

# 2026

# **AFNA Benefits Booklet**

#### Before reading this booklet, we recommend practicing the following relaxation tip.

**Hand Pressure Technique:** Gently applying pressure to the center of the palm, or to the fingers, to relieve stress, calm the mind, and get rid of negative thoughts.

### **About this booklet**

This booklet outlines the benefits offered to our employees for the calendar year 2026.

#### When to Use It as a Resource:

- Open Enrollment: Benefit elections will take effect on January 1.
- New Hires: Benefits elections are effective on the Date of Hire. Enrollment must be completed within 30 days of employment.
- Qualifying Life Events: Changes in coverage can occur outside of Open Enrollment due to life events, such as marriage, divorce, childbirth, or a death in the family. These changes must be submitted within 30 days of the event.

Please take the time to review this booklet to assist you in making informed enrollment decisions that are the best fit for the health, wellness and financial need of you and your family. **Detailed plan design and documents are available on our Benefits Website at afnabenefits.com.** 

# 2026 Action Items



- Gather the necessary information before beginning the enrollment process. Please make sure that you have the Taxpayer Identification Number (TIN)-usually a Social Security Number for each covered individual. This include spouse, domestic partner, and dependent children.
- Please make sure the NAME for the individual matches the name on the SSN card for ACA filing. For ACA auditing please verify date of Birth for covered individual to avoid eligibility error.
- Elections are required if electing a Flexible Spending Account (FSA) or a Health Savings Account (HSA).



ajipen is excited to welcome the new plan year 2026!

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# **Benefits Overview**

At Ajinomoto Foods North America, our employees are our most important resource. We know that benefits are more than just insurance—they are an important part of your total compensation and a reflection of our commitment to you and your family.

Preventive care coverage, including annual check-ups, and screenings at certain ages for breast, colon, prostate, lung and cervical cancer is 100% covered for HMO medical plans and in-network for PPO and HDHP medical plans, even before you've met your deductible.

**Medical, Dental & Vision Coverage** – Choose from several plan options to fit your needs, including PPO, HDHP, HMO, and regional networks.

**Company-Provided Benefits** – Basic Life and AD&D, Short- and Long-Term Disability, and access to an Employee Assistance Program, all provided at no cost to you.

**Voluntary Benefits** – Options such as Accident, Critical Illness, and Hospital Indemnity coverage, plus Pet Insurance and Legal services, for added protection and peace of mind.

**Financial Benefits** – A 401(k) retirement plan with company match, Flexible Spending Accounts (FSA), and Health Savings Account (HSA) options.

**Wellness Programs** – Wellness reimbursements, Personify Health programs, and incentives to help you stay active and healthy.

**Perks & Work-Life Resources** – Discounts through PerkSpot and additional resources to support your lifestyle.

# **Eligibility**

You are eligible for AFNA benefits if you are:

✓ An active, full-time, and regular employee working over 30 hours per week.

#### Your dependents are eligible if they are:

- √ Your legal spouse or domestic partner¹
- ✓ Your and/or your domestic partner's child(ren)² up to the end of the month they reach age 26
- √ Your disabled child(ren)³.
- <sup>1</sup> Contributes towards your domestic partner and domestic partner's child(ren) coverage is taxable and is referred to as "imputed income."
- <sup>2</sup> Includes natural, step, legally adopted/or a child placed for adoption, or a child under your legal guardianship.
- <sup>3</sup> If designated disabled before age 19

#### **Dual Coverage**

Benefits cannot be coordinated between two AFNA plans. If both you and your spouse (DP) are employed by AFNA, dual enrollment in the same AFNA plan is not permitted. Each of you may elect individual coverage, or one may choose to cover the other as a dependent.

#### **Spousal Surcharge**

If your spouse is eligible for benefits through their employer and chooses to enroll in an AFNA medical plan, a spousal surcharge of \$100 per month will apply.

# Enrollment Choose How You Enroll!

This year, there are a few different ways to complete your enrollment. Whether you're on your phone or using a desktop, follow the option that works best for you.

#### **For Mobile Enrollment**



#### Visit or Scan the QR code

https://secure.bswift.com/default.aspx?abbrev=ajinomoto



#### Download the bswift Mobile App

Company Code: Ajinomoto Foods

#### **For Desktop Enrollment**

Login into UKG Pro on a desktop or computer at https://n34.ultipro.com or AFNAHR.ultipro.com for SSO users.

