

# Employee Assistance Program (EAP)

## Summary Plan Description: Effective as of January 1, 2022

The Employee Assistance Program (“the EAP”) is a professional, confidential service you can use to get help without charge to you whenever you or an eligible dependent needs assistance in dealing with personal or work-related pressures, work-life, wellness, child or elder care, obtaining educational or daily living resources, and legal and financial assistance. Consultants are available 24 hours a day, seven days a week at 877-533-2363 for assistance. The program is provided through a contract with ComPsych.

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## Eligibility and Cost

All active employees and their eligible dependents can participate in the EAP. You and your eligible dependents become eligible to participate in the EAP on the first day of your employment. Your coverage and coverage of your eligible dependents is automatic; you do not need to take any steps to enroll. There are no forms to enroll.

### Eligible Dependents and Household Members

Eligible dependents are your family members and typically include:

- Your spouse/domestic partner
- Your unmarried dependent children (whether or not they reside with you)

**Independent contractors and contracted employees are not eligible to participate in the EAP.**

### Cost

*Company* pays the full cost of participation in the Employee Assistance Program for you and your eligible dependents (see “What Services Are Covered”). If you are on a leave, your EAP coverage will continue at no cost to you. You have no obligation to pay any premium or fees for EAP coverage or to obtain EAP services; there are no premiums, co-payments, co-insurance, or deductible payments applicable to EAP services.

### Termination of Coverage

An eligible employee and his/her eligible dependents will cease to be eligible to participate in the EAP effective at the end of the month following the date if one or more of the following events occurs:

- employment termination;
- death of an eligible employee;
- on the date one or more of the following events occurs: expiration of a leave of absence which provided for continued participation; or
- *Company* terminates the EAP.

See the “Continued Coverage Under the EAP” section below for important information about continuation of coverage following a “Qualifying Event” that leads to loss of coverage.

## Obtaining EAP Services

To obtain EAP services, you can reach ComPsych 24 hours a day, seven days a week. When you or a family member needs help, simply:

- Call ComPsych toll-free at **877-533-2363**
- Visit GuidanceResources Online at [www.guidanceresources.com](http://www.guidanceresources.com) and enter the Company's ID: **MY5848i**

When you call the EAP, a ComPsych representative will:

- Ask questions to help identify the problem and how it is affecting you,
- Find out what solutions you have tried and explore other solutions and resources, and
- Help you develop a plan to solve the problem.

## Covered Services

### Counseling Services

The EAP provides CONFIDENTIAL counseling services which provide you and your eligible dependents with professional counseling and referral services, an opportunity to confidentially discuss personal and family problems for guidance and problem-solving help, and quality care by professional counselors and therapists. You and each of your eligible dependents are eligible to participate in up to 5 sessions per problem per year.

The EAP can help you and your eligible dependents by:

- Identifying the problem
- Recommending the appropriate counseling therapy and/or treatment
- Providing referrals to community service providers and treatment programs
- Giving confidential consultation

Contact with the EAP can be initiated in the following ways:

- Manager or supervisor referral in order to help you improve job performance
- Direct contact by employee

While the Company cannot require you to participate in the program, your supervisor, manager, or Human Resources representative may recommend counseling. Your compliance may be a condition of continued employment in cases of serious performance or behavioral problems. However, participation in the EAP does not protect you from disciplinary action, up to and including termination of employment, if you continue to exhibit unacceptable performance or behavior. Essentially, you are responsible for the successful resolution of your problem through your willingness to seek help and treatment.

When you call ComPsych, a GuidanceResources counselor will listen to your concerns and obtain a referral for you to talk to an expert counselor located in your area. During the appointment, the counselor will discuss your situation and help you develop a plan of action. You can visit a ComPsych counselor up to 5 times at no cost to you. If it is determined that you need additional services beyond 5 visits, your medical plan may cover any additional care.

