



**SUMMARY OF BENEFITS**

On the first day of the month, following full-time employment with Fugro EarthData, Inc., all eligible new hires are qualified to participate in the benefits program outlined below. (See exception: 401(k))

**1 MEDICAL INSURANCE**

Protection against the high cost of health care is important to your and your family’s well-being and financial security. The medical program offered by Fugro provides you with a comprehensive coverage of medical providers via the Blue Cross Blue Shield (BCBS) national network.

The chart below summarizes your medical and prescription drug benefits. Because of BCBS’s national network, the vast majority of Fugro employees will be able to receive network benefit levels most of the time.

Medical Program Features	In-Network*	Out-of-Network**
<b>Annual Deductible</b> Individual Family	\$300 \$600	\$500 \$1,000
<b>Annual Out-of-Pocket Maximum (excludes deductible)</b> Individual Family	\$3,000 \$3,000 per individual, capped at \$6,000	\$5,000 \$5,000 per individual, capped at \$10,000
<b>Coinsurance</b>	80%	60% of allowable amount
<b>Lifetime Maximum Benefit</b>	\$2 million	
<b>Office Visits</b> Primary Care Specialist	You pay: \$25 copay \$35 copay	The program pays: 60% of allowable amount after deductible 60% of allowable amount after deductible
<b>Adult Preventive Care</b>	The program pay: 100% (based on age-specific guidelines)	The program pays: 60% of the allowable amount after deductible (based on age-specific guidelines)
<b>Well-Child Preventive Care</b>	The program pay: 100% (based on age-specific guidelines)	The program pays: 60% of the allowable amount after deductible (based on age-specific guidelines)
<b>Urgent Care</b>	You pay: \$30 copay	You pay: \$30 copay
<b>Emergency Room</b>	You pay: \$100 copay (waived if admitted)	You pay: \$100 copay (waived if admitted)
<b>Hospital Care</b> Inpatient Outpatient	The program pays: 80% after \$250 copay (per admission) and deductible 80% after deductible	The program pays: 60% of allowable amount after \$250 copay (per admission) and deductible 60% of allowable amount after deductible
<b>Lab Tests, X-rays, MRI, CT, &amp; PET</b>	The program pays: 80% after deductible	The program pays: 60% of the allowable amount after deductible
<b>Mental Health &amp; Substance Abuse</b> Inpatient (up to 30 days) Outpatient (up to 45 days)	The program pays: 80% after \$250 copay (per admission) and deductible 80% after deductible	The program pays: 60% of allowable amount after \$250 copay (per admission) and deductible 60% of allowable amount after deductible
<b>Prescription Drug Program</b>	<b>Retail Pharmacy</b> (30 day supply, annual deductible does not apply)	<b>Mail Order Pharmacy</b> (90-day supply, annual deductible does not apply)
<b>Generic Brand (without a generic equivalent)</b> <b>Brand (with a generic equivalent)</b>	You pay: \$10 or 30%, whichever is less \$25 or 30%, whichever is greater 70%	You pay: 30% 30% 70%

\*Copays do not apply toward the deductible or the out-of-pocket maximum

\*\*Allowable amount is the maximum benefit amount BCBS will pay for a covered service



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To gain access to provider directories, obtain detailed overviews of the benefit coverage(s), take advantage of the personal health manager and a variety of discounts offered by BCBS, as well as numerous other tools and resources you need to manage your health, please visit [www.bcbstx.com/fugro](http://www.bcbstx.com/fugro).

All medical premiums are deducted from employee's paychecks on a pre-tax, bi-weekly basis.

Coverage Level	Your Cost Per Month	Your Cost Per Pay (based on 26 pays)
Employee Only	\$92.00	\$42.46
Employee + Spouse	\$220.00	\$101.54
Employee + Child(ren)	\$200.00	\$92.31
Family	\$286.00	\$132.00

### 2 DENTAL INSURANCE

Taking care of your teeth is an important part of maintaining your overall good health. Fugro offers comprehensive dental coverage to keep you and your family smiling.

The chart below summarizes your dental benefits.

Dental Program Features	Program Benefit
<b>Annual Deductible</b> Individual Family	\$50 \$150
<b>Lifetime Orthodontia Deductible</b>	\$50
<b>Annual Individual Benefit Maximum</b> (excludes orthodontia)	\$1,500
<b>Preventive Care</b> Exams, cleanings, and bitewing X-rays (2X a year)	100% (no deductible)
<b>Routine Care</b> Fillings, extractions, and oral surgery	80% after deductible
<b>Major Care</b> Bridgework and dentures	50% after deductible
<b>Orthodontia Care</b> For dependent children to age 19	50% after deductible
<b>Lifetime Orthodontia Benefit Maximum</b>	\$1,500

To locate a list of dental providers in your area, please visit [www.bcbstx.com/fugro](http://www.bcbstx.com/fugro). As with the medical program, by visiting in-network providers you will realize a much greater savings than if you visit providers outside of the network.