**User Name:** Initial of first name and last name>four "0000">Employee ID # **First-time Sign-up Password:** Your birth date MMDDYYYY

Once you log in follow this path: Myself>Benefits>Manage My Benefits



# **Medical Plans**

	Anthem PPO In-Network		Anthem HDHP In-Network			
Annual Deductible	\$1,000 (I) / \$3,00	0 (F)	\$2,750 (I) / \$5,550 (F)			
Primary Care Doctor Visit	\$25 copay		You pay 0% after deductible			
Specialist Doctor Visit	\$50 copay		You pay 0% after	You pay 0% after deductible		
Out-of-Pocket Maximum	\$3,000 (I) / \$9,00	00 (F)	\$4,500 (I) / \$8,000 (F)			
Emergency Room	\$200 copay + 20	% after deductible	You pay 0% after deductible			
Urgent Care	\$40 copay		You pay 0% after deductible			
Virtual Care	\$25 copay		\$25 copay			
Pharmacy Copays (Retail / Mail Order) Generic Preferred Brand Non-Preferred Brand Specialty	\$10 / \$20 \$35 / \$70 \$65 / \$130 20% coinsurance up to \$100 max.		In-network, before deductible \$20			
Rates	Weekly	Semi-Monthly	Weekly	Semi-Monthly		
Employee Only Employee + Spouse Employee + Child(ren) Family	\$42.69 \$97.62 \$80.77 \$130.62	\$92.50 \$211.50 \$175.00 \$283.00	\$35.08 \$78.46 \$65.77 \$105.23	\$76.00 \$170.00 \$142.50 \$228.00		

	Kaiser HMO (soCal Only)		SIMNSA HMO (Mexico Services C	only)	
Annual Deductible	\$1,000 (I) / \$2,00	0 (F)	None	None	
Primary Care Doctor Visit	\$30 copay		\$10 copay		
Specialist Doctor Visit	\$30 copay		\$10 copay	\$10 copay	
Out-of-Pocket Maximum	\$3,000 (I) / \$6,000 (F)		\$6,350 (I) / \$12,700 (F)		
Emergency Room	30% after medical deductible		\$250 copay		
Urgent Care	\$30 copay		\$25 (MX) / \$50 (Outside MX)		
Virtual Care	<b>\$0</b>		\$10 copay		
Pharmacy Copays (Retail / Mail Order) Generic Preferred Brand Non-Preferred Brand Specialty	Rx Deductible \$100 \$30 after \$100 Rx deductible \$30 after \$100 Rx deductible 20% coinsurance, \$150 max		\$15 \$15 \$15 \$15		
Rates	Weekly	Semi-Monthly	Weekly	Semi-Monthly	
Employee Only Employee + Spouse Employee + Child(ren) Family	\$42.69 \$104.31 \$76.38 \$148.15	\$92.50 \$226.00 \$165.50 \$321.00	\$11.54 \$29.54 \$26.77 \$36.46	\$25.00 \$64.00 \$58.00 \$79.00	

# **Dental Plans**

<b>Cigna</b>	DPPO In-Network		DHMO (ca-only)		SIMNSA (Mexico Serv Only)	/ices
Deductible	\$50 (I) / \$150	(F)	None		None	
Preventive costs cov- ered	100%		100%		100%	
Basic costs covered	80%, after deductible		Copay schedule		Copay schedule	
Major costs covered	50%, after deductible		Copay schedule		Copay schedule	
Annual Maximum	\$2,000		None		None	
Orthodontia	Plan pays 50%, no deductible, up to \$2,000/ person max		Copay schedule		Copay schedule	
Rates	Weekly	Semi- Monthly	Weekly	Semi- Monthly	Weekly	Semi- Monthly
Employee Only Employee + Spouse Employee + Child(ren) Family	\$2.48 \$5.55 \$6.11 \$8.95	\$5.37 \$12.02 \$13.23 \$19.39	\$1.84 \$4.22 \$5.19 \$6.38	\$3.99 \$9.14 \$11.26 \$13.82	\$0.92 \$2.31 \$2.08 \$3.00	\$2.00 \$5.00 \$4.50 \$6.50

#### **PPO**

"PPO" refers to a Preferred Provider
Organization, a type of insurance
plan that offers both in-network and
out-of-network coverage. In-network
care offers lower out-of pocket costs,
eliminates balance billing, streamlines
claims paperwork, and facilitates
easier financial planning. Out-ofnetwork costs can add up quickly.
Please review your co-insurance limits.

