RLS Logistics

COLD CHAIN EXPERTS



Employee Benefits Guide

JANUARY 1, 2027 - DECEMBER 31, 2027 PLAN YEAR

Welcome to RLS Logistics!

RLS Logistics strives to offer you and your dependents a competitive and comprehensive benefits package.

We encourage you to review this guide carefully and take the time to educate yourself about the benefit options available to you and your family.

Questions?

If you have questions about your benefits, please call the Conner Strong & Buckelew Member Advocacy Center at **800.563.9929** (Monday through Friday, 8:30 am to 5:00 pm ET), or email **CSSteam@connerstrong.com**. You can also submit a request online at **www.connerstrong.com/memberadvocacy**.



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BENEFIT RESOURCES

Member Advocacy Center



MEMBER ADVOCACY PROGRAM

Do you need help resolving a benefits issue?

Member Advocacy Center (MAC), provided by Conner Strong & Buckelew, allows you or your family members to speak to a specially trained and licensed Member Advocate who can help you get the most out of your benefits. The Member Advocacy Center can assist you with benefit claim issues, coverage questions, and enrollment inquiries.

If you or your family members are eligible to enroll in the employee benefits plans, you can take advantage of this great service.

Contact the Member Advocacy Center at **800.563.9929** (Monday through Friday, 8:30 am to 5:00 pm), or via email at **CSSteam@connerstrong.com**.

You can also submit a request online at **www.connerstrong.com/memberadvocacy**.

YOUR RESOURCES

Important Enrollment Information

WHO IS ELIGIBLE?

As a full-time employee of RLS Logistics, you and your eligible family members can enroll in the Medical, Dental and Vision plans offered herein.

Please take the time to review the plans and associated costs, and share the information with your family. Eligible family members include:

- Your legally married spouse
- Dependent children up to age 26
- For NJ residents: Dependent children have the option to remain covered after reaching age 26 up to age 31 by paying a separate, discounted rate based on the premiums billed to the Company

HOW TO ENROLL

- Current elections carry over automatically
- Employees who want to make a change must do so on ADP by December 4th.

Important:

DON'T FORGET!

Once you have made your elections, you will not be able to change them until the next Open Enrollment period, unless you experience a qualified change in status.

Qualified status changes include: marriage, divorce, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, change in residence due to an employment transfer for you, your spouse, commencement or termination of adoption proceedings, or change in your spouse's benefits or employment status.

If an eligible dependent had other coverage and such coverage is lost, that dependent may be eligible for enrollment during a "special enrollment period," which is usually the 31-day period following the date that other coverage was lost, due to a qualified change in status.

You must notify HR within 31 days of experiencing a qualified status change.

MEDICAL PLAN OPTIONS

Meritain

Below is a summary of the three Meritain medical plans available to you. Meritain utilizes the Aetna provider network. To locate a doctor or facility call **800.343.3140** or visit **www.aetna.com/docfind/custom/mymeritain**. Select "**Aetna Choice POS II**" as your network.

	PPO Base Plan	PPO Middle Plan	PPO Buy-Up Plan
IN-NETWORK BENEFITS			
Plan Year Deductible Individual / Family	$3,000 / $6,000**	$1,250 / $2,500	$500 / $1,000
Coinsurance (Percentage plan pays)	70%	80%	80%
Plan Year Out of Pocket Maximum* Individual / Family	$7,000 / $14,000	$5,500 / $11,000	$4,000 / $8,000
Preventive Care	100% - no deductible	100% - no deductible	100% - no deductible
Office Visits Primary Care Physician Specialist	 70% after deductible 70% after deductible	 $30 copay $50 copay	 $30 copay $50 copay
Outpatient Surgery	70% after deductible	80% after deductible	80% after deductible
Inpatient Hospital Care	70% after deductible	80% after deductible	80% after $500 copay
Hospital Emergency Room	70% after deductible	80% after $100 copay	80% after $100 copay
Urgent Care Center	70% after deductible	$50 copay	$50 copay
Outpatient Lab **X-Ray** **Complex Radiology** (MRI, Cat/PET Scan)	70% after deductible 70% after deductible 70% after deductible	80% after deductible 80% after deductible 80% after deductible	80% after deductible 80% after deductible 80% after deductible
OUT-OF-NETWORK BENEFITS			
Plan Year Deductible* Individual / Family	$10,000 / $20,000	$5,500 / $11,000	$3,000 / $6,000
Coinsurance (Percentage plan pays)	50% after deductible	50% after deductible	60% after deductible
Plan Year Out-of-Pocket Max* Individual / Family	$20,000 / $40,000	$15,000 / $30,000	$10,000 / $20,000

* The Plan Year runs from January 1, 2027 through December 31, 2027

** True Family Deductible: The entire family deductible must be satisfied if you cover any dependent child(ren) and/or a spouse before the plan begins to pay for covered services.

