key differences to consider:

- ▶ **What's covered.** The PPO and PPO Plus options include additional coverage for major care (crowns, bridges and dentures) as well as orthodontia. Orthodontia services for the PPO are only available to children; whereas, the PPO Plus provides coverage for children and adults.
- ▶ **How much you pay.** Your premium costs and out-of-pocket costs (the amount you pay when you have a dental expense) will both vary depending on the plan you choose.

How can I find a Delta Dental of Virginia network provider?

Visit [DeltaDentalVA.com](https://www.DeltaDentalVA.com). Under “**Find a dentist**,” select “**Delta Dental PPO Plus Premier**” for your plan and enter your address or ZIP code to search your area. To see if a specific dentist is in the network, under “**Find a dentist**,” click “**more options**” and enter your ZIP code and dentist’s name. Then, click “**Submit**.”

What vision plan options are offered?

You have two options—VSP Base and VSP Enhanced—both administered by VSP.

What do the two vision plan options have in common?

Both options provide coverage for a routine, in-network annual eye exam for \$10. They also include a \$150 eyeglass frame or contact lens allowance every 12 months. In addition, both plans offer the option to elect safety glasses coverage. **Note:** Your eyeglass frame allowance will be higher if you select a featured brand and lower at Walmart/Costco.

What are the differences between the two options?

If you select the VSP Enhanced option, you get all the coverage you would get under the VSP Base option. Plus, you’ll also get to choose one of these enhancements:

- ▶ Additional \$100 eyeglass frame or contact lens allowance
- ▶ Fully covered anti-glare coating
- ▶ Fully covered premium/custom progressive lenses

How can I find a VSP network provider?

To find an in-network provider, visit [vsp.com](https://www.vsp.com) and select “**Find a Doctor**.” Then search for a provider by location, by office or by the doctor’s name.

Wellbeing programs and incentives

Can I receive wellness incentive rewards in 2024?

Yes. Anthem medical plan participants and covered spouses have the opportunity to earn incentive rewards by participating in healthy activities through our wellbeing program, powered by Virgin Pulse. You'll have access to personalized, user-friendly tools to help track, improve and maintain your health, as well as online programming and telephonic health coaching to help you focus on specific areas of your wellbeing. Our goal is to provide you and your covered spouse with meaningful rewards for participating in healthy activities that make sense for you. To join, visit join.virginpulse.com/amentum, enter key details as it appears on your paystub and start participating in the activities that are right for you!

If you are already signed up with Virgin Pulse, you will continue to use the same login credentials you use today.

What types of healthy activities are offered through Virgin Pulse?

You can earn points for participating in a variety of healthy activities including:

- ▶ Signing up
- ▶ Completing the Health Check
- ▶ Getting preventive care visits
- ▶ Competing in challenges
- ▶ Tracking your healthy habits
- ▶ Completing a health Journey®
- ▶ And more!

How can I sign up for Virgin Pulse?

To join, visit join.virginpulse.com/amentum, enter key details as it appears on your paystub and start participating in the activities that are right for you!

What health and wellbeing resources are available to Anthem medical plan participants?

If you enroll in an Anthem medical plan, you have access to the following resources at no cost to you:

- ▶ **Anthem Health Guide:** Connect with a team of concierge-level customer service experts who advocate for your health and explain how to use your benefits.
- ▶ **Total Health Connections:** Get your own personal health champion, called a family advocate, to help you and your family through unexpected emergencies and everyday health needs.
- ▶ **Sydney HealthSM mobile app:** Access your health plan information on the go—all in one place.
- ▶ **Behavioral Health Resources:** Get help via one-on-one coaching, self-help digital tools, a virtual care option and more.
- ▶ **Building Healthy Families Program:** Access personalized support and resources if you're trying to conceive, expecting a child or raising young children.
- ▶ **24/7 Nurseline:** Talk with a registered nurse any time, 365 days a year.

What wellbeing support is available through Livongo?

Anthem medical plan participants have access to Livongo. Livongo provides support for diabetes, hypertension and weight management. The Livongo Weight Management Program offers tools and access to a health coach to help you stay motivated and be accountable. For diabetics, Livongo provides a state-of-the-art meter and test strips (with unlimited reorders) right to your door. For those with high blood pressure, Livongo provides a high blood pressure monitor and connects you with a health coach who can monitor your readings and provide advice. Visit [Livongo](#) (registration code: **AMENTUM**) to learn more or enroll.