### **HDHP with HSA**

The HDHP with HSA plan provides insurance coverage and a tax-advantaged way to help save for current and future medical expenses. This type of plan gives you greater flexibility and discretion over how you use your health care dollars.

**Employer Contributions Amounts** (deposits will occur on pay dates):

- ✓ Employee Only: \$500/ per calendar year\*
- ✓ Employee Plus Dependent(s): \$1,000/ per calendar year\*

# **SIMNSA Mexico HMO**

This HMO plan is very affordable. It has the lowest cost for coverage and low or no copays.

However, there are some requirements:

- 1. You must work in San Diego County, Imperial County or Tijuana;
- 2. You must use a SIMNSA network provider in Mexicali, Tecate or Tijuana. All medical prescriptions must be purchased and picked up in Mexico; and
- 3. The SIMNSA dental provider location is only in Tijuana.

<sup>\*</sup> Prorated based on entry date

# **Vision Plans**

eyemed"	Base Plan		Buy-Up Plan	
Deductible	\$10 copay		\$10 copay	
Single/bifocal/trifocal lenses	Discounts available		\$10 copay	
Frames	Discounts available		\$200 allowance + 20% off bal- ance	
Contact Lenses	Discounts available		\$200 allowance + 15% off balance	
Rates	Weekly	Semi-Monthly	Weekly	Semi-Monthly
Employee Only Employee + Spouse Employee + Child(ren) Family	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$1.10 \$1.76 \$2.31 \$2.92	\$2.39 \$3.82 \$5.00 \$6.34

### Tip: Kaizen

(Continuous Improvement)

The philosophy of making small, consistent improvements in daily life, which helps reduce stress by focusing on manageable, positive steps.

# Kaiser Permanente's Vision & Hearing Aid

#### **Included With Medical Plan**

- Eyeglasses or contact lenses every 24 months
- Amount in excess of \$175 Allowance (Allowance not subject to Plan Deductible)
- Kaiser Permanente's Hearing aids every 36 months
- Amount in excess of \$2,500 Allowance per aid (Allowance not subject to Plan Deductible)

# **Anthem/Personify Hearing Aid**

#### **Included With Medical Plans**

In-Network Shown	PPO In-Network	HDHP In-Network
Exam and Fittings Hearing Aid Therapy	20% co-insurance after Deductible is met	0% co-insurance after Deductible is met

# **Company Provided Benefits**

#### Provided at no cost to you!

Protect your loved ones and your income with comprehensive life and disability coverage. These plans provide financial security and peace of mind when it matters most.

#### **Basic Life and AD&D**

Benefit is equal to 1x your base salary up to \$500k for all full-time employees. The IRS requires you to be taxed on the value of basic life insurance coverage over \$50,000, called "imputed income".

### **Short-Term Disability (STD)**

Benefit is 60% of your base weekly pay up to the plan maximum after 7 days and up to 26 weeks for all full-time employees.

### Long-Term Disability (LTD)

After 6 months, this benefit is paid out on a monthly basis. The benefit is 60% of your base weekly pay, **up to the plan maximum of 5 years**, after exhausting Short-Term Disability.

### **Employee Assistance Program**

Free, confidential support for mental health, legal, and financial guidance. All employees and their household members are eligible.

**Web ID for registration:** MY5845i **Call:** 800-964-3577

### **PerkSpot**

PerkSpot offers exclusive savings on everyday purchases, services, and entertainment.

Visit: afna.perkspot.com Call: 866-606-6057

# **Voluntary Benefits**

#### You purchase these benefits yourself for extra protection.

These plans can help cover out-of-pocket costs, replace income, or offer peace of mind for you and your family beyond your core health coverage.

### Voluntary Life & AD&D

Pays a benefit to your loved ones if you pass away or are seriously injured.

#### **LegalEASE**

Affordable legal support for personal needs like wills and estate planning.