By registering as a member at **www.meritain.com**, you can access claim and benefit information, download forms, and so much more! Click "Register" and follow the instructions. Your group and member ID information can be found on your medical ID card.

ADDITIONAL MEDICAL RESOURCES

Teladoc

Teladoc is a telehealth service available to all Meritain Health Plan members at no cost. Teladoc connects you to doctors who can diagnose and treat non-emergency issues right over the phone, no in-person visit needed. They can even write a prescription, if needed. If you need routine medical or behavioral health care and your primary care provider is not available, visit **Teladoc.com** or call **800-835-2362** to get started.

PRIMARY CARE PROVIDERS

Teladoc is a national network of U.S. board-certified doctors available on-demand 24/7/365 to diagnose, treat and prescribe medication, if necessary, for many of your medical issues. It's quality care when you need it at a price you can afford.

SPECIALIST VISITS

Teladoc offers high-quality virtual care for specialists such as:

- Behavioral health
- Dermatology
- Pediatric specialties
- Neurology
- Neurosurgery
- Orthopedics
- Diabetes care
- Psychiatry

Find the full list of available services at **www.Teladoc.com**.



TEL-A-NURSE HOTLINE

The Tel-A-Nurse Hotline guides you to the proper care channels. Think of Tel-A-Nurse as a first line of defense for medical questions and advice*. Getting answers from a registered nurse 24/7 is as simple as calling **877-543-5061**. There is no copay or cost for using the service.

Chat with a nurse about coughs, colds, insect bites, arthritis pain and sunburn. Other reasons to call include:

- Stomach pain
- Ulcers
- Hay fever
- Asthma
- Diabetes
- Arthritis
- Heat exhaustion
- Burns
- Flu
- Acid reflux
- Medications
- Medical tests
- Losing weight Croup
- Measles
- Children's bed-wetting
- Infant vomiting
- Children's fever
- Mumps
- Sore throat
- Back pain
- Managing cholesterol
- Managing high blood pressure
- Developing an exercise plan
- Quitting smoking
- Questions to ask your doctor

* This service is not for medical emergencies or urgent needs and should not replace your primary care provider.

ADDITIONAL MEDICAL RESOURCES

CancerCARE- Cancer Management

The CancerCare program is available to Meritain members . This program is designed to help the member better manage their cancer diagnosis. The CancerCare program is available at no additional cost to the member.

NO ONE SHOULD HAVE TO FACE CANCER ALONE.

CancerCARE, operated by INTERLINK, is included in your health plan and is a comprehensive cancer management program designed for employees and covered dependents. Whether you have a history of battling cancer, or have recently been diagnosed, highly-experienced nurse advocates are here to help. The CancerCARE team members will work as your advocate to ensure you receive evidence-based care, developed nationally by leading cancer Centers of Excellence, with tested and proven results.

A cancer diagnosis for you or a covered family member, that is identified by Meritain through health plan data and pre-certification information, will be referred directly to the CancerCare triage team as a new oncology case. The triage team wants to ensure they can perform outreach to engage you or your family member, and provide help as soon as the referral form comes in.

Medical plan participants can also call to register directly into the program as soon as a cancer diagnosis is made, or if they had cancer previously. By enrolling at time of diagnosis, the CancerCARE program can make the most positive impact on outcomes and success in recovery, as there will be no missed opportunity for assistance in the early steps and planning phase of cancer treatment. When you activate the CancerCARE benefit, you are taking a pivotal step on the road to wellness.

You can easily register at the time of diagnosis by calling the triage team directly at **877.640.9610**, or by enrolling via the web at **www.cancercareprogram.net**. Note that if you register online, you should expect a phone call from an intake coordinator to get additional information.

