Radiology Partners, Inc.
FSA Plan Detail Sheet
2027 Plan Year

## Eligibility

Eligibility Date: First of the month following or coinciding with date of hire
Eligibility Requirement: 30+ hours per week
Effective Date: Later of the date that you become eligible or the date that you elect

## Annual Election

Your annual Vita Flex Plan election is irrevocable for the Plan Year. Please consider your potential health and dependent care expenses carefully prior to making an election.

Only certain health and dependent care claims are eligible for reimbursement. The IRS establishes the guidelines for claim eligibility. Your eligible expenses must be incurred during the Plan Year and after your participation effective date. If you terminate employment, medical expenses must be incurred prior to your termination date.

## Minimum/Maximum Elections (per Plan Year)

| | Minimum | Maximum |
|---|---|---|
| Health FSA | $240.00 | $3,500.00* |
| Dependent Care FSA | $240.00 | $7,500.00 |

** Projected amount; the IRS will announce amount in Nov. 2026.*

## Open Enrollment

If you do not elect to participate on your initial eligibility date, you may elect to participate during the next annual Open Enrollment period. All Open Enrollment elections are effective for the Plan Year following the Open Enrollment period. Please note, if you were participating in the previous Plan Year and you do not re-elect, your FSA election will revert to zero.

## Mid-Year Election Changes

You may only change your election mid-year in certain limited circumstances, and even then changes are subject to restrictions. In order to change your election mid-year, you must experience a qualified status change (birth, marriage, etc.) or other approved exception. All change requests must be made within 30 days of the mid-year exception date.

## Important Deadlines

Claims must be incurred during the Plan Year, which is the date your election becomes effective through December 31, 2027. All claims incurred during the Plan Year must be submitted by March 31, 2028.
If your account is terminated mid-year, you will be able to incur claims for the Health FSA through your termination date, and you must submit claims *within 90 days of termination*.

## Notifications

Each time you submit a claim, you will receive a notification to confirm how the claim was processed. You will receive your notification via email. To view claim details, you can log into your Vita Flex account at www.vitaflex.net.

## Online Account Access

For first time access at www.vitaflex.net: Click on Get Started and follow the prompts to set up your account.

## Per Paycheck Reductions

Your election is made as an annual election for the full Plan Year. Your annual election is then divided by total number of paychecks during the Plan Year or by the number of remaining paychecks in the Plan Year if you are hired mid-year.

## Reimbursements

Tax-free claim reimbursements are issued via direct deposit or paper check, depending on whether bank account information is provided to Vita. Reimbursements will be itemized on an Advice of Deposit notification delivered via email or on the paper check as either Health FSA or Dependent Care FSA.

## Filing Claims

Claims may be submitted as expenses are incurred, or they may be bundled and filed on a periodic basis. All claims for the 2027 Plan Year must be received by March 31, 2028*. Claims may be submitted using any of the following methods:

- Online*: www.vitaflex.net
- Mobile*: Vita Flex Mobile™ app (Apple IOS/Android)
- Email: claims@vitamail.com
- Fax: (866) 964-3539
- U.S. Mail: 1451 Grant Road, #200
  Mountain View, CA 94040

*For Active employees, the deadline to submit claims Online or via Mobile app is 9:59 p.m. PACIFIC Time on March 31, 2028. Claims being submitted after 9:59 p.m. Pacific Time on that date must be either Faxed or Emailed, and you must complete and submit the appropriate Vita FSA Claim Form with your faxed/emailed documentation.

*For Terminated employees, the deadline to submit claims Online or via Mobile app is 9:59 p.m. PACIFIC time on the 90th day following your termination date.

## Health FSA Rollover

If you do not incur sufficient expenses to exhaust your entire Health FSA election, you may be eligible to roll over your balance to the following Plan Year, up to $700.00*. If your Health FSA balance on March 31, 2028 is greater than the amount allowed for rollover, then the amount in excess of $700.00* will be forfeited after the eligible amount has rolled over. The exact amount of your Health FSA rollover, if any, will be determined after the 2027 claim submission deadline.

** Projected rollover maximum, 20% of Federal max election*

Minimum Balance for Rollover:
If the balance remaining in your 2027 Health FSA is less than $50 after the claim submission deadline, that balance will be forfeited unless you made a new Health FSA election for the 2028 plan year.

## Additional Information

This FSA Plan Detail Sheet provides a brief summary of several important elements of your Pre-Tax Flexible Benefits Plan. Additional details may be found at help.vitacompanies.com. For full Plan details, rules, and restrictions, please refer to the Summary Plan Description.

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