

BENEFITS SUMMARY FOR TEAM MEMBERS

THE CENTECH GROUP, Inc. (CENTECH) is pleased to present this summary of our extensive benefit programs. Complete and detailed information on each benefit plan described in this summary is available from the Human Resources (HR) Department. Additional information may also be found in the Team Member (Employee) Handbook. The following pages describe the benefits provided by CENTECH to its full-time (F/T) (minimum of 30 hours per week) and part-time (P/T) team members.

A. PAID TIME OFF

Eligibility: F/T and P/T team members accrue paid time off from the first day of employment.

Accrual for F/T Team Members:

- Less than 3 years of employment: 15 days/year
- After 3 years of employment: 20 days/year
- After 10 years of employment: 25 days/year

Accrual for P/T Team Members:

Pro-rated leave accrues each pay period based on the number of hours worked.

B. NON-ACCRUABLE PAID LEAVE

Eligibility: For F/T team members, CENTECH grants paid leave for the following:

- Jury duty leave
- Bereavement leave (3 days maximum)
- Time off to vote (2 hours maximum)

C. HOLIDAYS

Eligibility: For F/T team members, CENTECH observes the following 10 paid holidays:

- | | |
|------------------------------|----------------------------|
| • New Year's Day | • Veterans Day* |
| • Martin Luther King Jr. Day | • Thanksgiving Day |
| • Presidents' Day | • Day After Thanksgiving** |
| • Memorial Day | • Christmas Day |
| • Independence Day | |
| • Labor Day | *Offsite team members only |
| • Columbus Day | **Corporate only |

Team members working at project sites will follow the holiday schedule in place for that project's contract, but will be granted a "floating" holiday if the contract schedule grants fewer than 10 holidays. Additional information on holidays can be found in the Team Member Handbook.

H. SHORT- & LONG-TERM DISABILITY INSURANCE

Eligibility: All eligible F/T team members are provided disability insurance coverage effective on their first day of work for illnesses or disabilities that prevent them from working. Premiums are 100% paid by CENTECH. Insurance is provided by Lincoln National Life Insurance (Lincoln Financial).

SHORT-TERM DISABILITY: Disability income benefits are provided after 14 consecutive days of a doctor certified disability. Monthly payments are tied to Social Security payments and equal approximately 60% of a team member's weekly salary, but may not exceed \$2,000 per week. Short-term disability income terminates when the disability ends or after 11 weeks, whichever comes first.

LONG-TERM DISABILITY: Disability income benefits are provided after 90 consecutive days of a doctor-certified disability. Monthly payments are tied to Social Security and can be up to 60% of a team member's monthly salary, but may not exceed \$10,000 per month. Long-term disability income terminates when the team member retires, or reaches age 67, whichever comes first.

I. ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE

Eligibility: F/T team members are eligible effective on their first day of work in case of their accidental death or loss of limb or sight. The team member's beneficiary will receive a dollar amount up to two times the team member's life benefit. Premiums are paid by CENTECH at 100%. Insurance is provided by Lincoln Financial.

J. LIFE INSURANCE

Eligibility: F/T team members receive term life insurance equal to two times the team member's annual salary to a maximum of \$300,000 through Lincoln Financial effective on their first day of work. The life insurance is an employer pay all plan and does not allow team members to opt out. Premiums are 100% paid by CENTECH. As stated in Internal Revenue Publication 525, the team member is responsible for taxing on the cost of the portion in excess of \$50,000. Upon reaching age 75, the team member's life insurance benefit is reduced by 50%. Should a team member want to waive life insurance in excess of \$50,000 for tax purposes, please notify HR when enrolling upon hire or during annual open enrollment.

K. EMPLOYEE ASSISTANCE PROGRAM

All team members have access to a 24/7/365 Employee Assistance Program (EAP). EAP services are provided through INOVA Employee Assistance. Team members and their families have free, 24-hour access to confidential assistance with almost any problem ranging from medical and family matters to personal, legal, financial and emotional needs. The EAP is confidential and voluntary as CENTECH is not involved.