All dental premiums are deducted from employee's paychecks on a pre-tax, bi-weekly basis.

Coverage Level	Your Cost Per Month	Your Cost Per Pay (based on 26 pays)
Employee Only	\$17.60	\$8.12
Employee + Spouse	\$35.22	\$16.26
Employee + Child(ren)	\$40.47	\$18.80
Family	\$52.80	\$24.37

### 3 VISION INSURANCE

Protecting your eyesight is important to your quality of life. Your Fugro vision care benefits make it easy and affordable to get the care you and your family need.

When you enroll in the vision program, you can choose from a national network of over 30,000 providers in both private practice and retail chains. While you can choose to see any provider you wish, you'll receive the highest



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level of benefits when you choose a provider in the Spectera (part of United Healthcare Specialty Benefits) vision network.

The chart below summarizes your vision benefits.

Vision Program Features	In-Network*	Out-of-Network
<b>Regular Exam</b> <i>Once every 12 months</i>	Program pays: 100% after \$10 copay	Reimbursed up to: \$40 after \$10 copay
<b>Materials**</b>	\$25 copay	
<b>Standard Eyeglass Lenses</b> <i>Once every 12 months</i> Single Bifocal Trifocal Lenticular	Program pays: 100% after material copay 100% after material copay 100% after material copay 100% after material copay	Reimbursed up to: \$40 after material copay \$60 after material copay \$80 after material copay \$80 after material copay
<b>Contact Lenses***</b> <i>Once every 12 months</i> Covered-in-full selection (4 boxes) Non-Standard (e.g. toric, gas permeable) Medically necessary	Program pays: 100% after material copay \$125 allowance after material copay \$210 allowance after material copay	Reimbursed up to: \$125 allowance after material copay \$125 allowance after material copay \$210 allowance after material copay
<b>Frames</b> <i>Once every 24 months</i> Covered-in-full selection Private Practice Retail Stores (all other)	Program pays: 100% after material copay \$50 allowance after material copay \$130 allowance after material copay	Reimbursed up to: \$45 after material copay \$45 after material copay \$45 after material copay

\*Out-of-pocket expenses that may be a result of the excess amount over the allowance will be subject to a 25% to 40% negotiated discount.

\*\*You pay one \$25 copay for eyeglass lenses and frames combined

\*\*\*Medically necessary contact lenses are determined at the provider's discretion. The allowance is a one-time benefit. You cannot apply part of the allowance at one time and apply the remainder at a later time.

To locate a list of vision providers in your area, please visit [www.uhcspecialtybenefits.com/home/](http://www.uhcspecialtybenefits.com/home/) and click Vision Insurance.

All vision premiums are deducted from employee's paychecks on a pre-tax, bi-weekly basis.

Coverage Level	Your Cost Per Month	Your Cost Per Pay (based on 26 pays)
Employee Only	\$5.37	\$2.48
Employee + Spouse	\$10.69	\$4.93
Employee + Child(ren)	\$11.20	\$5.17
Family	\$16.77	\$7.74

## 4 FLEXIBLE SPENDING ACCOUNTS (FSA)

Most of us have expenses for medical services and supplies that are not reimbursed by any medical, dental, vision, or other plan. Also, some of us have childcare or elder care expenses that we incur so that we can work. If you anticipate expenses in either of these categories, enrolling in a Flexible Spending Account (FSA) can save you money.

FSA lets you use untaxed money to pay for certain health care and dependent care expenses for you and your dependents. These are expenses that are not covered by any insurance plans or other sources. By participating, you lower your federal, state, and Social Security taxes and increase your take-home pay.

There is no cost to participate in a FSA. You choose the pretax payroll contributions to make to your account; in fact, by participating in a FSA you are actually using dollars you would have paid in taxes to help pay for your health and/or dependent care costs. Minimum contributions to the plan are \$350 annually for both health care and dependent care. Maximum contributions are \$3,000 per year for health care expenses and \$5,000 per year for dependent care.



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Eligible expenses for a health care FSA are: copayments and deductibles, prescription drugs, over the counter medications, laser eye surgery, contacts and eyeglasses, dental and orthodontia expenses, and any other expenses not covered by your medical, dental, and vision programs. For a comprehensive list of covered expenses, please visit [www.fsaplan.info](http://www.fsaplan.info).

If you enroll in the Fugro EarthData sponsored FSA plan, you can visit [www.hfsbenefits.com](http://www.hfsbenefits.com) at any time to view your account balance and claim status.

Please consult with your tax preparer to determine if this would be a beneficial plan for you.