A ComPsych GuidanceResources counselor can help you deal with a variety of concerns, including:

- Depression
- Marital and family conflicts
- Drug and alcohol abuse
- Major life changes
- Relationship issues
- Anxiety and stress

- Eating disorders

You may access an EAP counselor by calling ComPsych at 877-533-2363. The EAP counselor will help you evaluate and work through your problem. In many cases, the problem is resolved within the 5 sessions available through the EAP.

### **If You Need Additional Help**

In cases where your situation calls for care beyond ComPsych's counseling services, the medical coverage you have may help.

### **FamilySource**

The FamilySource program offers customized research, tailored educational materials, and prescreened referrals for child care and elder care and referrals for adoption, education, pet care and personal convenience services. FamilySource is available by calling the EAP toll-free number: **877-533-2363**.

In-house specialists will discuss your work-life needs with you telephonically and will research resources in your area and send you a list of providers in your area that match your needs, to the extent available. The telephone consultation, educational materials, and referral list are provided to you at no charge. You will be financially responsible for the actual work-life services that you select, such as the child care or educational costs. If you choose to obtain any of the referred work-life services, such as elder care or child care, it will be up to you to evaluate each resource to determine the right arrangement for your needs and to monitor the quality and appropriateness of the arrangement. The EAP does not endorse or recommend any of the dependent care or other work-life resources identified. While ComPsych makes reasonable efforts to ensure the accuracy of the information provided about dependent care and other work-life resources, the information is obtained from those resources and ComPsych cannot guarantee the accuracy of the information. The final decision about your dependent care and other work-life arrangements is yours.

An online library of articles and tools on work-life issues is also available through ComPsych's website, [GuidanceResources Online](#) (**company ID = MY5848i**), which can help you obtain information for your life issues. At GuidanceResources Online, you can:

- Obtain information about personal, emotional, and life issues
- Read *Helpsheets*<sup>SM</sup> on your topic
- Review frequently asked questions
- Purchase expert-endorsed products and services to support your issue or lifestyle need
- Get book recommendations

## **FinancialConnect**

The FinancialConnect program offers you and your eligible dependents unlimited telephone access to certified public accountants, certified financial planners, and other financial professionals who are trained and experienced in handling personal financial issues and can offer consulting on issues such as family budgeting, credit problems, tax questions, investment options, money management and retirement programs. You may access FinancialConnect through the EAP toll-free number, 877-533-2363.

## **LegalConnect**

The LegalConnect program provides you with unlimited telephone consultation with attorneys who are trained and dedicated to providing legal information and assistance to clients with such issues as divorce, bankruptcy, family law, real estate purchases and wills. You may access LegalConnect through the EAP toll-free number, 877-533-2363.

If you need legal representation or extended assistance that cannot be provided by phone, LegalConnect professionals can provide referrals to local attorneys. You or your eligible dependent will receive a free 30-minute consultation and, thereafter, a 25% reduction in fees for representation if you choose one of ComPsych's network attorneys.

## **Services Not Covered by the EAP**

The EAP does not include any of the services listed below. Some of these services may be covered by your medical plan.

- Treatment by someone other than an EAP counselor for whom (i) a ComPsych representative opened a case, or (ii) you completed an electronic referral request through ComPsych's online EAP self-referral process
- Charge for failure to keep a scheduled visit
- Charges for completing claim forms
- Services or supplies not needed for treatment or not approved by your EAP counselor
- Services or supplies required or paid for under any government law, including workers' compensation or other federal, state or local law
- Services or supplies rendered by a family member or for which there is no charge
- Services rendered before coverage became effective or after coverage ends
- Treatments, procedures or devices considered experimental or investigational in nature as determined by the EAP administrator
- Treatment for any problem or condition that cannot be resolved in brief counseling (for example, a psychosis or any other condition that requires inpatient treatment or more than 6 sessions)
- Psychiatric services or other medical care (including prescription drugs)
- Inpatient treatment
- Treatment for any physical illness
- Direct treatment for mental retardation, learning disabilities, or autism
- More than 5 EAP sessions per problem per year
- Psychological, psychiatric, neurological, educational, or IQ testing
- Remedial education services, such as evaluation or treatment of learning disabilities, developmental and learning disorders, behavioral training, and cognitive rehabilitation
- Medication, medication management, or treatment of any condition for which medication is required, unless you are seeing a doctor who prescribes medication for that condition and oversees your use of the medication
- Evaluations for fitness for duty of excuses for leaves of absence or time off
- Examinations and diagnostic services in connection with obtaining employment or a particular employment assignment, admission to or continuing in school, securing any kind of license (including professional licenses), or obtaining any kind of insurance coverage
- Court-mandated counseling, evaluations required by a state or federal judicial officer or other