L. TEAM MEMBER PENSION PLAN

Eligibility: F/T and P/T team members are offered a pension plan with the opportunity to save for the future and to reduce their current taxable income through a 401(k) pension plan that has been established by CENTECH with Fidelity Investments.

Team members may enroll at any time following their hire and may contribute to the plan up to 90% of their compensation on a pre-tax basis to maximum limits set by the Internal Revenue Service. Company matching begins immediately. CENTECH will match the team member's 401(k) savings dollar-for-dollar, up to the first 3% of the team member's contribution. 401(k) contributions above 3% and up to 12% of eligible salaries, will receive company matching on a basis of ½ of the team member's contributions—providing a potential of up to 7.5% company match for team members contributing 12% or more of their eligible salaries. The scheduled vesting of CENTECH's matching contributions depends on the team member's years of participation in the plan with 100% vesting after 3 years. Matching contributions are computed on a team member's compensation contributed to the plan each payroll period.

M. TEAM MEMBER EDUCATION ASSISTANCE

Eligibility: After 60 days of employment, F/T team members will be 100% reimbursed by CENTECH for company-directed training. CENTECH will reimburse team members, upon request, up to 85% (a maximum of \$2,000 per year) of the costs associated with their undergraduate and graduate level courses in pursuit of a degree and based on its relevancy to the team member's position, as well as the team member's achievement of grade point standards.

N. THE CENTECH GROUP CERTIFICATION PROGRAM

Eligibility: F/T, qualified team members have the opportunity to obtain, at 100% CENTECH expense, professional certification as part of their professional development.

O. DIRECT DEPOSIT OF PAYCHECK

It is CENTECH's policy that all team members utilize direct deposit for their paycheck. Earnings will be deposited directly into a team member's bank account (24 pay periods per year).

P. ORGANIZATIONAL MEMBERSHIP

Memberships in professional and technical societies are encouraged and subsidized by CENTECH provided they meet criteria outlined in the Team Member Handbook and corporate policies and procedures manuals.

Q. CREDIT UNION MEMBERSHIP

Membership is available for all team members to the Pentagon Federal Credit Union. Join the credit union today and they will make your initial \$5 opening deposit. Contact Human Resources for the membership packet and the initial deposit coupon.

NOTE:

The benefits described in this brochure are not an employment contract and do not state contractual obligations on the part of CENTECH. This is a summary of benefits and is not intended to reflect complete information on any of the benefits cited. The contents of this summary are subject to change at any time, for any reason, and without notice. Benefits may vary in accordance with CENTECH's contracts with specific clients. They may also be amended to comply with changes in applicable local, state and federal laws.

In addition to the benefits outlined in this summary, CENTECH also maintains a Human Factors Management module containing programs that link personal development and a sense of fulfillment in one's work to sustainable excellence. The programs in our Human Factors Management module include the Productivity and Quality Assurance Team Member Motivation Program™, the Entrepreneur Assistance Program, Self-Designated Achievement Recognition Bonus Plan, Management Development Program and many others that attract and retain the most highly skilled and motivated professionals in the industry.



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D. MEDICAL/DENTAL INSURANCE

Eligibility: F/T TEAM MEMBERS

OPEN ENROLLMENT: 4TH QUARTER - EFFECTIVE JANUARY 1

Health care coverage includes medical, dental, vision and prescription drugs. Health care coverage is provided by CareFirst BlueCross BlueShield and is effective the first of the month following date of hire. All enrollments are completed online.

