

2027

Benefits Guide

exyte



At Exyte U.S., Inc., Exentec U.S., Inc., and Exential U.S., Inc. (collectively, "Exyte USA" or "Exyte Americas Holdings, Inc."), we are committed to your health, safety, and well-being. We are pleased to provide you with a wide range of competitive benefits that are a vital part of your total compensation. You have the flexibility to select from a full range of benefits to keep you and your family healthy, provide financial protection in the event of an unforeseen event, and help you build long-term security for retirement.

This guide was designed to answer some of the basic questions you may have about your benefits. The following pages contain summaries of our benefit plans for the January 1, 2027, to December 31, 2027, plan year. Understanding these benefit options will assist you in making better health care decisions for yourself and your family. Please read this guide carefully as you prepare to make your elections for the Plan Year. Do not forget to consider your spouse's benefits through his or her place of employment. When ready to enroll, gather all pertinent information for covered dependents (name, date of birth, and Social Security numbers).

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REQUIRED NOTICES

To review the 2027 Required Notices, scan this QR code or go to ExyteUSABenefits.com.

Legal notices are subject to change. If federal or state laws or regulations change during the year, the legal notices may be updated to reflect those changes.

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Disclaimer: This guide provides a summary of plan highlights. This is not a binding contract. In the event of any difference between the information contained herein and the plan documents, the plan documents will supersede and control over this guide. Please consult the Summary Plan Description for information on covered charges, limitations, and exclusions.

Welcome!

About this Benefits Guide

This Benefits Guide highlights the main features of the Exyte USA employee benefits program in non-technical language. It does not include all plan rules, details, limitations, and exclusions. The terms of your benefit plans are governed solely, and in every respect, by the official plan documents, and not the information in this guide. Should there be an inconsistency between this benefits guide and the legal plan documents, the language in the official plan documents is the final authority and shall prevail as accurate.

Please refer to the plan-specific documents published by each of the respective carriers for detailed plan information. Exyte USA reserves the right to modify or discontinue its employee benefits program, at any time, to meet Internal Revenue Service rules, or otherwise as decided by Exyte USA. Visit OneNET >> USA >> HR >> Benefits or contact ExyteAMERBenefits@exyte.net for access to these documents.

NEW HIRE TO-DO CHECKLIST

- **Review** this Guide to learn the details of your benefits.
- **Attend** New Hire Orientation to learn how to navigate Exyte's systems and culture.
- **Enroll** in Benefits within 30 Days of your first day. Your benefits are effective on the first of the month coinciding with or following your first day.
- **Confirm** your benefits are correct by reviewing your coverage summary and payslip for deductions.
- **Watch** your email and your mailbox for the information you need to start accessing your benefits. Pro Tip: register online with our benefit partners to access information even faster!



MEDICARE BENEFITS

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage.

Please see the 2027 Required Notices on ExyteUSABenefits.com (or scan the QR code on the Table of Contents page) for more details or schedule a one-on-one Medicare consultation at medicarechoicegroup.com/exyte.



How To Enroll

bswift is our new benefits administrator beginning in 2027. Follow these instructions to set up your account and enroll in or change your benefits.

ONLINE

Step 1: Go to ExyteUSABenefits.com and click on the *Enroll/Make Changes* button.

Step 2: Enter your username and password. If this is your first time logging in, click *First time visiting? Register Now!* and follow the instructions.

Step 3: Click *Enrollment Center* at the top of the page. Then, click *Enroll Now* in the banner. If you are not automatically connected to the site, you will need to provide your temporary username and password. Your temporary username is the first letter of your first name, full last name, day of birth, and year of birth (e.g., rsmith171985). Your temporary password will be the last four digits of your Social Security number.

Step 4: Complete the *Employee Information* page.

Step 5: Add your dependents on the *Family Information* page. When ready, click the *I agree* box and click *Continue*.

Step 6: On the *New Hire Enrollment* page, click *Continue*.

Step 7: In the section for each benefit, click *View Plan Options*. Select any applicable dependents, review the plan options and information, and click *Select* on the plan you'd like to choose. Complete any additional fields or questions that may be required. Then, click *Continue* to move to the next step.

Step 8: Add or verify your primary and secondary beneficiaries for each benefit. Then, click *Continue*.

Step 9: Review the benefits selections you've made ensuring the plan, dependent(s), and coverages are correct, and upload dependent verification documents, as necessary. When finished, click *Complete Enrollment*.

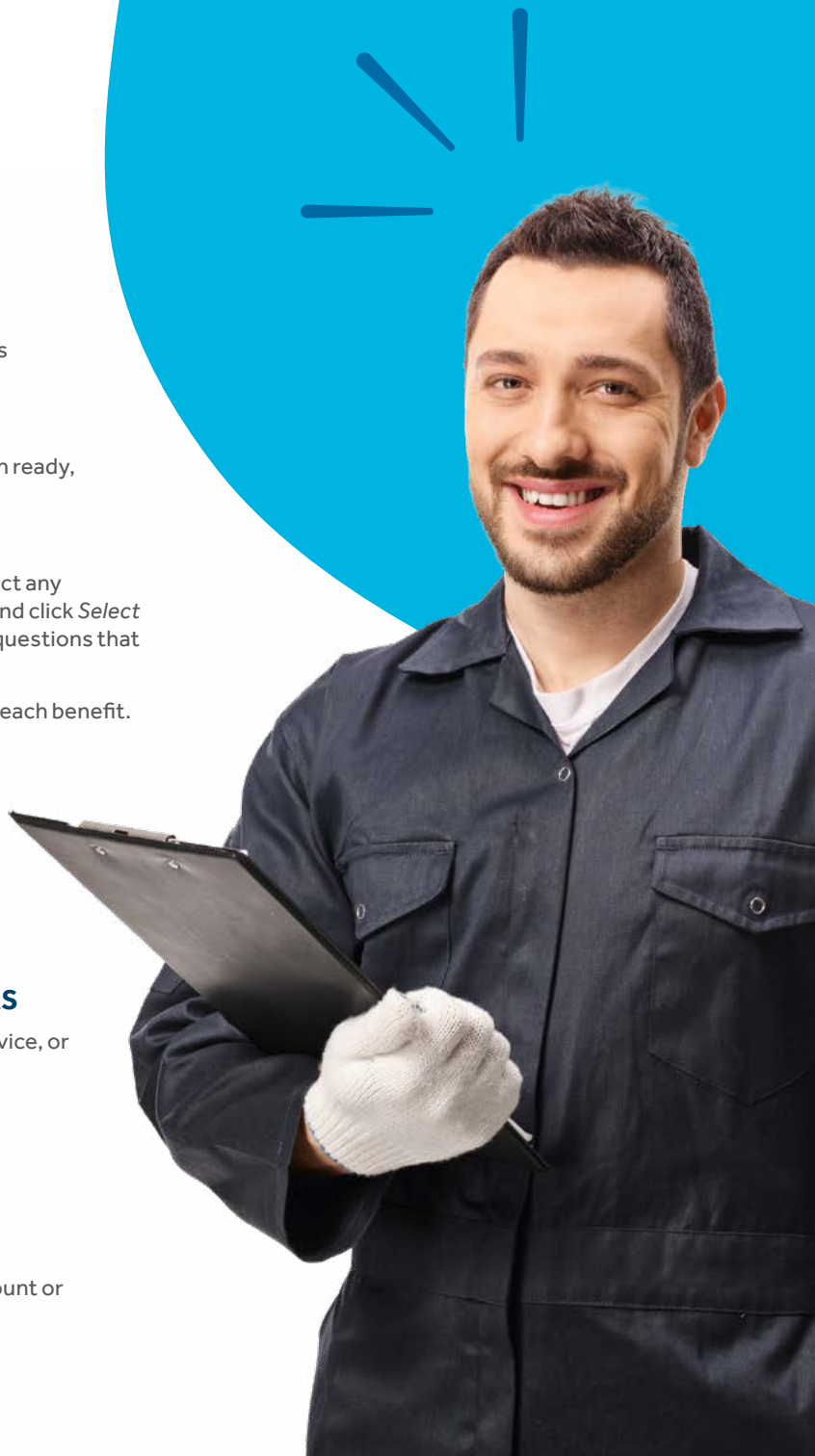
Step 10: On the *Your enrollment is complete!* page, view, email, or print your confirmation statement.

REGISTER WITH BLUECROSS BLUESHIELD OF TEXAS

Use Blue Access for Members (BAM) from your desktop, mobile device, or download the free app. With BAM, you can:

- View, download, or print your digital ID card
- Find care providers and schedule virtual visits
- Review your claims and coverage
- Opt into wellness programs and more!