#### **Pet Insurance**

Helps cover vet bills, treatments, and emergencies.

Enroll: metlife.com/getpetquote

Call: 1-800-GET-MET8

#### **Accident Plan**

Covers costs from injuries, including medical, transport, and recovery.

#### **Critical Illness**

Lump-sum payment if diagnosed with a covered illness (e.g., cancer, heart attack, stroke).

### **Hospital Indemnity**

Cash benefits for hospital stays to help with deductibles, copays, and other costs.

# **Financial Wellness**

Flexible Spending Accounts (FSAs) let you use pre-tax dollars to pay for certain health care and dependent day care costs.

A **Health Care FSA (HCFSA)** helps cover out-of-pocket health care expenses, like deductibles, copays, eyeglasses, and other costs not paid by your health, dental, or vision plans. You can use your account for your own eligible expenses or those of your dependents.

If you are enrolled in a High Deductible Health Plan with a Health Savings Account, you may only enroll in a **Limited Health Care FSA (LHCFSA)**, which covers dental and vision expenses for you and your dependents.

You can contribute any amount from \$50 up to \$3,400 each year. Remember, if you have money left in your HCFSA or LHCFSA at the end of the year, up to \$500 will carry over.

When you first enroll in an HCFSA or LHCFSA, you will receive a WEX debit card preloaded with your annual election amount. Use this card for eligible expenses at medical, dental, pharmacy, or vision providers. Please keep your card for future use and retain all receipts, as you may need to provide them to WEX Health during the plan year.

For a list of covered services, see IRS Publication 502 (https://www.irs.gov/forms-pubs/about-publication-502)

The **Dependent Day Care FSA (DCFSA)** helps pay for eligible day care costs while you and your spouse, if you have one, work full-time. You cannot use this account for your dependents' health care expenses. Covered costs include day care providers, babysitters, summer or holiday camps, and adult care providers. For more details, see IRS Publication 503. To get reimbursed, you'll need to provide your day care provider's Federal ID number or Social Security Number. You can only change your annual contribution if you have a Qualified Change in Status Event, as defined by the IRS. You may contribute between \$104 and \$7,500 per year, or **\$2,500 if you are a highly compensated employee**.

# Fidelity 401(k) Plan

#### **Eligibility Note:**

This plan is available to U.S.-based employees only. Expats are not eligible to participate in the Fidelity 401(k) Plan.

New Hire Eligibility: Your eligibility is as follows: 1st of the month after completing your first 30 days of hire. Auto enroll of 3% if no election made during New Hire Eligibility period.

Employees can contribute a portion of their paycheck to the retirement plan. Our plan offers two options, a pre-tax option, which means the money is deducted before taxes are taken out and a Roth option, which means you pay taxes on the money now, and upon retirement the money and earnings are tax free. Employers may also match a portion of the employee's contributions.

The company matches 100% of the first 3% of your eligible compensation, and 50% of the next 3% of your eligible compensation.

**Loans:** Our plan permits one loan per participant. Please review the SPD for further details and restrictions.

# **Preventive Care & Wellness**

Preventive Screenings by Age*				
Age	Screenings			
18-29	Blood pressure, cholesterol, HIV, sexually transmitted infections (STIs), HPV, meningitis, flu shot			
30-39	Continue screenings from 18–29, add: cervical cancer (Pap smear or HPV test), breast cancer (mammogram), colorectal cancer (stool test or colonoscopy)			
40-49	Continue screenings from 30–39, add: prostate cancer (PSA test), lung cancer (low-dose CT scan if smoker)			
50-59	Continue screenings from 40–49, add: abdominal aortic aneurysm screening (men only), bone density test (women), colorectal cancer (colonoscopy every 10 years)			
60-69	Continue screenings from 50–59, add: lung cancer (low-dose CT scan if smoker, up to age 80), prostate cancer (PSA test, consider stopping if risk factors are low)			
70-79	Continue screenings from 60–69, consider: colorectal cancer (colonoscopy less frequently, based on risk factors), lung cancer (low-dose CT scan if smoker, up to age 80)			
80+	Blood pressure, cholesterol, HIV, consider individual screening recommendations based on risk factors			
These recommendations are based on the U.C. Proventive Convices Task Force (UCDCTF) quidelines and may				

These recommendations are based on the U.S. Preventive Services Task Force (USPSTF) guidelines and may vary depending on individual health status and risk factors.