To learn more, watch the following intro video: **www.youtube.com/watch?v=9YNaAUUtR5M**. It explains the program, what to expect, and how the CancerCARE Intake Coordinators can help RLS employees and their dependents enrolled in the Meritain medical plan who are facing a cancer diagnosis.

ADDITIONAL MEDICAL RESOURCES

Livongo Diabetes Management

DIABETES MANAGEMENT, SIMPLIFIED

Livongo for Diabetes is a health benefit for all employees and dependents under the medical plan. Livongo provides members with an advanced blood glucose meter, unlimited strips and lancets that can be ordered right from your meter, and personalized coaching to help you best manage your condition.

More Than a Standard Meter:
The Livongo meter is digitally connected and provides real-time tips and automatically uploads a member's blood glucose readings, making log books a thing of the past.

The Livongo team is able to interact with the member immediately if/when testing reveals a blood glucose result that may be a danger to the member.

Strips at No Cost to Members:
Members get the strips and lancets they need at no extra cost. When members are about to run out, Livongo ships more strips and lancets, right to their door.

Coaching Anytime and Anywhere:
Livongo coaches are Certified Diabetes Educators who are available anytime by phone, text, or mobile app to give members guidance on their nutrition and lifestyle.



GETTING STARTED

Text "GO MERITAIN" to 85240 to learn more and join. You can also join by visiting **join.livongo.com/MERITAIN/register**, or call **800.945.4355** and use registration code: **MERITAIN**.

PRESCRIPTION DRUG PLAN OPTIONS

Meritain

Below is a summary of the three Meritain prescription drug plans available to you. When you elect medical coverage you are automatically enrolled in the corresponding prescription drug plan.

	PPO Base Plan	PPO Middle Plan	PPO Buy-Up Plan
PRESCRIPTION DRUG BENEFITS - RETAIL (UP TO A 30-DAY SUPPLY)			
Generic	$20*	$20	$20
Preferred Brand	$40*	$40	$40
Non-Preferred Brand	$70*	$70	$60
Specialty	Member pays 20% coinsurance to a max of $150 per script		
PRESCRIPTION DRUG BENEFITS - MAIL ORDER (UP TO A 90-DAY SUPPLY)			
Generic	$40*	$40	$40
Preferred Brand	$80*	$80	$80
Non-Preferred Brand	$140*	$140	$120
Specialty	Member pays 20% coinsurance to a max of $150 per script		

* Copay applies after the medical plan deductible is satisfied

TRADITIONAL STEP THERAPY

Some medications have lower cost equivalents available. Step Therapy requires that you first try a more cost-effective medication before your plan will cover a more expensive option. Usually Step 1 medications are generic medications that have been proven effective for people with your condition.



MANDATORY MAINTENANCE CHOICE

Mandatory Maintenance Choice offers members the option of receiving their 90-day maintenance medications at a CVS Pharmacy or at CVS Caremark Mail Service Pharmacy. Members will pay a reduced copay for a 90-day supply of their medication.

You may fill your maintenance medication at a non-CVS retail pharmacy two times. After the second fill, you will be notified by CVS Caremark, via mail, letting you know that you must use the CVS Caremark Mail Service or your local CVS retail pharmacy for any future fills for that maintenance medication.

To get started at a CVS Pharmacy, go to **www.caremark.com** to find a location for pick up or visit your local CVS Pharmacy. To sign up for mail service for the first time, register at **www.caremark.com/startnow** or call **800.875.0867**.

LIFE INSURANCE
Prudential

All active, full-time employees regularly working at least 30 hours each week are eligible to receive Life insurance through Prudential.

BASIC LIFE AND AD&D INSURANCE

All benefit eligible employees are automatically enrolled in the Basic Life and AD&D plan. RLS pays 100% of the cost for this benefit.

Basic Life/AD&D Insurance	
Life/AD&D Benefits	$25,000
Benefit Reduction	Coverage will be reduced by 35% at age 65 and 50% at age 70



SMARTCONNECT

Powered by SmartMatch

Staying on your employer's coverage may be easy, but it's not always the best option. In fact, Medicare plans could provide more coverage at a lower cost than your employer's plan. SmartConnect is an exclusive program offered to RLS employees and dependents looking to fully explore the benefits of Medicare coverage. The program is free for all employees and dependents under the medical plan!