To get started, go to mybam.bcbstx.com to log in or create an account or text **BCBSTXAPP** to **33633** for a download link.





2027 Open Enrollment

2027 Open Enrollment is from **October 26 to November 9, 2026**. It's your opportunity each year to learn about benefits changes, review your coverage needs, and enroll. You can make changes to your elections throughout the enrollment period. **Your elections are final as of November 9 at 11:59 p.m. CT.** The benefits you elect are effective January 1, 2027.

Enroll by the Deadline
If you do not enroll, your benefit selections from 2026 will roll over into 2027. See page 3 for enrollment instructions. Your next opportunity to make changes to your benefits will be next year's enrollment for 2028 benefits, unless you experience a Qualified Life Event, like getting married or having a baby. See page 7 for more information on Qualified Life Events.

What's Changing for 2027

In 2027, you will have the **same** medical, dental, and vision plans, savings and spending account options and company-provided benefits like basic Life and AD&D coverage. However, there will be changes to your benefits.

NEW WELLNESS PLATFORM

We will continue to offer Well@Work, our Exyte USA wellness rewards program. In 2027, Well@Work will be administered by GO Wellbeing through BCBSTX. See page 20 for details and login instructions.

NEW BENEFITS ENROLLMENT PLATFORM

We're introducing bswift, our new benefits enrollment platform. The system walks you through the enrollment process step by step, making it simple to review your coverage and submit your benefit elections. Instructions for registering and using the portal are in this Benefits Guide on page 3 and also posted on ExyteUSABenefits.com.

PLAN DESIGN CHANGES

The Gold HDHP in-network deductible is increasing to $1,750 for an individual and $3,500 for a family. The Gold HDHP in-network out-of-pocket maximum is increasing to $3,500 for an individual and $7,000 for a family.

2027 HSA AND FSA LIMITS

	2027 CONTRIBUTION LIMIT
HSA*	Individual: $4,500 Family: $9,000
Health Care FSA**	$60 minimum contribution up to $3,400
Dependent Care FSA***	$200 minimum contribution to $7,500

*If you are age 55 or older, you can contribute an additional $1,000
*** As of October 2026. Maximums may be increased by the IRS in the future
*** $200 to $3,750 if you are married and file separate tax returns

NEW HSA, FSA, AND CSA ADMINISTRATOR

Beginning in 2027, Rocky Mountain Reserve will become the administrator for your Health Savings Account (HSA), Flexible Spending Accounts (FSAs), and the Commuter Spending Account (CSA). Your WEX account will transfer to Rocky Mountain Reserve. Additional information about the transition, including what you can expect and any actions you may need to take, will be shared before January 1, 2027, if you are impacted. You can find more information about Rocky Mountain Reserve on page 14 for the HSA, 18 for the FSA, and 19 for the CSA.

YOUR HSA IS MOVING TO ROCKY MOUNTAIN RESERVE

For 2027, Exyte is moving its Health Savings Account (HSA) program to Rocky Mountain Reserve (RMR). If you currently have an HSA balance with Exyte's current HSA provider WEX, you'll have the opportunity to move your existing balance to your new RMR HSA through a bulk transfer.

A bulk transfer allows your existing HSA balance to move directly from WEX to RMR in a single transaction, without requiring you to complete individual transfer paperwork. Because the funds move directly between the administrators, the transfer is not taxable and does not count toward your annual HSA contribution limit.

You'll need to take action. Your HSA balance will only transfer if you provide consent. Watch for information from Exyte or RMR in early 2027 about how to provide your consent and the deadline for doing so.

If you have HSA investments, you'll also need to sell those investments and move them to cash by the communicated liquidation deadline. There will be a temporary blackout period when your current HSA card and withdrawals will not be available, so plan ahead for any upcoming health care expenses and keep receipts for eligible expenses you pay out of pocket.

After the transfer is complete, log in to your RMR account to confirm that your balance was transferred successfully.

Watch for more information about important dates, the consent process and what you need to do.



Eligibility

If you work at least 30 hours per week and are at least 18 years of age, you are eligible for benefits. Most of your benefits are effective on the first day of the month coinciding with or following your date of hire. You may also enroll your eligible dependents for coverage.

WHO CAN YOU COVER?

- Your legal spouse of the same or opposite gender. **Note: Domestic partners are not eligible.**
  - Life and AD&D insurance coverage is unavailable for spouses of employees over the age of 70.
- Your children up to age 26 for medical, dental, and vision insurance.
  - Up to age 25 for Life and AD&D insurance.
  - Includes adopted children, stepchildren, and legal foster children.
- Dependent children, regardless of age, who are incapable of self-support due to a mental or physical disability and are fully dependent on you for support as indicated on your federal tax return.
  - Proof of disability is required.
  - Disability must have occurred prior to age 25.

These definitions are intended as a summary in layman's terms and do not constitute a guarantee of coverage.

DEPENDENT VERIFICATION

Many choices you make can impact Exyte USA and others. For example, if you add someone to your coverage that is not an eligible family member, this adds to the overall cost of the health plans and affects everyone who shares in the cost of those plans. Part of our responsibility to help control cost increases is to provide coverage only for those who are eligible dependents.

On a weekly basis, we audit new dependents added to Exyte USA health benefits and may request specific documentation to verify dependent status. Some examples of documents you may be asked to provide include:

- Birth certificate
- Marriage certificate
- Portions of your tax return

Depending on your situation, you may be asked to provide other types of documentation.



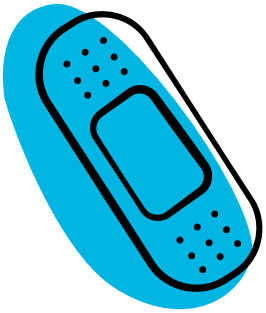
Qualified Life Events

Generally, you may only change your benefit elections during the Open Enrollment period. However, since life happens, you also may change your benefit elections during the year if you experience a Qualified Life Event.

QUALIFIED LIFE EVENT		DOCUMENTATION NEEDED
Change in marital status	Marriage	Copy of marriage certificate
	Divorce/Legal Separation	Copy of divorce decree
	Death	Copy of death certificate
Change in number of dependents	Birth or adoption	Copy of birth certificate or copy of legal adoption papers
	Step-child	Copy of birth certificate naming spouse as parent plus a copy of the marriage certificate between employee and spouse
	Death	Copy of death certificate
Gain or Loss in other coverage	Change in your eligibility status (i.e., full time to part time)	Notification of increase or reduction of hours that changes coverage status
	Change in spouse's or child's benefits or employment status	Notification of spouse's or child's employment status that results in a loss or gain of coverage
	Other group health plan due to their Open Enrollment period	Enrollment confirmation, coverage confirmation from new carrier

CHANGING BENEFITS AFTER OPEN ENROLLMENT

During the year, you cannot make changes to your benefits (except for the HSA) unless you have a Qualified Life Event. **If you experience a Qualified Life Event, you must contact** exyteamerbenefits@exyte.net **within 30 days of the event.** If more than 30 days have passed since the event, you will have to wait until the next annual open enrollment period to make changes (unless you experience another Qualified Life Event).



Medical

Medical insurance is essential to your well-being. Our medical coverage provides you and your family with the protection you need for everyday health issues. Exyte USA offers medical plans administered by BlueCross BlueShield of Texas (BCBSTX) that use the BlueChoice PPO Network: a traditional PPO and two High Deductible Health Plans (HDHPs).

How Health Plans Work

Preventive Care – like physical exams, flu shots, and screenings – is always covered 100% when you use in-network providers. The key difference between the plans is the amount of money you'll pay each pay period and how much of the cost you are responsible for up front. Review the terms and explanations below for a better understanding of each plan.

- **Annual deductible amounts** – The amount you pay each year for eligible in-network and out-of-network charges before the plan begins to pay.
- **Out-of-pocket maximums** – The most you will pay each year for eligible network services including prescriptions. After you reach your out-of-pocket maximum, the plan picks up the full cost of covered medical care for the remainder of the year.
- **Copays** – A copay is a fixed amount you pay for a health care service, such as a visit to your doctor or a prescription medication. Copays do not count toward your deductible but do count toward your annual out-of-pocket maximum. The HDHP (Gold) only has copays for prescription medications and these only apply after you meet the deductible.
- **Coinsurance** – Once you've met your deductible, you and the plan share the cost of care, which is called coinsurance. For example, with the Traditional Copay Plan, you pay 20% for services and the plan will pay 80% of the cost until you have reached your out-of-pocket maximum. With the HDHP (Gold), you pay 10%, and the plan pays 90%. With the HDHP (Silver), you pay nothing and the plan pays 100%.
- **Tier** – Medications covered under the pharmacy plan are organized into tiers related to their overall cost. For example, Tier 1 is generic medications, Tier 2 is more expensive brand medications, and so forth. Visit OptumRx.com to determine how your medications may be covered.