	CareFirst PPO		CareFirst PPO Option 20		CareFirst HSA Option 3	
	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
ANNUAL DEDUCTIBLE						
Individual	No deductible	\$500	\$250	\$500	\$2000	\$4000
Individual & Child(ren)	No deductible	\$1000	\$500	\$1000	\$4000	\$8000
Individual & Adult	No deductible	\$1000	\$500	\$1000	\$4000	\$8000
Family	No deductible	\$1000	\$500	\$1000	\$4000	\$8000
PREVENTATIVE SERVICES						
Office Visit for Illness	\$20 per visit	Deductible + 20% of allowed benefit	\$10 per visit	Deductible + 30% of allowed benefit	No charge after deductible is met	Deductible + 20% of allowed benefit
Adult Physical Exam	\$20 per visit	Deductible + 20% of allowed benefit	\$10 per visit	Deductible + 30% of allowed benefit	No charge	20% of allowed benefit
Routine GYN Visit	\$20 per visit	Deductible + 20% of allowed benefit	\$10 per visit	Deductible + 30% of allowed benefit	No charge	20% of allowed benefit
Well-Child Care (0 to 17 years of age)	No charge	Plan pays 100% of allowed benefit	No charge	Plan pays 100% of allowed benefit	No charge	Plan pays 100% of allowed benefit
HOSPITAL & EMERGENCY SERVICES						
Physician's Office (emergency or urgent care)	\$20 per visit	Paid as in network	\$10 per visit	Paid as in network	No charge after deductible is met	Deductible + 20% of allowed benefit
Urgent Care Center	\$20 per visit	Paid as in network	\$10 per visit	Paid as in network	No charge after deductible is met	Deductible + 20% of allowed benefit
Emergency Room (waived if admitted)	\$50 per visit	Paid as in network	Deductible + 10% of allowance	Paid as in network	\$100 copayment, then deductible	Paid as in network
Inpatient Facility Services	No charge	Deductible + 20% of allowed benefit	Deductible + 10% of allowance	Deductible + 30% of allowed benefit	No charge after deductible is met	Deductible + 20% of allowed benefit
Outpatient Facility Services	No charge	Deductible + 20% of allowed benefit	Deductible + 10% of allowance	Deductible + 30% of allowed benefit	No charge after deductible is met	Deductible + 20% of allowed benefit
MENTAL HEALTH /SUBSTANCE ABUSE						
Inpatient Facility Services (30 days/benefit year)	50% of allowed benefit	Deductible + 20% of allowed benefit	Deductible + 10% of allowance (limit 20 days)	Deductible + 30% of allowance (limit 20 days)	No charge after deductible is met	Deductible + 20% of allowed benefit
Outpatient Services (20 visits/benefit year)	Visit 1-5: No Charge	Deductible + 20% of allowed benefit	Visit 1-5: Deductible + 10% of allowance	Visit 1-5: Deductible + 30% of allowed benefit	Visit 1-5: No charge after deductible is met	Deductible + 20% of allowed benefit
	Visit 6-20: 50% of allowance	Deductible + 20% of allowed benefit	Visit 6-20: Deductible + 50% of allowance	Visit 6-20: Deductible + 50% of allowed benefit	Visit 6-20: Deductible + 50% of allowed benefit	Deductible + 50% of allowed benefit
RX DRUGS						
	Provided by WellNet		Provided by WellNet		Provided by BlueCross BlueShield	
Generic	\$15 copayment		\$15 copayment		\$10 copayment - see plan for details	
Formulary/Non-Formulary	\$35 copayment/\$60 copayment		\$35 copayment/\$60 copayment		\$25 copayment/\$45 copayment	
Mail Order (90 day supply)	2.5X copayment		2.5X copayment		2X copayment	
OTHER SERVICES						
Chiropractic - Outpatient Spinal Manipulation	\$15 per visit	Paid as in network	Deductible + 10% of allowance	Deductible + 30% of allowed benefit	No charge after deductible is met	Deductible + 20% of allowed benefit
Diagnostic Services	No Charge	Deductible + 20% of allowed benefit	Deductible + 10% of allowance	Deductible + 30% of allowed benefit	No charge after deductible is met	Deductible + 20% of allowed benefit
X-Rays & Lab Tests	No Charge	Deductible + 20% of allowed benefit	Deductible + 10% of allowance	Deductible + 30% of allowed benefit	No charge after deductible is met	Deductible + 20% of allowed benefit
Vision Routine Exam (1visit/benefit year)	\$10 per visit	Total minus \$33	\$10 per visit	Total minus \$33	Not covered	
Dental Plan						
Single	MetLife Dental Contribution	Employee Contribution/Pay Period	Employee Contribution/Pay Period	Employee Contribution/Pay Period		
w/Spouse						
w/Children						
Family						
VSP Vision Plan						
Employee	VSP Vision Plan	Team Member Cost: Team member payments are made through payroll deductions each pay period (24 pay periods per year) on a pre-tax basis. CENTECH will provide a \$25.00 monthly opt out credit to team members who waive group medical coverage.				
Employee + 1		CENTECH contributes \$1,000/single and \$2,000/double or family to employee HSA.				
Family		* The plan documents will govern should a discrepancy be found between the above summaries and the plan documents.				