SmartConnect puts your specific needs first and matches you with the education and the experienced advisor you need to make the best decision for you. SmartConnect gives you access to plans from national insurance carriers. Whether you're planning to continue working or looking to retire, a SmartConnect advisor can guide you towards a solution that best fits your needs.

ABOUT SMARTMATCH INSURANCE AGENCY

SmartMatch Insurance Agency is an independent Medicare insurance agency that helps consumers research, compare, and purchase Medicare insurance plans.

We provide an unfiltered view of the entire range of options and prices available to you.

Comparing Medicare and employer health insurance offerings can be frustrating. We do the work for you, all you need to decide is how much you'd like to save.



GETTING STARTED

Call **855.248.1648 TTY: 711** or visit **https://connect.smartmatch.com/pareto**

DENTAL PLAN OPTIONS

Principal

Below is a summary of the two Principal Dental plan options available. Both the PPO Base and PPO Buy-Up plans include 100% coverage for preventive services.

To locate participating dental providers visit **www.principal.com** and click on "**Employers**" > "**Employee Benefits**" > "**Find a Dentist**" and follow the instructions.



	PPO Base Plan		PPO Buy-Up Plan	
BENEFIT	IN-NETWORK		OUT-OF-NETWORK	
Deductible Individual / Family	None	$300 / $600	$50 / $100	$50 / $100
Preventive Service Exam Complete Series X-Rays Bitewing X-Rays Cleanings Fluoride Treatments Sealants	Plan pays 100%	Plan pays 50% after deductible	100% - no deductible	100% - no deductible
Basic Services Composite Restorations Amalgam Restorations Simple Extractions Periodontics Endodontics Oral Surgery	Plan pays 25%	Plan pays 25% after deductible	Plan pays 80% after deductible	Plan pays 80% after deductible
Major Services Crowns Inlays and Onlays Fixed Bridges Full and Partial Dentures	Plan pays 25%	Plan pays 25% after deductible	Plan pays 50% after deductible	Plan pays 50% after deductible
Annual Maximum	$1,000	$1,000	$1,000	$1,000
Orthodontia (Up to age 19)	N/A	N/A	Plan pays 50%	Plan pays 50%
Orthodontia Lifetime Maximum (Per patient)	N/A	N/A	$1,000	$1,000

VISION PLAN

Aetna

Eligible employees have the option of enrolling in the following Vision plan through Aetna. To locate participating vision providers visit **www.aetna.com**.



Aetna Vision Plan

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
Exam		
Routine/Comprehensive Eye Exam	$10 copay	$32 Reimbursement
Standard Contact Lens Fit/Follow-Up	Member pays discounted fee of $55	Not Covered
Premium Contact Lens Fit/Follow-Up	Member pays 90% of retail	Not Covered
Lenses		
Single Vision Lenses	$10 copay	$25 Reimbursement
Bifocal Lenses	$10 copay	$40 Reimbursement
Trifocal & Lenticular Lenses	$10 copay	$64 Reimbursement
Standard Progressive Lenses	$75 copay	$40 Reimbursement
UV Treatment, Tint (Solid And Gradient)	Member pays discounted fee of $15	Not Covered
Standard Plastic Scratch Coating	Member pays discounted fee of $15	Not Covered
Standard Polycarbonate Lenses-Adult	Member pays discounted fee of $40	Not Covered
Standard Polycarbonate Lenses (to age 19)	Member pays discounted fee of $40	Not Covered
Standard Anti-Reflective Coating	Member pays discounted fee of $45	Not Covered
Photochromic/Transitions Plastic	Member pays discounted fee of $75	Not Covered
Polarized And Other Lens Add Ons	Member pays 80% of retail	Not Covered
Contact Lenses		
Conventional Contact Lenses	$100 Allowance (Plus an additional 15% off balance)	$80 Reimbursement
Disposable Contact Lenses	$100 Allowance	$80 Reimbursement
Medically Necessary Contact Lenses	$0 copay	$200 Reimbursement
Frames		
Any frame available, including frames for prescription sunglasses	$100 Allowance (Additional 20% off balance over allowance)	$50 Reimbursement
Frequency		
Vision Exam	Once every 12 months	Once every 12 months
Lenses	Once every 12 months	Once every 12 months
Frames	Once every 12 months	Once every 12 months