BCBSTX

www.bcbstx.com

866-818-8106

BlueChoicePPO Network

Group #: 419536

Virtual Visits through MDLIVE

Medical care has never been more convenient. MDLIVE offers reliable 24/7 health care by phone or video. Their national network of board-certified doctors, pediatricians, dermatologists, psychiatrists, and licensed therapists provides personalized care for hundreds of medical and mental health needs. MDLIVE is dedicated to helping you get better and stay well.

Consider MDLIVE for common conditions, such as allergies, flu, sore throats, bronchitis, headaches, migraines, stomachaches, eye infections, rashes, and more.

GET STARTED

Go to mdlive.com/bcbstx and click "Activate Now." Enter your member ID, email address, and create a password. Click submit. You will receive an email confirmation when your account is created. Or you can text **BCBSTX** to **635483**.

INFERTILITY COVERAGE

If you are enrolled in an Exyte USA medical plan, infertility procedures are covered to assist you in your family building journey. To qualify for these benefits, you must meet certain criteria, such as a diagnosis of infertility, including failure to achieve a successful pregnancy after a certain period of time, and certain age requirements. Coverage is limited to a $20,000 medical and prescription drug lifetime maximum ($10,000 for medical services and $10,000 for prescription drugs), and includes the following procedures:

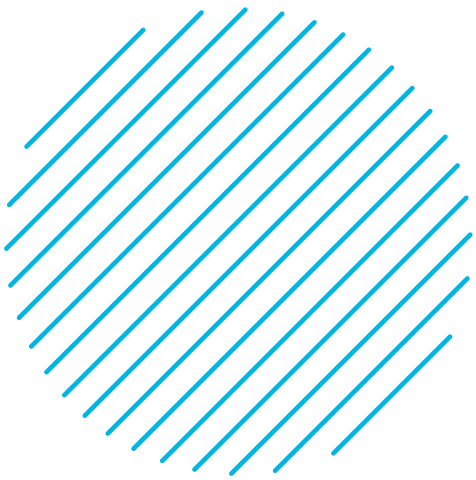
- In vitro fertilization (IVF)
- Frozen embryo transfer (FET) cycle, including embryo cryopreservation storage for up to one year
- Intrauterine insemination (IUI)
- Artificial insemination (AI)
- Ovulation induction and controlled ovarian stimulation
- Fertility surgical procedures

MAKE THE MOST OUT OF YOUR MEDICAL PLAN

- Make the most of your Medical Plan by visiting www.bcbstx.com OR downloading the BCBSTX mobile app!

Register for a BCBSTX account to:

- Search for Physicians or Medical Facilities by specialty.
- View your current claims history.
- Have an online consultation with an experienced nurse.
- Estimate out-of-pocket costs for a procedure, comparing different providers or facilities.
- Use the personal Health Record to organize health data and receive condition–specific information to organize your overall health.



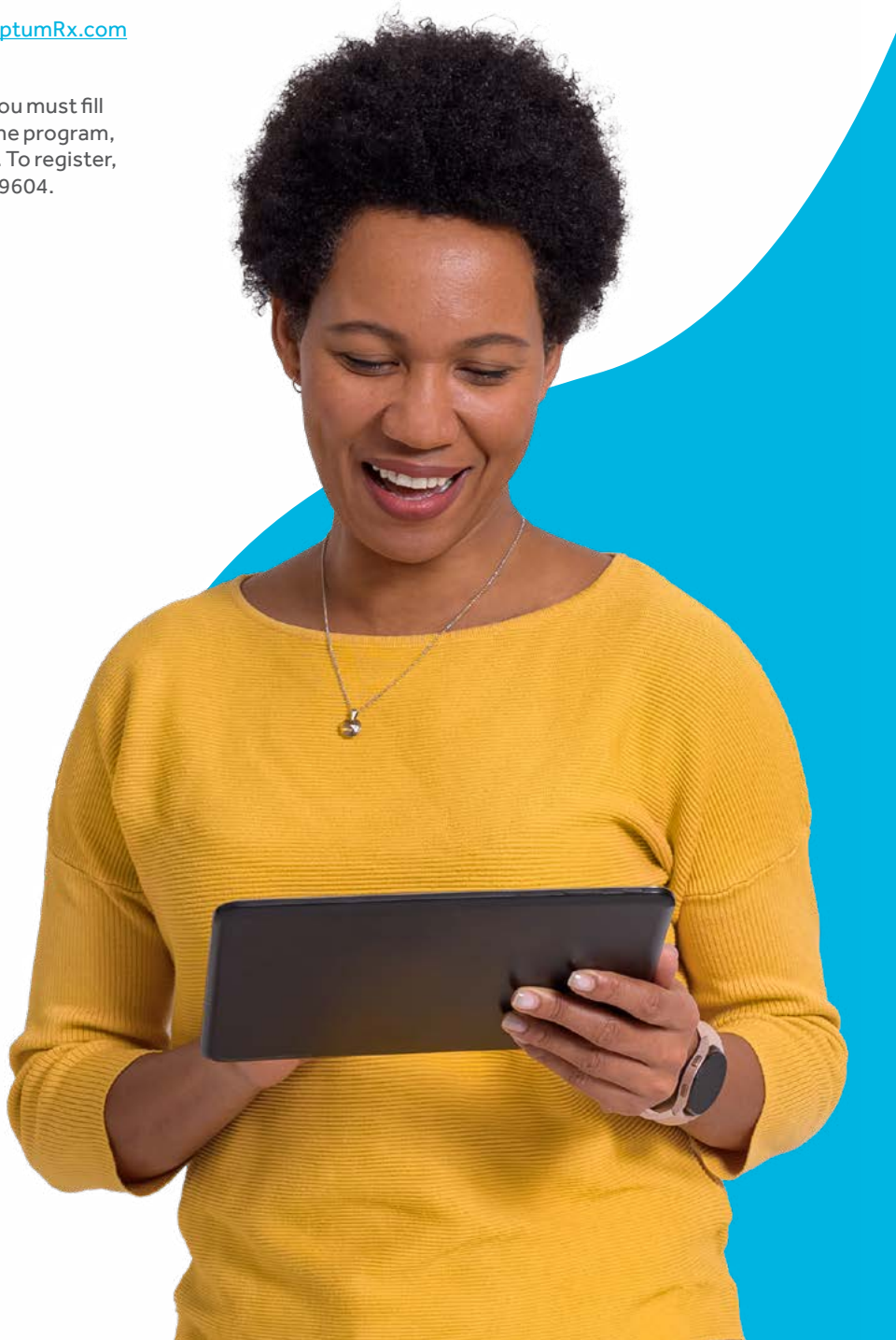
Prescriptions

OPTUM RX

You can get 3 months of your long-term medications at either your local network pharmacy or with Optum Home Delivery Pharmacy™. If you choose your local pharmacy, request a 90-day supply. If you choose mail, the first step is to register with Optum Home Delivery Pharmacy. Choose the way to get your medications that works best for you.

To register for Optum Home Delivery Pharmacy, visit OptumRx.com or call 1-800-765-6830.

If you or a family member take Specialty medications, you must fill through Optum Specialty Pharmacy. If you are new to the program, the first step is to fill out a new patient enrollment form. To register, visit specialty.optumrx.com/new-fill or call 1-877-656-9604.



Medical Plan Coverage Summary – Silver Plan

The Silver Plan offered by Exyte USA is a High Deductible Health Plan (HDHP) designed to be paired with a Health Savings Account (HSA). Exyte USA contributes to your HSA with each paycheck. Review the summary of coverage on this plan below. The Silver Plan has an embedded family deductible. If you cover family members, each person has an individual deductible. Once a family member meets that deductible, the plan begins paying its share of their covered expenses. The family deductible can be met by the combined expenses of all covered family members.