- governmental agency or to be used in legal actions of any kind (for example, child custody proceedings)
- Testimony in legal proceedings or preparation for legal proceedings
- EAP services when you sue, or threaten to sue, *Company*
- Aversion therapy
- Biofeedback and hypnotherapy

## Reimbursement of Claims

ComPsych pays EAP counselors directly. You do not have to file EAP claims. There are no co-pays, coinsurance, or deductibles. **You should not make any payment to a provider for EAP services.** You should not make any agreement with an EAP counselor to pay the counselor for EAP services. However, you will be responsible to pay for services that you obtain without having ComPsych open an EAP case with a particular EAP counselor.

## Claim Determinations

Because ComPsych pays all EAP counselors directly, **you should not make any payment to a counselor for EAP services.**

### Adverse Determinations of a Claim for EAP Benefits

If your request for EAP benefits is wholly or partially denied, ComPsych will notify you of its denial of benefits as appropriate. ComPsych will send you a written notice that will:

- give the specific reason or reasons for the denial decision;
- identify Plan provisions on which the decision is based;
- describe any additional material or information necessary for an appeal review and an explanation of why it is necessary;
- explain the review procedure, including time limits for appealing the decision and to sue in federal court;
- identify your right to receive, free of charge, upon your request, any internal rules, guidelines, protocols or similar criteria relied on in making the decision; and
- identify your right to receive, free of charge, upon your request, an explanation of the clinical judgment on which the decision is based (if the denial is based on exclusion of experimental treatment services or because EAP services are not clinically appropriate).

### Appeals of Adverse Determinations

If you believe your request for EAP benefits was denied in error, you may appeal the decision. Your appeal must be submitted in writing within 180 days following your receipt of a denial notice to insert address.

Your appeal should state the reasons why you feel your request for EAP benefits is valid and include any additional documentation that you feel supports your request for EAP benefits. You can also include any additional questions or comments. You may submit written comments, documents, records and other information relating to your appeal, whether or not the comments, documents, records or information were submitted in connection with the initial request for EAP benefits. Upon request, ComPsych will make relevant documents available.

The review of the initial decision will consider all new information, whether or not it was presented or available for the initial decision. The person who conducts the appeal review will be different from the person(s) who originally denied your request for EAP benefits and will not report directly to the original decision maker or prior reviewer.

You or your authorized representative will be notified of the appeal decision within the following time frames:

- If the appeal involves an adverse determination on a request for EAP services or a pre-service adverse determination relating to reimbursement, within thirty (30) days of ComPsych's receipt of the request for appeal.
- If the appeal involves a post-service adverse determination relating to reimbursement, within sixty (60) days of ComPsych's receipt of the request for appeal.

### **Appeal Decisions**

ComPsych will send you or your authorized representative a written decision on your appeal. If the denial is upheld on appeal, the notice will include the following information:

- the specific reason or reasons for the denial decision;
- identification of Plan provisions on which the decision is based;
- notice of your right to receive, free of charge, upon your request, any internal rules, guidelines, protocols or similar criteria relied on in making the decision;
- notice of your right to receive, free of charge, upon your request, an explanation of the clinical judgment on which
- the decision is based (if the denial is based on exclusion of experimental treatment services or because EAP services are not clinically appropriate);
- notice of your right to receive, free of charge, upon your request, reasonable access to, and copies of, all documents, records and other information relevant to the appeal; and
- notice of your right to bring a civil lawsuit under ERISA §502(a).