Weekly Employee Contributions

Medical & Prescription Drug Benefits

	MERITAIN PPO BASE PLAN	MERITAIN PPO MIDDLE PLAN	MERITAIN PPO BUY-UP PLAN
Employee Only	$34.16	$92.43	$134.88
Employee + Spouse	$197.36	$323.09	$520.82
Employee + Child(ren)	$122.52	$223.69	$359.60
Employee + Family	$284.62	$447.55	$710.70

Dental Benefits

	PRINCIPAL PPO BASE PLAN	PRINCIPAL PPO BUY-UP PLAN
Employee Only	$1.09	$2.90
Employee + Spouse	$4.01	$7.73
Employee + Child(ren)	$5.47	$12.55
Employee + Family	$8.93	$18.54

Vision Benefits

	AETNA VISION PLAN
Employee Only	$1.53
Employee + Spouse	$2.90
Employee + Child(ren)	$3.06
Employee + Family	$4.50

EMPLOYEE ASSISTANCE PROGRAM

Aetna Resources for Living

Emotional support with unlimited telephonic consultations. Talk with a licensed behavioral health professional anytime!

In-person, telephonic or tele-video counseling sessions at no cost!

- Stress
- Family conflict
- Coping with change
- Work-life balance
- Anxiety and depression
- Substance abuse
- Relationships
- Setting goals

DISCOUNTS

Discounts on fitness club memberships, brand name products and services powered by LifeMart.

ADDITIONAL FEATURES:

- **Talkspace** is an online therapy platform makes it easy and convenient for you to connect with a licensed behavioral therapist anywhere at any time. You can message through the app 24/7, 365 days a year and no appointment is required.
- **myStrength** is a unique wellness portal, easily accessible on the go with the myStrength mobile app!
- **Aetna Mobile App**: Download the app to get access to free resources like stress busters and mood trackers.



TO ACCESS YOUR EAP:

- Call: **866-370-4842**
- Visit: **www.resourcesforliving.com/login**
- Username: **RLSMANAGED**
  Password: **RLS123**
- Visit the RLS BenePortal or EAP website for more information.

Additional Benefits & Resources

The following programs offer you support for living a healthy life and preventing illness. These programs are available at no cost to all employees, regardless of whether or not you are enrolled in our benefit plans.

GOODRX

Compare drug prices at local and mail-order pharmacies and discover free coupons and savings tips.

Learn more at **connerstrong.goodrx.com**

HUSK MARKETPLACE

Achieving optimal health and wellness doesn't have to be complicated or expensive. Access exclusive best-in-class pricing with some of the biggest brands in fitness, nutrition, and wellness with HUSK Marketplace (formerly GlobalFit).

Learn more about HUSK Marketplace by visiting **marketplace.huskwellness.com/connerstrong**

HEALTHYLEARN

This resource covers over a thousand health and wellness topics in a simple, straight-forward manner. The HealthyLearn On-Demand Library features all the health information you need to be well and stay well.

Learn more at **healthylearn.com/connerstrong**



BENEFIT PERKS

This feature provides a broad array of services, discounts and special deals on consumer services, travel services, recreational services and much more. Simply access the site and register and you can begin using it now.

Learn more at **connerstrong.corestream.com**

LEGAL NOTICES

To access the following Legal Notices, please go to **www.rlsbenefits.com**:

- Special Enrollment Notice
- Newborns' and Mothers' Health Protection Act
- Women's Health and Cancer Rights Act
- Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)
- Important Notice from RLS Logistics About Your Prescription Drug Coverage and Medicare
- Continuation Coverage Rights Under COBRA
- Insurance Marketplace Notice

HOW TO SAVE ON HEALTH CARE

Save on Time and Money!

Keep non-emergencies out of the ER!

Avoid long waits at the Emergency Room and reduce your out-of-pocket costs by utilizing Teladoc and Urgent Care Centers for ailments that are not life-threatening. Both of these options provide fast, effective care—when you need care quickly. Unnecessary visits to the ER can be very costly. When you keep non-emergencies out of the ER, you save both time and money! ***And the best part is, you can do this in the privacy of your home or office.***

Know Where to Get Care

Before you go to the ER, consider whether your condition is truly an emergency or if you can receive care from Teladoc or Urgent Care instead. Below are just a few examples of where you can go and when:

Teladoc	Urgent Care Center	Emergency Room
• Cold/Flu • Allergies • Animal/ insect bite • Bronchitis • Skin problems • Respiratory infection • Sinus problems • Strep throat • Pink eye/ Eye irritation • UTI/ Urinary issues	• Allergic reactions • Bone x-rays, sprains or strains • Nausea, vomiting, diarrhea • Fractures • Whiplash • Sports injuries • Cuts and minor lacerations • Infections • Tetanus vaccinations • Minor burns and rashes	• Heart attack/ Stroke symptoms • Chest pain, numbness in limbs or face, difficulty speaking, shortness of breath • Coughing up or vomiting blood • High fever with stiff neck, confusion or difficulty breathing • Sudden, unexplained loss of consciousness • Excessive blood loss

Please note: This communication is not intended to provide medical advice. If your medical need is more than urgent or life-threatening, please go to the Emergency Room or call 9-1-1.

Save on your maintenance medications:

Your health plan requires that long-term (maintenance) medications be filled in 90-day supplies after two fills at a non-CVS pharmacy. You must use either CVS Caremark Mail Service Pharmacy or a local CVS Pharmacy for all future fills.

Why switch?

You'll pay only two copays for a 90-day supply — instead of three — and enjoy the convenience of fewer trips or home delivery. CVS Caremark will notify you by mail after your second fill at a non-CVS pharmacy. To avoid higher costs, be sure to switch before your third fill.

Get started today:

- For CVS pickup, visit **caremark.com**
- For mail delivery, go to **caremark.com/startnow**, scan the QR code, or call **800-875-0867**

Switch now to stay covered, save money, and simplify your medication routine.

Using Your Benefits

Set up your Teladoc account so you're ready when illness strikes!

Whether you're on vacation or it's the middle of the night, the care you need is just a call or click away. You and your family members have unlimited on-demand access to doctors by phone or video chat from your mobile device—24/7/365. **The cost for a consultation is $40 or less depending on which plan you are enrolled in!**

Register today!

It's quick and easy online. Visit **www.teladoc.com** and click "Get Started Now" and either sign in if already registered, or under "New to Teladoc?" click "Get Started" to register. You can also call Teladoc for assistance over the phone.

Why wait for the care you need? Contact Teladoc and feel better now! Visit **www.teladoc.com** or call **1.800.TELADOC (835.2362)**.

Use Urgent Care Centers for non-emergency, time-sensitive ailments

Urgent Care Centers are, on average, 80% less costly than Emergency Rooms. They are a convenient, cost-effective medical care alternative when your primary care physician is unavailable or your ailments cannot be treated through Teladoc. Typically no appointments are necessary and most Urgent Care centers are **open 7 days a week!**

See the savings!*

Medical Services	Emergency Room	Urgent Care	Estimated Savings
Asthma	$825	$80	**90%**
Bronchitis	$795	$123	**85%**
Stitches	$445	$45	**90%**
Strep Throat	$678	$112	**84%**
UTI	$940	$108	**88%**

* Pricing shown is for illustrative purposes. Contact your medical carrier for actual pricing details.



BENEFIT RESOURCES

Carrier Contacts



CARRIER/VENDOR	PHONE NUMBER	WEBSITE/EMAIL
Meritain Medical Benefits	800-925-2272	www.meritain.com
CVS Caremark Prescription Drug	866-475-7589	www.caremark.com
Principal Dental Benefits	800-986-3343	www.principal.com
Aetna Vision Benefits	800-872-3862	www.aetna.com
Aetna Resources for Living EAP	866-370-4842	www.resourcesforliving.com/login
Conner Strong & Buckelew Benefits Member Advocacy Center	800-563-9929	www.connerstrong.com/memberadvocacy cssteam@connerstrong.com

Questions?

If you have questions about your benefits, please call the Conner Strong & Buckelew Member Advocacy Center at **800.563.9929** (Monday through Friday, 8:30 am to 5:00 pm ET), or email **CSSteam@connerstrong.com**. You can also submit a request online at **www.connerstrong.com/memberadvocacy**.

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This benefit summary provides selected highlights of the employee benefits program at RLS Logistics It is not a legal document and shall not be construed as a guarantee of benefits nor of continued employment at RLS Logistics. All benefit plans are governed by master policies, contracts and plan documents. Any discrepancies between any information provided through this summary and the actual terms of such policies, contracts and plan documents shall be governed by the terms of such policies, contracts and plan documents. RLS Logistics reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time. The authority to make such changes rests with the Plan Administrator.