# **Get Ready to Lace Up!**

Ajinomoto partners with Personify Health to help you build healthy habits, have fun with coworkers and experience the lifelong rewards of better wellbeing.

Join now at <u>afnabenefits.com/personify</u> and earn up to \$100 in incentives!\*

\*If you receive wellness incentives, the value of those incentives will be considered imputed income and are subject to applicable payroll taxes.



### **Wellness Reimbursement**

#### Ajinomoto's Wellness Reimbursement Program to Promote Activity and Exercise

Ajinomoto Foods North America will reimburse regular full time employees one time up to \$100 on an Annual Calendar Year basis for employees/family members (those family members who would qualify as a dependent under our group insurance) toward the cost of qualified wellness program expenses.

**Qualified Expenses may include the following:** exercise classes, athletic event registration fees, Fitness equipment and devices, Nutritional Classes, Wellness and fitness apps, and Kids' Sports camps.

How to Access: Log in to UKG>Myself>HR Help>Benefits>AFNA Wellness Reimbursement

# **AFNA Medical Plan Resources & Relaxation Techniques**

Prioritize Emotional Well-being with Self-Compassion

#### **Anthem PPO & HDHP**

Emotional health is an important part of your overall health, you can receive support to assist you and your family.

Log in to https://www. anthem.com/ca, go to My Health Dashboard, choose Program and select Emotional Well-being Resources. NO Additional Cost

Personalized, one-on-one coaching; build a support team; Practice mindfulness on the go. Live and on-demand webinars.

#### So. CA Kaiser Permanente

On-Demand Self-Care Apps at NO Additional Cost. Get help with anxiety, stress, sleep, mood, and more. Anytime you need it. To get started visit https://www.kp.org/selfcareapps

Calm is the number one app for meditation and sleep. You can choose from hundreds of programs and activities such as sleep stories, mindful moment video, guided meditations.

Headspace Care offers 1-on-1 emotional support coaching and self-care activities to help with many common challenges. Coaches are available by text 24/7.

#### **SIMNSA Health Care**

SIMNSA is committed to promoting prevention and comprehensive health care. Discover our educational tools and resources, specifically designed support our members' health and wellness journey: Health & Wellness Talks Calendar. https://simnsa.com/calendar/list/

#### Japanese Relaxation Techniques



#### Kinhin

A slow, deliberate walk with focused attention on each step to calm the mind and promote mindfulness.



#### Wabi-Sabi

Appreciating impermanence and accepting beauty in imperfection to reduce the pressure to be perfect.



#### Ikigai

The practice of finding one's purpose in life, which contributes to overall well-being and can reduce stress