Is free health coaching provided?

Yes. Anthem medical plan participants and covered spouses can connect with a health coach through Virgin Pulse. And, Anthem medical plan participants automatically have access to behavioral health coaching through Anthem.

What additional support is available for people with specific health conditions?

Anthem medical plan participants have access to a personal care team through Included Health to make sure you get answers to your health questions and a second opinion from a leading expert on your condition—all at no cost to you.

With Included Health, you can get:

- ▶ Matched to the highest-quality care in your network—and in your area—for your healthcare needs
- ▶ A top specialist for your condition to review your case with no additional exams or appointments
- ▶ Answers to all your questions about your diagnosis, your treatment plan, even your symptoms
- ▶ Expedited appointments and preferential access to top experts

What type of maternity support is available?

The company offers four weeks of paid Parental Leave for new parents (either mother or father) to care for a newborn or adopted child. To qualify, you must be a full-time or part-time employee who works at least 25 hours per week and has one year of service with the company.

Our maternity management program, Ovia Health, is available to all Anthem medical plan participants and is not just for expectant moms and dads! Support is available throughout all stages of pregnancy, from preconception through pregnancy, to child health and parental wellbeing. There are three tracks available, for wherever you are in your family journey: Ovia Fertility, Ovia Pregnancy and Ovia Parenting, which supports children up to age 17.

When you participate in this program, you can expect better outcomes for both you and your child. Among other findings, research shows participants can expect to reduce the chance of ending up with a preterm delivery or an infant in the neonatal ICU.

For more information about the program, visit [OneAmentumBenefits.com](https://www.oneamentumbenefits.com).

What services does our Employee Assistance Program (EAP) provide?

Lyra Health (Lyra) offers you and your dependents personalized support to help you no matter what you're going through—coping with stress, managing anxiety or depression, navigating relationship issues or whatever else life brings. The EAP provides:

- ▶ **Free, confidential sessions:** Up to eight therapy and mental health coaching sessions per person per year.
- ▶ **Fast access to high-quality providers:** Mental health providers with open appointments are custom matched to you in just a few minutes. Plus, a Care Navigator Team is available 24/7 to assist with care questions and help find providers.
- ▶ **Self-care resources:** Unlimited access to a library of videos, meditations, soundscapes and breathing exercises.
- ▶ **Work-life support:** Financial, legal and identity theft services plus child, elder and pet care consultations, resources and referrals.

Beginning January 1, 2024, call **844-761-1961** or visit [Lyra](https://www.lyra.com) to get started.

Life, AD&D and disability insurance

Does the company provide life and AD&D insurance?

Yes. The company provides you with Basic Life and AD&D Insurance equal to one times your base annual earnings, up to \$2 million—at no cost to you.

Can I elect more life insurance beyond what the company provides?

Yes. You can elect Optional Life Insurance for you and your eligible dependents. Optional Life Insurance premiums are based on age and salary. See the 2024 Benefits Guide for plan details and coverage amounts. Log into OneAmentumBenefits.com to view your premiums.

Can I elect more AD&D insurance beyond what the company provides?

Yes. You can elect Optional AD&D Insurance for you and your eligible dependents. See the 2024 Benefits Guide for plan details and coverage amounts. Log into OneAmentumBenefits.com to view your premiums.

Do I need to provide Evidence of Insurability (EOI)?

You need to provide EOI for life insurance if:

- ▶ You enroll or increase your election more than 30 days after your eligibility date. **Exception:** During this year's Open Enrollment, you may increase your Optional Life Insurance by one times base salary without EOI if the election is below the guaranteed issue amount (three times base salary). For example, if you are currently enrolled in one times base salary, you could increase your election to two times base salary without EOI.
- ▶ You enroll in four or more times your base annual earnings.
- ▶ You enroll your spouse more than 30 days after your spouse's eligibility date.
- ▶ You choose spouse coverage of more than \$50,000.
- ▶ You increase your spouse's coverage.

EOI is not required when electing AD&D coverage.

How often do I need to update my beneficiary?