	SILVER HDHP	
	BCBSTX BLUECHOICE PPO NETWORK	
	In-Network	Out-of-Network
CALENDAR YEAR DEDUCTIBLE		
Individual	$4,000	$10,000
Family	$8,000	$20,000
CALENDAR YEAR OUT-OF-POCKET MAXIMUM		
Individual	$4,000	$15,000
Family	$8,000	$30,000
	YOU PAY	YOU PAY
COPAYS & COINSURANCE (AFTER DEDUCTIBLE IS MET)		
Preventive Care	$0	40%
24/7 Virtual Visits	0%*	40%
Primary Care Physician	0%*	40%
Specialist	0%*	40%
Urgent Care	0%*	40%
Emergency Room	0%*	0%
Inpatient/Outpatient	0%*	40%
Diagnostic Tests	0%*	40%
Imaging	0%*	40%
PHARMACY		
RETAIL RX (UP TO 30-DAY SUPPLY)		
Tier 1	0%*	40%
Tier 2	0%*	40%
Tier 3	0%*	40%
Tier 4	0%*	40%
MAIL ORDER RX (UP TO 90-DAY SUPPLY)		
Tier 1	0%*	N/A
Tier 2	0%*	N/A
Tier 3	0%*	N/A
Tier 4	0%*	N/A

* You pay 100% of the cost until the deductible is met.

MEDICAL PRETAX PREMIUMS PER PAYCHECK

COVERAGE LEVEL	BI-WEEKLY	EXYTE HSA CONTRIBUTION*
Employee Only	$48.13	$31.73
Employee + Spouse	$126.45	$31.73
Employee + Child(ren)	$101.16	$31.73
Employee + Family	$166.11	$31.73

* HSA contributions are processed over 26 paychecks.

Medical Plan Coverage Summary – Gold Plan

The Gold Plan offered by Exyte USA is also a High Deductible Health Plan (HDHP) designed to be paired with a Health Savings Account (HSA). Exyte USA contributes to your HSA with each paycheck. Review the summary of coverage on this plan below. The Gold Plan has an aggregate family deductible. If you enroll in family coverage, the full family deductible must be met before the plan begins paying its share of covered expenses. The deductible can be met by one family member or through the combined expenses of multiple family members.

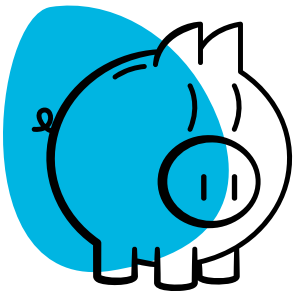
	GOLD HDHP	
	BCBSTX BLUECHOICE PPO NETWORK	
	In-Network	Out-of-Network
CALENDAR YEAR DEDUCTIBLE		
Individual	$1,750	$4,000
Family	$3,500	$8,000
CALENDAR YEAR OUT-OF-POCKET MAXIMUM		
Individual	$3,500	$8,000
Family	$7,000	$16,000
	YOU PAY	YOU PAY
COPAYS & COINSURANCE (AFTER DEDUCTIBLE IS MET)		
Preventive Care	$0	40%
24/7 Virtual Visits	10%*	40%
Primary Care Physician	10%*	40%
Specialist	10%*	40%
Urgent Care	10%*	40%
Emergency Room	10%*	10%
Inpatient/Outpatient	10%*	40%
Diagnostic Tests	10%*	40%
Imaging	10%*	40%
PHARMACY		
RETAIL RX (UP TO 30-DAY SUPPLY)		
Tier 1	$15*	40%
Tier 2	$30*	40%
Tier 3	$60*	40%
Tier 4	$100*	40%
MAIL ORDER RX (UP TO 90-DAY SUPPLY)		
Tier 1	$25*	N/A
Tier 2	$75*	N/A
Tier 3	$150*	N/A
Tier 4	$250*	N/A

* You pay 100% of the cost until the deductible is met.

MEDICAL PRETAX PREMIUMS PER PAYCHECK

COVERAGE LEVEL	BI-WEEKLY	EXYTE HSA CONTRIBUTION*
Employee Only	$67.87	$31.73
Employee + Spouse	$168.23	$31.73
Employee + Child(ren)	$133.62	$31.73
Employee + Family	$217.67	$31.73

* HSA contributions are processed over 26 paychecks.



Health Savings Account (HSA)

A Health Savings Account (HSA) is a personal savings account you can use to pay for qualified out-of-pocket medical expenses with pretax dollars — now or in the future. Once you're enrolled in the HSA, you'll receive a debit card to help manage your HSA reimbursements. Your HSA can also be used for your expenses and those of your spouse and dependents, even if they are not covered by the HDHP medical plan. **When you enroll in medical coverage under the Gold or Silver HDHP, you are automatically eligible for an HSA through Rocky Mountain Reserve. To receive the employer contribution and make your own contributions, you must actively elect HSA coverage and choose your contribution amount.**

How a Health Savings Account (HSA) Works

ELIGIBILITY

You must be enrolled in a High Deductible Health Plan. At Exyte, this is the Gold or Silver Plan. You are not enrolled in Medicare. You cannot be claimed as a dependent on someone else's tax return. You have not received Veterans Affairs (VA) benefits within the past 3 months (except for preventive care). If you want to enroll in a Health Care FSA, you are eligible to enroll only in a Limited Purpose FSA.

USING YOUR ACCOUNT

Follow these steps to set up your account.

1. Go to user.rmrbenefits.com/login and click the *Register* link.
2. Verify your identity by entering your date of birth and Social Security number. Then click *Next*.
3. Provide your email address, create a unique username, and provide your phone number. Then you will create your password. It must be 8 characters long and contain at least one uppercase letter, one lowercase letter, and one special character.
4. Accept the Terms & Conditions and Privacy Policy and click *Submit*.
5. A validation email will be sent to the email address you provide. Once you follow the instructions in the email, you can log in.

YOUR CONTRIBUTIONS

You contribute on a pretax basis and can change how much you contribute from each paycheck up to the IRS maximum of $4,500 if you enroll only yourself, or $9,000 if you enroll in family coverage.* You can make an additional catch-up contribution of $1,000 if you are age 55. Your HSA contributions are prorated over 26 paychecks.

THE COMPANY'S CONTRIBUTION

Exyte USA contributes $825 to your HSA. If you are enrolled in the Silver HDHP, and cover one or more dependents, Exyte contributes $1,650. These contributions are prorated over 26 paychecks.

ELIGIBLE EXPENSES

Medical, dental, vision, and prescription drug expenses incurred by you and your eligible family members. See the complete list of qualifying HSA expenses at www.irs.gov/pub/irs-pdf/p969.pdf. Please note: Funds available for reimbursement are limited to the balance in your HSA. Use the debit card linked to your HSA to cover eligible expenses or pay for expenses out of your own pocket and save your HSA money for future health care expenses.

* The amount Exyte USA contributes to your HSA goes toward the IRS maximum.

Top 3 Advantages Of The HSA

TAX-FREE:

- Pretax Payroll Deductions
- Tax-Free Exyte USA Contributions
- Tax-Free Growth
- Withdraw Tax-Free to Pay Qualified Expenses
- Balance Rolls Over Year to Year Tax-Free

FLEXIBILITY:

- Spend or Save (no “use it or lose it”)
- Use Debit Card for Qualified Expenses
- Pay Bills Online
- Reimburse Yourself for Out-of-Pocket Expenses
- Pay Qualified Expenses Incurred Anytime After Account is established

SAVE OVER TIME:

- Balance Carries Forward Year-Over-Year
- No Limit on Account Balance or Growth
- Accrues Interest
- Invest Balance Over $500
- Yours if You Leave Exyte USA (you will incur fees, however)



Medical Plan Coverage Summary – Traditional Copay Plan

The Traditional Copay Plan offered by Exyte USA is ***not*** a High Deductible Health Plan (HDHP) and cannot be paired with a Health Savings Account (HSA). You may enroll in a Flexible Spending Account with this plan instead. Review the summary of coverage on this plan below. The Traditional Copay Plan has an embedded family deductible. If you cover family members, each person has an individual deductible. Once a family member meets that deductible, the plan begins paying its share of their covered expenses. The family deductible can be met by the combined expenses of all covered family members.