ASI Tricare Supplement: Supplemental plan in lieu of BlueCross BlueShield plans are available to team members with Tricare. Those who select the Tricare supplement will have their health claims filed by their providers with Tricare first; they will be able to submit the Tricare Explanation of Benefits (EOB) statement to ASI for additional coverage. Between Tricare and the ASI supplemental plan, 100% of eligible charges will be covered. Premiums are 100% paid by team member.

Coverage Options	Premium
Self	\$ 33.50
Self + spouse	\$ 66.00
Self + one child	\$ 66.00
Self + family	\$ 89.00

Dental Insurance: Provided by MetLife, preventive services (e.g. oral exams, cleanings, X-rays) are covered at 100% of UCR with no deductible. Basic services (e.g., fillings, root canals, extractions, endodontics, periodontics, repairs to crowns/bridges/dentures) are covered at 80% of UCR (90% if a MetLife participating dentist is used), subject to a \$50 annual deductible. Major services (e.g., crowns, bridges, dentures) are covered at 50% of UCR (60% if a MetLife participating dentist is used) subject to the same deductible. Orthodontic services for eligible dependents are covered at 50% with a \$1,000 lifetime maximum. The combined yearly maximum for preventive, basic and major dental care is \$1,500.

***Pre-existing Condition Limitation:** A 10-month waiting period from the effective date of enrollment will apply to any pre-existing condition and any resulting complication or operation. The 10-month waiting period will be waived if the team member provides evidence of continuous coverage with any insurance carrier, provided there has not been a lapse in coverage of more than 63 days.

***Smoke Free Environment:** We promote a smoking free environment and to that end enforce the compliance of the Health Act of 2006. Team members who smoke will pay a premium on health benefits, but will be provided a 45-day transition period to find smoking alternatives. Further, CENTECH will also, through INOVA EAP, fund participation in a smoking cessation program.

***Vision Coverage:** VSP vision coverage is available for any team member. Any team member who waives health care coverage will still have VSP at no cost provided they choose this option. This coverage is paid for 100% by CENTECH. VSP includes an eye exam covered in full every 12 months, after a \$10 copay.

E. SUPPLEMENTAL, VOLUNTARY FINANCIAL INSURANCE

Eligibility: F/T team members may elect the Combined Insurance benefit that financially compensates team members for a variety of medical issues. The Combined Insurance benefit provides each team member with direct compensation due to injuries sustained in an accident, unexpected sickness or hospitalization, diagnosis of cancer, heart attacks, etc. CENTECH offers two levels of coverage of the Combined Insurance benefit. This is a pre-taxed, 100% team member paid deduction.

F. VOLUNTARY LONG TERM CARE INSURANCE

Eligibility: F/T team members may elect Voluntary Long Term Care Insurance. This is a disability-based benefit that pays when the insured is unable to perform two or more Activities of Daily Living (ADLs) or when the insured suffers severe cognitive impairment. Benefits normally are for nursing home care, professional home health care, adult day care, or an assisted living facility. Benefits are provided by Unum Provident and are 100% team member paid through payroll deductions.

G. SECTION 125 FLEX PLAN

Eligibility: F/T team members, under Section 125 of the Internal Revenue may uninsured medical expenses, and dependent or child care expenses deducted from their pay on a pre-tax basis and deposited into a reimbursement account. As expenses are incurred, team members are reimbursed from the reimbursement account.