You don't need to update your beneficiary if there's been no change. But it's a good idea to check what's on file, so you can make sure your life insurance benefits go to the right person. You can review and update your beneficiaries on OneAmentumBenefits.com.

Does the company provide disability coverage?

Yes. We provide you with Short-Term Disability (STD) coverage at no cost. STD coverage is 70% of eligible earnings with no weekly maximum to help protect you in case of an unexpected illness or injury.

You have the option to elect Long-Term Disability (LTD) coverage, but you will pay the full cost of coverage.

You have two plan options: coverage for 50% or 66.67% of eligible earnings up to a maximum of \$15,000 per month. Log into OneAmentumBenefits.com to view your premiums.

Voluntary benefits

What voluntary benefits are offered by the company for 2024?

The company offers the following voluntary benefits:

Supplemental Health Insurance – Provides additional financial protection in case you or a family member is involved in an accident, becomes seriously ill or is hospitalized.

- ▶ **Accident insurance** pays you a lump sum for any covered injury you may receive—on or off the job.
- ▶ **Critical illness insurance** pays you a lump sum if you're diagnosed with a covered illness like cancer. You can choose from three coverage amounts. Plus, get an annual Wellness Benefit of \$75 for completing an eligible health screening test.
- ▶ **Hospital indemnity insurance** pays a daily cash benefit if you are hospitalized. You can choose from a low or high daily benefit.

Legal Plan – Prepare for the unexpected and get the legal advice you need through MetLife, Amentum's legal plan administrator. MetLife provides access to a network of attorneys to help you with estate planning documents, like a will or trust, traffic offenses, real estate matters, identity theft defense, family law, reproductive assistance matters and more.

Identity Protection – Protect your personal and private information with identity theft protection. Catch and stop fraud in its early stages through 24/7 monitoring. Identity protection is administered by Allstate.

Pet Insurance – Pet insurance can help you meet out-of-pocket expenses and pay bills that are associated with your pet's health. Eligible employees can purchase pet insurance through Nationwide. You can visit any vet, anywhere, and rates are the same price for pets of all ages. The plan, like other pet insurance, doesn't include pre-existing conditions, but it does include extra features such as emergency boarding, lost pet advertising and more.

Commuter Benefits – The commuter benefit is a great perk that saves you up to 40% or more. Electing a commuter benefit can reduce your commuting costs by allowing you to set aside pre-tax money for qualified transit and parking expenses you incur while getting to and from work.

Purchasing Power – Purchasing Power is a purchase program that makes it easy for you to understand your current financial health, get products you want, when you want them, and pay for them over time, through payroll deductions with zero interest. No credit checks, no credit score impact and no hidden fees.

Employee Discount Program – PerkSpot provides access to thousands of exclusive deals from top brands across 25+ savings categories.

Sofi Student Loan Program – SoFi can help you pay off student loan debt sooner—saving thousands of dollars. It allows you to refinance student or Parent PLUS loans and consolidate all existing student loans into a single loan with one monthly payment. Check your customized loan consolidation rate for federal and private student loans in two minutes with SoFi. There's zero impact on your credit score with this soft credit inquiry.

Enrollment details

How do I enroll in benefits?

There are three ways you can enroll in benefits:

- ▶ **MyChoice mobile app:** Search “MyChoice” in the App Store or Google Play Store. If you are using the app for the first time, you’ll need to visit [OneAmentumBenefits.com](https://www.oneamentumbenefits.com) and select **Get Access Code** to get a code to activate the app (if you don’t use the code within 20 minutes, you’ll need to generate a new one).
- ▶ **Online:** Visit [OneAmentumBenefits.com](https://www.oneamentumbenefits.com).
- ▶ **Phone:** Call the Benefits Service Center **844-705-4099**.

Note: The app and online enrollment options are strongly encouraged.

Where can I go to find out more about benefits available to me?

Visit [amentum2024benefits.com](https://www.amentum2024benefits.com) to:

- ▶ See what’s new for 2024.
- ▶ Link to the Medical Plan Decision Support Tool to help you choose the plan that is right for you.
- ▶ Access other resources (i.e., 2024 Benefits Guide) to help you understand your 2024 benefits.

Who do I contact if I have questions?

For enrollment support, call the Benefits Service Center at **844-705-4099**, Monday-Friday, 8 am-8 pm EST.