	TRADITIONAL COPAY PLAN	
	BCBSTX BLUECHOICE PPO NETWORK	
	In-Network	Out-of-Network
CALENDAR YEAR DEDUCTIBLE		
Individual	$1,000	$2,000
Family	$2,000	$4,000
CALENDAR YEAR OUT-OF-POCKET MAXIMUM		
Individual	$3,000	$4,000
Family	$6,000	$8,000
	YOU PAY	YOU PAY
COPAYS & COINSURANCE (AFTER DEDUCTIBLE IS MET)		
Preventive Care	$0	40%
24/7 Virtual Visits	$0	40%
Primary Care Physician	$30	40%
Specialist	$50	40%
Urgent Care	$50	40%
Emergency Room	$150	$150
Inpatient/Outpatient	20%	40%
Diagnostic Tests	0%	40%
Imaging	20%	40%
PHARMACY		
RETAIL RX (UP TO 30-DAY SUPPLY)		
Tier 1	$15*	40%
Tier 2	$30*	40%
Tier 3	$60*	40%
Tier 4	$100*	40%
MAIL ORDER RX (UP TO 90-DAY SUPPLY)		
Tier 1	$25	N/A
Tier 2	$75	N/A
Tier 3	$150	N/A
Tier 4	$250	N/A



Medical Pretax Premiums Per Paycheck

COVERAGE LEVEL	BI-WEEKLY
Employee Only	$74.91
Employee + Spouse	$202.32
Employee + Child(ren)	$154.50
Employee + Family	$277.87

NOTE: Exyte does not make an HSA contribution if you enroll in the Traditional Copay Plan.

Medical Plan Comparison

Exyte USA offers you the option to choose from the Silver, Gold, or Traditional Copay plans administered by BCBSTX. These plans share the same network, and cover the same services; the differences are in the amounts you pay. A brief comparison is provided here, but please review the details of each plan on the previous pages to determine the best coverage option for you and your family.

	HDHP: SILVER	HDHP: GOLD	TRADITIONAL COPAY
	BCBSTX BlueChoicePPO NETWORK		
	In-Network	In-Network	In-Network
CALENDAR YEAR DEDUCTIBLE			
Individual	$4,000	$1,750	$1,000
Family	$8,000	$3,500	$2,000
CALENDAR YEAR OUT-OF-POCKET MAXIMUM (INCLUDES DEDUCTIBLE)			
Individual	$4,000	$3,500	$3,000
Family	$8,000	$7,000	$6,000
	YOU PAY	YOU PAY	YOU PAY
COPAYS & COINSURANCE			
Preventive Care	$0	$0	$0
Virtual Visits	0%*	10%*	$0
Primary Care Physician	0%*	10%*	$30**
Specialist	0%*	10%*	$50**
Urgent Care	0%*	10%*	$50
Emergency Room	0%*	10%*	$150
Inpatient/Outpatient	0%*	10%*	20%*
Diagnostic Tests	0%*	10%*	0%*
Imaging	0%*	10%*	20%*
PHARMACY			
RETAIL RX (UP TO 30-DAY SUPPLY)			
Tier 1	$0*	$15*	$15
Tier 2	$0*	$30*	$30
Tier 3	$0*	$60*	$60
Tier 4	$0*	$100*	$100
MAIL ORDER RX (UP TO 90-DAY SUPPLY)			
Tier 1	$0*	$25*	$25
Tier 2	$0*	$75*	$75
Tier 3	$0*	$150*	$150
Tier 4	N/A	$250*	$250

* You pay 100% of the cost until the deductible is met.
** These are designated provider copays. Non-designated provider copays are $10 more ($30 PCP / $50 Specialist).

Flexible Spending Accounts (FSA)

Flexible Spending Accounts (FSAs) allow you to pay for eligible health care and dependent care expenses using tax-free dollars. FSA contributions are processed over 26 paychecks. **Exyte USA offers three types of FSAs administered by Rocky Mountain Reserve — the Health Care FSA, the Limited Purpose FSA, and the Dependent Care FSA:**

HEALTH CARE FSA	LIMITED PURPOSE FSA
You may choose the Health FSA if you are enrolled in the Traditional Copay Plan or if you waive medical coverage. Contribute up to $3,400*, pretax to pay for services not covered by your medical, dental or vision plan such as copays, coinsurance, deductibles, prescription expenses, lab exams and tests, contact lenses and eyeglasses.	You may choose the LPFSA only if you are enrolled in the Gold or Silver HDHP. Use it to pay for eligible dental and vision expenses only. Contribute up to $3,400*, pretax to pay for services not covered by your dental or vision plan.
You will receive one debit card in the mail to pay for eligible expenses. You may request additional debit cards for your family members through your online account at user.rmrbenefits.com/login.	You will receive one debit card in the mail to pay for eligible expenses. You may request additional debit cards for your family members through your online account at user.rmrbenefits.com/login. Your debit card will be a smart card used for both HSA and Limited FSA accounts and will utilize funds according to the rules of each account.
Eligible expenses include medical copays, coinsurance, deductibles, eyeglasses, and over-the-counter medications prescribed by your doctor. For most debit card transactions, you will need to submit your receipts as substantiation of your expense, so it is important to keep them.	Eligible expenses include only dental and vision related services and materials. For most debit card transactions, you will need to submit your receipts as substantiation of your expense, so it is important to keep them.
Submit claims up to **March 31** of the following year for expenses incurred from January 1 to December 31. **If you do not spend all the money in this FSA by March 31, per IRS regulations, unused dollars will be forfeited for pretax contributions.**	Submit claims up to **March 31** of the following year for expenses incurred from January 1 to December 31. **If you do not spend all the money in this FSA by March 31, per IRS regulations, unused dollars will be forfeited for pretax contributions.**

DEPENDENT CARE FSA
Contribute up to $7,500 per year, pretax, or $3,750 if married and filing separate tax returns to pay for day care expenses associated with caring for elder or child dependents under age 13 that are necessary for you or your spouse to work or attend school full-time.
Can only be used to pay for eligible dependent day care expenses including day care, after-school programs, and elder care programs and you cannot use your Health Care FSA to pay for Dependent Care expenses or vice versa.
Submit claims up to **March 31** of the following year for expenses from January 1 to December 31. **Note: If you do not spend all the money in this FSA by March 31, per IRS regulations, unused dollars will be forfeited for pretax contributions.**
If your employment ends, you will have 45 days from your last day of employment to submit claims for services incurred while you were employed at Exyte and actively enrolled in the Dependent Care FSA.

* As of October 2026. Maximums may be increased by the IRS in the future.

Commuter Spending Account

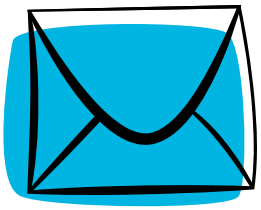
A Commuter Spending Account (CSA) allows you to use pretax dollars to pay for your parking or public transportation expenses while commuting to work. This program is voluntary and you may participate on a month-to-month basis. Using your commuter benefits is easy. You will receive a debit card to use for all of your accounts through Rocky Mountain Reserve, such as FSAs. You can also set up direct deposit to your bank account for reimbursements if a debit card doesn't work for your transit authority.

Both payroll contributions and reimbursements cannot exceed the monthly statutory limits. Any unused funds in any month are rolled over to the next month's contribution. The contribution amounts are current at the time of publication but are subject to change by the IRS.

ACCOUNT	USE FOR	CONTRIBUTIONS
Transportation or Public Transit	Monthly passes, tokens, fare cards/vouchers (transit and vanpool expenses) for you	$340* monthly maximum
Parking	Fees associated with parking at or near your place of employment, or parking at or near public transportation to get to work (e.g., parking at a bus or subway station)	$340* monthly maximum

*As of October 2026. Maximums may be increased by the IRS in the future.





Wellness Rewards

Exyte USA endeavors to encourage the best in its employees, providing opportunities to engage in key activities that promote overall wellbeing. As part of this effort, Exyte USA offers our wellness credits through Well@Work and has a wellness rewards program through GO Wellbeing, part of BlueCross BlueShield of Texas.

Well@Work

Earn the Well@Work wellness credit of $600 annually ($23.08 per paycheck) toward your 2028 medical coverage premiums. To earn this credit, you must achieve 100% by completing any combination of the wellness goals below by September 30, 2027. Keep track of your completed activities to make sure you're reaching 100%. BCBSTX will be tracking completion through claims and reports.

ACTIVITY	PERCENTAGE EARNED
Get your annual preventive exam	40%
Take a biometric screening	30%
Get age-appropriate cancer screenings (e.g., mammogram, PSA, etc.)	30%
Complete the Health Risk Assessment	30%
Call the 24/7 Nurse Line	20%

GO Wellbeing

New for 2027, GO Wellbeing is the digital wellness platform that's included at no additional cost with your Blue Cross and Blue Shield of Texas medical plan. GO Wellbeing brings health and wellbeing resources together in one easy-to-use app.