# 2026 Holiday Schedule

Thur., Jan. 1 New Year's Day

Mon., Jan. 19 Martin Luther King Day

Fri., Apr. 3 Good Friday

Mon., May 25 Memorial Day

Fri., July 3 Independence Day

Mon., Sept. 7 Labor Day

Thur., Nov. 26 Thanksgiving Day

Fri., Nov. 27 Day after Thanksgiving

Thur., Dec. 24 Christmas Eve

Fri., Dec. 25 Christmas Day

# **Contacts**

Benefit	Provider	Phone Number	URL		
Service Center					
Benefits Support Center	Piper Jordan Advocacy	855-557-1467	benefitsupport@ ajinomotofoods.com		
	Medical				
Personify HDHP, Personify PPO	Anthem	877-706-6268	anthem.com		
Kaiser HMO (CA-Only)	Kaiser Permanente	800-464-4000	kp.org		
SIMNSA HMO (San Diego Plant Only)	SIMNSA	619-407-4082	simnsa.com		
	Pharmacy for Anti	nem Plans			
Prescription Drug	Navitus	844-268-9789	navitus.com		
	Dental				
SIMNSA	SIMNSA	619-407-4082	simnsa.com		
DPPO, DHMO	Cigna Dental	866-494-2111	cigna.com		
	Vision				
Base Plan, Buy-up Plan	EyeMed	866-939-3633	eyemed.com		
	Employee Assistance F	Program (EAP)			
Employee Assistance Program (EAP)	Guidance Resources	800-964-3577	guidanceresources.com		
	Financial Wel	Iness			
PerkSpot Discount Program	PerkSpot	866-606-6057	perkspot.com		
401(k) Matching Program	Fidelity	800-835-5097	fidelity.com		
	Life and Disal	bility			
Voluntary Life and AD&D, Basic Life and AD&D	Voya	800-992-3522	voya.com		
Short-Term Disability, Long-Term Disability	The Hartford	888-301-5615	thehartford.com		
Spending and Savings Accounts					
HSA, HCFSA, DCFSA, LPFSA	Wex	866-451-3399	wex.com		
Wellness					
Personify Wellness Program	Personify	-	personifyhealth.com		
Worklife					
Pet Insurance	MetLife Pet	800-438-6388	metlife.com		
Legal Plan	LegalEASE	713-785-7400	legaleaseplan.com		
Hospital Indemnity, Accident Plan, Critical Illness Plan	Aflac	800-992-3522	aflac.com		

# Benefit Support Center A Service Advocate is ready to help.

#### **Claims Advocacy:**

We can help you or members of your immediate family to solve claims or billing issues.

#### **Understand your Benefits:**

Want to know what is covered? How does a deductible work? What's your co-pay? We're ready to assist.

#### ID Cards:

We can assist you in getting a new ID card.

#### Find a Provider:

An in-network provider can offer you lower out of pocket costs – we can locate a provider close to you.





# **AFNA Benefits Website**

With a sleek and modern look and feel, your refreshed **afnabenefits.com** makes it easier than ever to find anything and everything related to your benefits.



Be sure to review mandatory compliance notices within afnabenefits.com. A Summary of Benefits and Coverage (SBC) has been designed to assist you with better understanding the coverage being offered to you, and to allow you to compare coverage options. The SBC is available on afnabenefits.com. A paper copy is also available, free of charge, by calling 1-855-557-1467.

Ajinomoto Foods permits insurers to offer employees of Ajinomoto Foods certain voluntary insurance programs. Whether you choose to enroll in any of these programs is completely optional and voluntary. Ajinomoto Foods does not make a contribution towards the cost of these programs and employees pay the full cost of premiums on an after-tax basis. Ajinomoto Foods does not sponsor, maintain, endorse, recommend, or promote these voluntary programs. Ajinomoto Foods involvement regarding these voluntary insurance programs is strictly limited to allowing the insurer access to employees to publicize these programs and Ajinomoto Foods may perform certain ministerial functions such as payroll deduction and forwarding employee premium payments to the insurer. Ajinomoto Foods does not receive any consideration in the form of cash or otherwise in connection with the program, other than reasonable compensation, excluding any profit, for administrative services actually rendered in connection with payroll deductions. Accordingly, these voluntary insurance programs are not subject to ERISA and related regulations. All questions or claims regarding these programs should be directed to the insurer.

All benefit plans are governed by master policies, contracts, and plan documents. In the event of any inconsistency between the information contained herein and the applicable plan documents, the provisions of the plan documents shall prevail. Ajinomoto Foods 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.

This brochure highlights recent plan design changes and is intended to fully comply with the requirements under the Employee Retirement Income Security Act (ERISA) as a Summary of Material Modifications. It should be kept with your most recent Summary Plan Description.

Your health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program are available to all employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by a different means. Contact 855-557-1467. We will work with you (and, if you wish, with your doctor) to develop another way to qualify for the reward.

Visit afnabenefits.com for more information

This document is designed to provide basic information regarding benefit plans and programs available to eligible employees. This document merely summarizes the employee benefit plans and programs and does not detail all of the terms, conditions, restrictions, and exclusions contained in the plan documents, carrier contracts and/or Summary Plan Descriptions (SPD) (the "plan documentation") for the various benefit plans and programs. Every reasonable effort has been made to ensure the accuracy of the information canied in this document, however, in the event of a discrepancy between the information in this document and the plan documentation, the provisions described in the plan documentation will govern. This document does not create any contractual rights for any current or former employee, or for any other individual. The provisions of the applicable plan documentation will govern the determination of any individual's rights under any employee benefit plan or program. Your employer reserves the right to amend or terminate any of its employee benefit plans and programs at any time and without notice or cause.

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