If you do not agree with the final decision of ComPsych, you may bring a lawsuit in federal district court. You may not initiate a legal action for the benefits unless you utilize all available appeal processes, as described above.

### **Continued Coverage under the EAP**

You and your eligible dependents may choose to have EAP coverage continued in a number of situations that ordinarily end your coverage. This coverage is provided according to the Consolidated Omnibus Budget Reconciliation Act and is often referred to as "COBRA" coverage. If you elect "COBRA Medical Plan" coverage, you and your eligible dependents will remain eligible for all EAP services until that coverage ends. You will not have to pay the cost of any continued coverage. The cost of the coverage is paid by *Company*.

### **Additional Information about the EAP**

You should be aware of the following additional information about the EAP.

#### **Assignment of Benefits**

You may not assign, transfer, or convey any of the benefits provided by the EAP.

#### **Implied Promises**

Nothing in this booklet says or implies that participation in the EAP guarantees your continued employment with *Company*. There is also no guarantee that the EAP will continue indefinitely. *Company* reserves the right to change the EAP Administrator at any time. If this happens, you will be notified.

#### **Plan Termination or Amendment**

*Company* reserves the right to terminate, discontinue, change or amend the EAP at any time, for any reason.

**Confidentiality**

Discussions with the EAP counselor are confidential. The EAP will not share information identifying your use of the EAP without your permission, except as required or permitted by law. You will have an opportunity to evaluate the services provided by the EAP by completing a confidential survey.

**Administrative Information****Plan Name**

The name of the Plan is the *Company* Employee Assistance Program.

**Plan Sponsor**

*Company* is the sponsor of the Plan.

**Plan Type**

The Plan is a welfare benefit plan established for the benefit of *Company's* employees.

**Plan Administrator**

The Employee Assistance Program is administered by the Plan Administrator under the provisions of a service contract between *Company* and ComPsych. In all cases, uniform policies will be followed. Administration of the EAP will not discriminate against any individual or group of individuals. To the extent that a responsibility has not been delegated to another party – including ComPsych – the Plan Administrator has the full and exclusive right and discretionary authority to construe the terms of the Plan to resolve any ambiguities and to decide any question that may arise with the Plan's application or administration, including the determination of eligibility for benefits. The Plan Administrator also has the discretionary authority to make factual determinations as to whether any individual is entitled to receive any benefits under the Plan. The Plan Administrator has delegated to the EAP Administrator its authority to make final determinations regarding eligibility for benefits, claims for benefits, and procedures for obtaining benefits under the EAP. Decisions of the EAP Administrator are final and binding upon all parties.

**Plan Year**

The Plan Year is January 1, 2021 through December 31, 2021. Records of the Plan are maintained on a plan year basis.

**Plan Funding and Sources of Financing**

*Company* pays the entire cost of the EAP. Employees do not pay any contribution.

**EAP Administrator**

The EAP administrator is ComPsych Corporation, 455 N. Cityfront Plaza Drive, Chicago, IL 60611



## Definitions

Certain terms and phrases used to describe the Employee Assistance Program (“EAP”) may not be familiar to you. It is important that you understand how the EAP works and your rights as a participant, so some important terms are defined below. The defined terms will be capitalized throughout the document for your convenience.

**Authorized Representative:** An authorized representative is a person you authorize, in writing, to act on your behalf or a person given authority by court order to request treatment or submit claims on your behalf.

**Brief Counseling:** Brief counseling is outpatient counseling that is problem-focused, that emphasizes skills and strengths, and encourages practicing new behaviors; that involves setting goals achievable in a one to five month period; that involves interpretation, suggestions, and a framework provided by the counselor; that you may utilize alone or together with others who are important to resolution of your problem.