The RealAge Test looks at your daily habits, such as nutrition, exercise, sleep, and stress, and provides a personalized estimate of your body's "real age," along with practical recommendations to help you improve your health.

You also have access to personalized health articles, wellness challenges, and the ability to connect wearable devices and health apps to earn rewards for healthy activities you're already doing.

In addition, the platform includes resources focused on physical health, mental wellbeing, and financial wellness, making it a great tool to support your overall health throughout the year.

GETTING STARTED IS EASY

Start your wellness journey in just three steps:

1. Download the GO Wellbeing app on your Apple or Android smartphone.
2. Take the RealAge Test.
3. Follow personalized tips or join any activity you choose!

Fitness Program

As a BlueCross and BlueShield of Texas member, the Fitness Program is available exclusively to you and your covered dependents (age 16 and older). The program gives you access to a nationwide network of fitness locations. Choose a location close to home and near work, and visit locations while traveling. This is a separate program from Go Wellbeing.

Go to www.bcbstx.com and log in to Blue Access for Members℠. Select the My Health tab, then Wellness on the top navigation bar of the Dashboard page. Then scroll down to the Fitness Program section and click on *Learn More*.

BASE	CORE	POWER	ELITE	PRO	SIGNATURE	PREMIER
$19/mo	**$29/mo**	**$39/mo**	**$129/mo**	**$159/mo**	**$199/mo**	**$239/mo**
3,500+ Standard Gyms	**8,500+** Standard Gyms	**13,000+** Standard Gyms	**Access to 1 Luxury Gym + All 13,000+ Standard** (Luxury Gyms differ by tier, 180+ Available)*			

* Represents possible network locations. Check local listings for exact network options as some locations may not participate. Network locations are subject to change without notice.



Dental Plan

Taking care of your oral health is not a luxury; it is a necessity for long-term optimal health. With a focus on prevention, early diagnosis and treatment, Dental insurance can greatly reduce your costs when it comes to restorative and emergency procedures. Preventive services are covered at no cost to you and include routine exams and cleanings. You will only pay a small deductible and coinsurance for basic and major services.

When you visit a dentist in the BlueCross BlueShield of Texas (BCBSTX) DPPO Network, you will maximize your savings. These dentists have agreed to reduced fees, which means you won't get charged more than your expected share of the bill.

	BCBSTX DPPO PLAN	
	In-Network	Out-of-Network
CALENDAR YEAR DEDUCTIBLE		
Individual	$50	$50
Family	$150	$150
CALENDAR YEAR OUT-OF-POCKET MAXIMUM (INCLUDES DEDUCTIBLE)		
Per Individual*	$2,000	$2,000
	YOU PAY	
PREVENTIVE CARE		
Exams, Cleanings, X-rays, Fluoride Treatments	$0	$0
BASIC SERVICES		
Fillings, Space Maintainers, Sealants, Extractions, Oral Surgery, Endodontics, Periodontics, Emergency Exams	20%	20%
MAJOR PROCEDURES		
Crowns, Inlays/Onlays, Dentures and Bridgework, Repairs, Implants	50%	50%
ORTHODONTIA		
Adults and children	50% to a $5,000 maximum	50% to a $5,000 maximum

* There is a progressive increase in the maximum that is contingent upon receiving preventive services.

Dental Pretax Premiums Per Paycheck**

COVERAGE LEVEL	BCBSTX DPPO PLAN
Employee Only	$3.82
Employee + Spouse	$8.02
Employee + Child(ren)	$9.36
Employee + Family	$14.59

** Deductions are taken from each bi-weekly paycheck (26 per year).

BCBSTX

www.bcbstx.com

1-866-818-8106

Network: DPPO

Group #: 419541

You never have to worry about misplacing your ID card. Instead of a physical card, BCBSTX provides you with a digital card. It's always right there in the BCBSTX app, whenever and wherever you need it.

- Log in to www.bcbstx.com or the BCBSTX app.
- Click or tap "ID Cards"
- View your card(s), as well as any dependents' card(s)
- Email cards directly to doctors
- Save your digital ID cards in your Apple Wallet

Not registered on BCBSTX yet? It's quick and easy. Visit www.bcbstx.com and register now.

FIND AN IN-NETWORK DENTIST

For a list of in-network general and specialty dentists, go to www.bcbstx.com and click on *Find Care* and then on *Find a Dentist* on the left side of the page. You can search for a dentist near your home, school, or office.



Vision Plan

Healthy eyes and clear vision are an important part of your overall health and quality of life. Vision insurance is designed to encourage you and your family to get regular exams and provides coverage for corrective materials such as glasses and contact lenses. When you need medically necessary eye care, the plan has you covered. You will have to pay extra if you choose certain cosmetic or elective eyewear, so be sure to ask your eye doctor what items are covered by the plan before you purchase materials.

BENEFIT	DESCRIPTION	COPAY	FREQUENCY
YOUR COVERAGE WITH A VSP PROVIDER			
WellVision Exam	• Focuses on your eyes and overall wellness • Routine retinal screening	$10 $0	Every calendar year
Essential Medical Eye Care	• Retinal imaging for members with diabetes covered-in-full • Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. • Coordination with your medical coverage may apply. Ask your VSP network doctor for details.	$20 per exam	Available as needed
	PRESCRIPTION GLASSES	**$20**	**SEE FRAME AND LENSES**
Frame	• $230 Featured Frame Brands allowance • $180 frame allowance • 20% savings on the amount over your allowance • $180 Walmart / Sam's / Costco frame allowance	Included in Prescription Glasses	Every calendar year
Lenses	• Single vision, lined bifocal, and lined trifocal lenses • Impact-resistant lenses for dependent children	Included in Prescription Glasses	Every calendar year
Lens Enhancements	• Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Average savings of 25% on other lens enhancements	$0 $95 - $175 $95 - $175	Every calendar year
Contacts (Instead Of Glasses)	• $180 allowance for contacts • Contact lens exam (fitting and evaluation) included	Included in Contacts	Every calendar year
VSP Lightcare	• $180 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts	$20	Every calendar year
PROTEC SAFETY® (EMPLOYEE-ONLY COVERAGE)			
Frame	• Fully covered when you choose a safety frame from your VSP doctor's ProTec Eyewear® collection • Certified according to the American National Standards Institute (ANSI) guidelines for impact protection	$20 for frame and lenses	Every calendar year
Lenses	• Prescription single vision, lined bifocal, and lined trifocal • Certified according to the American National Standards Institute (ANSI) guidelines for impact protection	Combined with Frame	Every calendar year
Additional Savings	**Glasses and Sunglasses** • Discover all current eyewear offers and savings at vsp.com/offers. • 20% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam. **Laser Vision Correction** • Average of 15% off the regular price; discounts available at contracted facilities. **Exclusive Member Extras for VSP Members** • Contact lens rebates, lens satisfaction guarantees, and more offers at vsp.com/offers. • Save up to 60% on digital hearing aids with TruHearing®. Visit vsp.com/offers/special-offers/hearing-aids for details. • Enjoy everyday savings on health, wellness, and more with VSP Simple Values.		
YOUR COVERAGE GOES FURTHER IN-NETWORK			
With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to vsp.com to find an in-network provider			

A Look at Your VSP Vision Coverage

Enroll in VSP® Vision Care to get access to savings and personalized vision care from a VSP network doctor for you and your family.

VALUE AND SAVINGS YOU LOVE.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling over $3,000 in savings.

PROVIDER CHOICES YOU WANT.

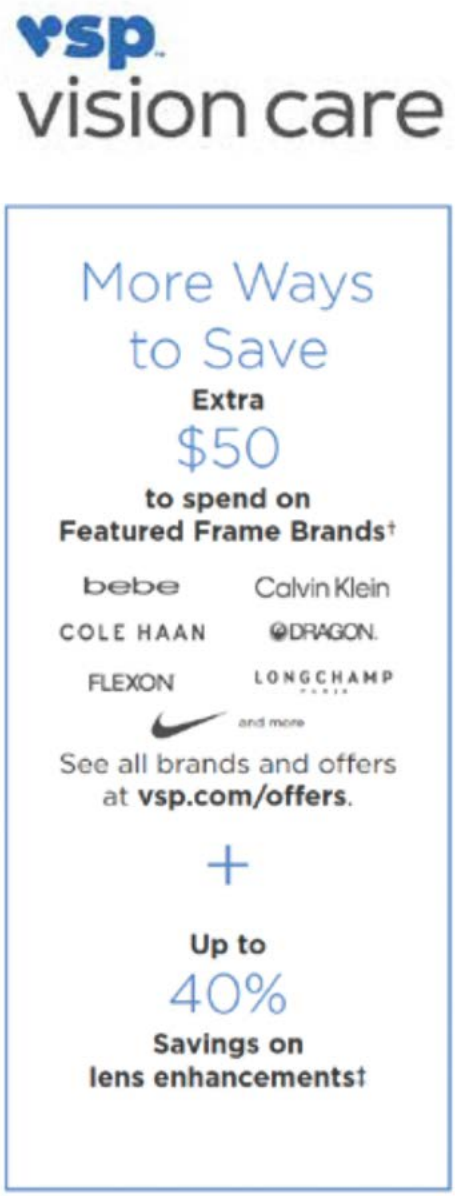
With thousands of in-network locations to choose from, including private practice doctors and retail locations nationwide, getting the most out of your benefits is easy.