For enrollment information, please see your human resources coordinator.

### 5 LIFE INSURANCE

All full-time employees are eligible for a company paid, Group Term Life Insurance Benefit equal to two times (2X) your annual salary, (rounded to the nearest \$1,000) up to a maximum of \$300,000. Since the group term life insurance is a company paid benefit, it is also considered to be a taxable benefit for any coverage over \$50,000 per year. You may elect to limit your company group life insurance benefit to \$50,000 to avoid taxable consequences.

Additional term life policies at 1X, 2X, or 3X your annual salary are also available full-time employees. This plan is fully employee-funded, but offered at a group rate, affording the desired amount of insurance at a cost-effective premium. Payments are made through bi-weekly payroll deductions. However, with this particular program, the deductions are not on a pre-tax basis, and may, therefore, be discontinued at any time throughout the year. If the voluntary life insurance is not elected during the 30 day enrollment period, all applications will be subject to medical underwriting.

Employees may also elect life insurance for their dependents at a minimal cost of \$0.85 per pay. Spouses can receive \$10,000 in coverage and dependent children can receive \$5,000.

### 6 SALARY CONTINUATION PROGRAM (IN LIEU OF SHORT TERM DISABILITY)

In the event that you are unable to perform your regular duties (or light duties as proposed by the company) due to a certified disabling medical condition, Fugro provides eligible employees the benefit of a self-funded salary continuation plan during your disability.

If the medical condition is determined to be disabling (including pregnancy), your base salary will be continued for a period of up to 90 days of medical disability according to the following schedule:

0-1 completed years of service	Use PTO (if any), no company paid benefit
After 1 yr through 5 completed yrs of service	Must use PTO (up to 12 days), then 60% of regular rate
After 5 yrs through 10 completed years of service	Must use PTO (up to 12 days), then 80% of regular rate
After 10 completed years of service	Must use PTO (up to 12 days), then 100% of regular rate

See your employee handbook for additional information on the Salary Continuation Program.

### 7 LONG TERM DISABILITY

In the event that you are unable to perform your regular duties due to a certifying disabling medical condition and have exhausted your salary continuation benefit (90 days following the medical event), you are eligible to receive 60% of your pre-disability earnings (up to a \$10,000 per month maximum) under the company funded long term disability benefit. A monthly benefit would be payable for the duration of the disability or age 65, whichever occurs first.

### 8 401(K)

If you are a full-time employee, you are eligible to enroll in the Fugro 401(k) program through Prudential at the beginning of the quarter following your date of employment. Within the next few weeks, Prudential will be sending you information on the plan highlights and the variety of investment choices that are available to you.

In the interim, you can visit Prudential's educational website for interactive tools and calculators, financial planning courses, and a collection of financial articles. The Retirement's Education and Planning (PREP) website can be found at [www.prudential.com/prep](http://www.prudential.com/prep).



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Once Prudential has received your personal information (following your first pay), you can visit [www.prudential.com/online/retirement](http://www.prudential.com/online/retirement) to set up your account and enroll in the plan. After your account has been established, you can visit this site at any time to review your balance or investment performance and make changes to your account. If you do not have internet access, you can contact Prudential directly at 1-877-PRU-2100 to enroll or make account changes.

Fugro EarthData offers a committed match that matches your contribution on a % for % basis for the first 4%, then 50% on the next 2% of your contributions. There is no vesting period and the money is vested to your account immediately. Please see the chart below for matching:

Your Contribution	Company Match
1%	1%
2%	2%
3%	3%
4%	4%
5%	4.5%
6%	5%

### 8 EMPLOYEE ASSISTANCE PROGRAM

All employees and their immediate family members may seek assistance with any type of personal problem. Six office counseling sessions per family per mental health problem, one legal phone consultation per problem (maximum of three per year), and two telephone financial planning sessions are available each year at no cost to the employee. See your benefits binder for additional information.

### 9 PAID TIME OFF

Paid Time Off (PTO) is a bank of accrued time, earned by employees to be used as vacation, sick, or personal time off. The company encourages all employees to use their PTO on a regular basis. PTO is accrued beginning the first day of employment and can be taken without restrictions with supervisory approval and as long as adequate leave time has been accrued to cover the employee request. Accrual rates are based on years of service from the date of hire and are outlined below:

Length of Service	Hours Per Pay	Days Per Year
0-1 year	2.47	8
1-2 years	5.24	17
2-3 years	5.54	18
3-4 years	5.85	19
4+ years	6.47	21

### 10 TUITION ASSISTANCE

Fugro EarthData reimburses employees for educational coursework that is related to their current or proposed future career with the company. See your employee handbook for additional information on this program.

**NOTICE:** Based on business circumstances, Fugro reserves the right to add, delete, or change any benefit program (or associated cost) at any time.