**Claim:** A claim is a request for benefits made in accordance with the Plan’s procedures.

**Employee Assistance Program (EAP) Administrator:** The EAP Administrator is ComPsych.

**Employee Assistance Program (EAP) Counselor:** An EAP Counselor is a psychologist, clinical social worker, marriage, family, and child counselor or other behavioral health professional who is licensed under state law to deliver counseling services and who is contracted with the EAP Administrator to provide EAP services.

**Employee Assistance Program (EAP):** An EAP is a systematic program to help employees resolve personal problems, such as family conflict, drug or alcohol abuse, stress, marital discord, personal finances, and other personal problems, and to provide training, consultation, and other management services relating to the effective utilization of the EAP by an employer and its employees.

**ERISA:** The Employee Retirement Income Security Act of 1974, the federal law that regulates group health plans and other employee plans.

**Plan:** Unless otherwise stated, the term Plan refers to the *Company* Employee Assistance Program (EAP).

## Your Rights Under ERISA

As a participant in the *Company* Employee Assistance Program, you are entitled to certain rights and protections under ERISA. ERISA provides that all Plan participants are entitled to the following rights:

### Receive Information about Your Plan and Benefits

- You may examine, free of charge, all documents governing the Plan. These documents are available at the Plan Administrator's office and at other specified locations. The annual report is also filed with the U.S. Department of Labor and is available at the Public Disclosure Room of the Employee Benefits Security Administration.
- You may obtain copies of all documents governing the operation of the Plan by writing to the Plan Administrator. The Plan Administrator may make a reasonable charge for the copies.
- You also may receive a summary of the Plan's annual financial report. The Plan Administrator is required by law to furnish each participant with a copy of this Summary Annual Report (SAR).

### Continue EAP Coverage

You may continue EAP coverage for yourself or your eligible dependents if there is a loss of coverage under the EAP as a result of a qualifying event. Review this Summary Plan Description and the documents governing the EAP for the rules governing your COBRA continuation coverage rights.

### Prudent Actions by Plan Fiduciaries

In addition to creating rights for Plan participants, ERISA imposes duties upon the people who are responsible for Operating the Plan. These people are called "fiduciaries" of the Plan. They have a duty to act prudently and in the interest of you and other Plan participants and beneficiaries.

No one, including your employer or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a benefit to which you are otherwise entitled, or from exercising your rights under ERISA.

### Enforcement of Your Rights

If your claim is denied, in whole or in part, the Plan Administrator must give you a written explanation of the reason for denial, and you can obtain copies of documents relating to the decision without charge, regardless of whether such information was relied upon in making the decision. You also have the right to have the Plan Administrator review and reconsider your claim within certain defined time schedules.

Under ERISA, there are steps you can take to ensure the above rights. For instance, if you request a copy of Plan documents or the latest annual report from the Plan Administrator and do not receive them within 30 days, you may file suit in a federal court. In such a case, the court may require the Plan Administrator to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the Plan Administrator.

If your request for benefits is denied or ignored, in whole or in part, you may file suit in a state or federal court after exhausting Plan appeals processes. You will have one year following the completion of the appeal process to file suit. You may also file suit in a federal court if you disagree with a decision, or the lack of a decision, concerning the qualified status of a medical child support order. If Plan fiduciaries misuse the Plan's money or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a federal court.

The court will decide who should pay court costs and legal fees. If you are successful, the court may

order the person you have sued to pay these costs and fees. If you lose (for example, if the court finds your claim is frivolous), it may order you to pay these costs and fees.

### **Assistance with Your Questions**

If you have any questions about the Plan, you should contact the Plan Administrator. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory, or at the following address:

Division of Technical Assistance and  
Inquiries Employee Benefits Security  
Administration  
U.S. Department of Labor  
200 Constitution Avenue,  
NW Washington, D.C.  
20210

You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

### **About This Booklet**

This booklet, called a Summary Plan Description (SPD), highlights key features of the *Company* Employee Assistance Program. The Plan is governed by this SPD and a legal contract with ComPsych. If there is a conflict between this SPD and the contract, the contract will always govern. This SPD will govern in the event of a conflict between it and any written or verbal explanation from *Company* or its Plan representatives.