QUALITY VISION CARE YOU NEED.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

USING YOUR BENEFIT IS EASY!

Create an account on vsp.com to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.



Vision Pretax Premiums Per Paycheck*

COVERAGE LEVEL	VSP VISION PLAN
Employee Only	$4.58
Employee + Spouse	$8.35
Employee + Child(ren)	$8.91
Employee + Family	$13.75

* Deductions are taken from each bi-weekly paycheck (26 per year).

VSP

vsp.com

800-877-7195

Voluntary Benefits

Accidental Injury and Hospital Indemnity insurance can help you pay for costs you may incur after an accidental injury or hospitalization. These plans are 100% voluntary.

These voluntary benefits pay a fixed, one-time benefit amount which you can use for any purpose you like. It can help pay for expenses not covered by your health care plan (such as your deductible or copays), lost income, child care, travel to and from treatment, home health care costs, or any of your regular household expenses.

GET YOUR ANNUAL PHYSICAL

The Accidental Injury policy will pay a $50 wellness benefit once per calendar year, if you get your annual physical. File your claim by phone, online, or by completing the Wellness Incentive Claim Form and mailing/faxing.



Hospital Indemnity Insurance

HOW THE PLAN WORKS

- In April, Sarah unexpectedly needed back surgery.
- Sarah was admitted to the hospital for surgery.
- Sarah submitted her claim and received a lump-sum payment of $1,000.

TOTAL BENEFIT PAID	$1,000

HOSPITAL INDEMNITY INSURANCE ELIGIBLE EXPENSES
Hospital Admission
Hospital Confinement
Hospital Intensive Care

HOSPITAL INDEMNITY INSURANCE PER PAYCHECK

COVERAGE LEVEL	
Employee Only	$5.84
Employee + Spouse	$13.39
Employee + Child(ren)	$10.38
Employee + Family	$17.92

Accidental Injury Insurance

HOW THE PLAN WORKS

- On his way to work, John was in a car accident.
- He was transported by ground ambulance to the emergency room and admitted to the hospital.
- He had a dislocated hip and spent five days in the hospital.
- He had several physical therapy sessions before returning to work.
- John submitted his accident claim and received $6,905 from his accidental injury insurance coverage.
- He used it toward his deductible, copay, and supplemental income for his missed workdays.

SAMPLE REIMBURSEMENTS	
Ground Ambulance	$300
Emergency Room	$200
X-ray	$40
MRI	$200
Hospital Stay – Admission + 5 days	$2,500
Dislocated Hip	$3,375
Appliances	$150
Physical Therapy (4 sessions)	$140
Total Benefit Paid	**$6,905**

ACCIDENTAL INJURY INSURANCE ELIGIBLE EXPENSES
Emergency Room Visits
Hospital Stays
Fractures and Dislocations
Medical Exams – including major diagnostic exams
Physical Therapy
Transportation and Lodging – if you are away from home when the accident happens

ACCIDENTAL INJURY INSURANCE PER PAYCHECK

COVERAGE LEVEL	
Employee Only	$3.96
Employee + Spouse	$7.44
Employee + Child(ren)	$9.90
Employee + Family	$13.38

Life and AD&D

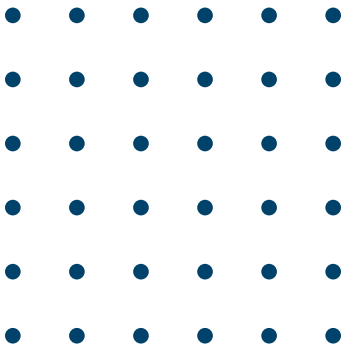
Life insurance pays a lump-sum benefit to your beneficiary(ies) to help meet expenses in the event of your death. AD&D Insurance pays a benefit if you die or suffer certain serious injuries as the result of a covered accident. Exyte USA provides Basic Life and AD&D for you at no cost and the opportunity to purchase Voluntary Life and AD&D insurance for you and your dependents.

LIFE AND AD&D INSURANCE – FOR YOU	
Coverage Level	**Coverage Amounts**
Basic Life and AD&D	$50,000
Voluntary Life	Increments of $10,000 up to $500,000 – not to exceed 5x your annual salary. Guaranteed Issue amount of $350,000 during initial enrollment.
Voluntary AD&D	Increments of $10,000 – not to exceed $500,000 or 10x your annual salary.

Evidence of Insurability

Employees and spouses who elect Voluntary Life coverage when they are first eligible to enroll may elect up to the guaranteed issue amount without providing Evidence of Insurability (EOI). You can access this application through our benefits enrollment process.

If you waive voluntary life insurance as a newly hired employee, you may add it later during annual enrollment; however, all amounts will be subject to EOI at that time.



Life and AD&D Insurance – For Your Dependents

Voluntary Life and AD&D insurance for your dependents can help protect your family during difficult times. Benefits will be paid to the employee.

LIFE INSURANCE – FOR YOUR DEPENDENTS (YOU MUST ELECT COVERAGE FOR YOURSELF)	
Coverage Level	**Coverage Amounts**
Spouse	Increments of $5,000 up to $250,000 – not to exceed 50% of Employee coverage. Guaranteed issue amount of $50,000 during initial enrollment.
Child(ren)	Increments of $2,000 to a maximum of $10,000.

AD&D INSURANCE – FOR YOUR DEPENDENTS (YOU MUST ELECT COVERAGE FOR YOURSELF)	
Coverage Level	**Coverage Amounts**
Spouse	Increments of $5,000 up to $250,000 – not to exceed 50% of Employee coverage.
Child(ren)	Increments of $2,000 to a maximum of $10,000.

VOLUNTARY LIFE MONTHLY RATES PER $1,000 OF COVERAGE

EMPLOYEE AGE	EMPLOYEE RATE	SPOUSE RATE
Under 25	$0.050	$0.050
25–29	$0.060	$0.060
30–34	$0.080	$0.080
35–39	$0.090	$0.090
40–44	$0.126	$0.126
45–49	$0.201	$0.201
50–54	$0.359	$0.359
55–59	$0.664	$0.664
60–64	$0.999	$0.999
65–69	$1.537	$1.537
70–74	$2.986	Coverage terminates when employee reaches age 70
75–79	$3.608	
80+	$7.309	
	CHILD RATE	
All ages	$0.170	

VOLUNTARY AD&D MONTHLY RATES PER $1,000 OF COVERAGE

EMPLOYEE AGE	EMPLOYEE RATE	SPOUSE RATE
All ages	$0.025	$0.025
	CHILD RATE	
All ages	$0.025	

To calculate your premium:

		Example:
Amount Elected:	Line 1	$100,000.00
Divide Line 1 by $1000:	Line 2	100
Copy Your Age Rate from Chart:	Line 3	$0.13
Multiply Line 2 by Line 3:	Line 4	$13.00
Multiply Line 4 by 12 months:	Line 5	$156.00
Divide Line 5 by 26:		
= Your Cost per Paycheck:		$6.00

Disability Insurance

Disability insurance can keep you financially stable should you become disabled and unable to work. It can help provide a sense of security, knowing that if the unexpected should happen, you'll still receive a monthly income. Exyte USA provides Short-Term Disability (STD) and Long-Term Disability (LTD) at no cost to you. You are automatically enrolled in coverage upon hire.

SHORT-TERM DISABILITY BENEFITS AT A GLANCE	
Coverage	60% of your weekly earnings to a maximum of $1,500 for up to 12 weeks
When Benefits Begin	7 days following injury or illness

LONG-TERM DISABILITY BENEFITS AT A GLANCE	
Coverage	60% of your pre-disability earnings, up to a maximum benefit of $10,000 per month until you recover or reach your Social Security Normal Retirement Age, whichever is sooner
When Benefits Begin	90 days following injury or illness
Pre-existing condition	3-month lookback/ 12-month waiting

HOW STD AND LTD WORK TOGETHER

First 7 days

PTO pays 100% of your pay until STD begins.

After 7 days of injury or illness

Approved STD pays a portion of your income.

After 90 days of disability

LTD begins if approved.

A qualifying disability is a sickness or injury that causes you to be unable to perform any other work for which you are or could be qualified by education, training, or experience.

What to Do if You Experience a Non-Work-Related Injury or Illness

If you experience an unexpected medical emergency that is not work-related and leaves you unable to work, you should contact Human Resources as well as your manager as soon as it is practical.

If you become aware of a planned medical event such as pregnancy or surgery, you should also contact Human Resources and your manager to request a leave of absence.

The next step is to initiate your disability claim with Lincoln (Exyte USA's disability insurance provider). All disability claims are subject to medical review and approval by Lincoln.

What Should I Do?

- **CONTACT**
  - Your supervisor/manager
  - Exyte Benefits Department
  - Lincoln 800-423-2765
- **COMPLETE PAPERWORK when received from Lincoln**
- **RETURN PAPERWORK to Lincoln**
- **IF YOU HAVE A WORK-RELATED INJURY:**
  1. Seek medical attention if the injury is serious.
  2. Notify your supervisor as soon as possible (ideally within 1 hour).
  3. Provide details about the incident: date/time, location, what happened, and any immediate actions taken.
  4. Supervisor submits the report in the incident reporting system.
  5. Workers' Compensation claims will be handled through Lincoln if medical leave or treatment is needed.



WHAT IS FMLA AND HOW DOES IT WORK?

The Family & Medical Leave Act (FMLA) provides job protection for you in the event of your own serious medical condition or to care for an immediate family member. Under FMLA, employees who have completed 12 months of employment are eligible for up to 12 weeks of unpaid leave.

FMLA is designed as job protection, not as a source of income. In most cases of your own serious medical condition, Short-Term Disability and FMLA work together to help you with your disability case.

LegalShield®

With LegalShield you will receive direct access to a dedicated provider law firm and unlimited legal consultation and advice on personal legal matters. 100% of matters are covered in-network and your provider firm is even available for emergency situations.

Examples of issues handled by LegalShield are:

- Court-sanctioned adoption
- Criminal misdemeanors
- Living will
- Power of Attorney
- Immigration Services
- Home Deeds
- Moving Traffic Violations
- Tax Audit and Collection Services

CONTRIBUTION PER PAYCHECK	
Legal Insurance	$7.27



Employee Assistance

You automatically have access to the Employee Assistance Program (EAP) through Spring Health. This program provides professional, confidential telephonic or face-to-face counseling services to you and your household members at no cost. The EAP can help you resolve personal issues and problems before they affect your health, relationships and work performance.

This program is available 24 hours a day, 365 days a year for confidential counseling, referral and follow-up services such as:

- Stress
- Marital or family problems
- Anxiety and depression
- Substance abuse (alcohol and/or drugs)
- Financial issues
- Child care issues – including identifying schools, day care, tutors, and more
- Aging parents
- SafeRide
- Wellness coaching
- Maintenance and repair providers
- Community volunteer opportunities

All EAP conversations are voluntary and strictly confidential. If you and your counselor determine that additional assistance is needed, you'll be referred to the most appropriate and affordable resource available. Although you're responsible for the cost of referrals, these costs are often covered under your medical plan.

Who is Eligible for Benefits

- Employee, married/divorced spouse, and significant others.
- Any household member, regardless of age or relationship, residing in the employee's home, including significant other and their children.
- All covered employees may bring anyone with them to their authorized/covered sessions regardless of relationship to employee.
- Children and grandchildren, age 26 or under, residing in US or Puerto Rico.
  - This includes children and grandchildren of significant other or partner.
- Any person meeting benefit eligibility prior to lay-off or termination of an employee will continue to be eligible for benefits up to 30 days from the date of employee's lay-off or termination.
  - Benefits are extended for 30 days from date of the employee's call within this timeframe.

ACCESS YOUR BENEFITS

WEBSITE: SPRINGHEALTH.COM/SUPPORT

TOLL FREE: 1-855-629-0554

FOR 24/7 CRISIS SUPPORT: PRESS 2

WE ARE AVAILABLE TO TAKE YOUR CALL 24 HOURS A DAY, 7 DAYS A WEEK.

LEARN MORE AND GET STARTED

- **Visit:** Exyte.SpringHealth.com
- **Download:** Spring Health mobile app

Life is Easier With the Right Support

You don't need to wait for a crisis to prioritize your mental health. Exyte partners with Spring Health to provide personalized care and resources to support you through any of life's challenges.

Spring Health can support your mental health with easy access to:

IN-NETWORK THERAPY

Get convenient, confidential support. Therapy is available at an in-network rate through the Exyte medical plan.

CARE GUIDANCE AND SUPPORT

A Care Navigator can walk you through your care plan, help you find the right provider, and support you along the way.

WORK-LIFE SERVICES

If needed, 2 of your covered therapy sessions can be used for a medication management consultation with a doctor.

WELLNESS EXERCISES

Create Moments is a library of self-guided exercises that can help you manage stress, calm anxiety, beat burnout, improve sleep, and be more mindful.

DIVERSE PROVIDERS

Choose an experienced therapist you feel comfortable with. Browse recommendations or search by specialty, gender, ethnicity, or language.

PERSONALIZED CARE

Access expert guidance and resources to navigate legal or financial matters, child care, household services, and more.

Spring Health is available at no cost to all Exyte employees and their household members.

Your care with Spring Health is private and confidential.

Scan the QR code to get connected with Spring Health today.

Educational Assistance

Tuition Reimbursement

Exyte USA is committed to assisting you in furthering your education, enhancing your current skills and improving your potential. Through the Tuition Reimbursement benefit, you are eligible to receive reimbursement for a portion of the costs you incur for higher education pursued outside of working hours. Exyte USA offers reimbursement for the cost of tuition fees, required textbooks and other supplies relating to eligible courses taken at an accredited college or university up to the IRS maximum of $5,250 per year.

Reimbursement is only for educational courses related to present responsibilities or which will help you prepare for reasonably foreseeable future responsibilities with the company. Full policy details and requirements can be found on **OneNET >> USA >> HR >> Policies** or contact ExyteAMERBenefits@exyte.net.

Student Debt Program

To help you meet your financial goals faster, Exyte USA offers the Student Debt Program administered by Fidelity. This program provides Company-funded payments to your qualified higher education student loans. Full policy details and requirements can be found on **OneNET >> USA >> HR >> Benefits >> Additional Benefits** or contact ExyteAMERBenefits@exyte.net.

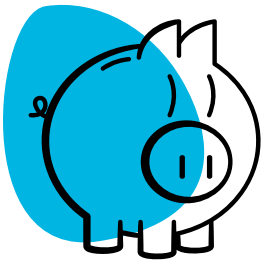
How it Works

While you keep making your minimum monthly payments, Exyte USA will send monthly payments of $100 to your loan service provider up to a $10,000 lifetime maximum. This extra payment can help lower your principal balance and reduce the amount of interest that will accrue on your loan, potentially saving you hundreds or even thousands of dollars.

Additional Resources

In addition to receiving the monthly contribution from Exyte USA, you will have access to the entire Fidelity Student Debt Program including the Student Debt Tool, which can help you:

- See all your student loans in one place.
- Understand your payments, interest costs, and potential age at payoff.
- Learn about the different repayment options that may be available to you.



Planning For Retirement

What does retirement look like for you? Maybe you plan to travel the world. Or maybe you'd like to take up some hobbies closer to home. Whatever your goal, it's important to take responsibility for your own finances so you have the income you'll need in the future.

One of the best ways to ensure a secure retirement is to start saving as early as possible. Our 401(k) savings plan allows you to save for retirement while receiving certain tax advantages. You can begin contributing to the plan at any time once you become eligible and start making contributions to your account through convenient payroll deductions.

Note that new hires will automatically be enrolled at 3% at about 45 days after employment.

- Each year, there will be an automatic 1% increase in deferrals up to 15%.
- You may enroll for a different percentage or opt out of these programs via www.netbenefits.com.

Increase Your Retirement Savings With a 401(k)

- **Exyte USA will match 100% of your contribution for each dollar you defer to the plan, up to the first 4%.**
- Contribute using convenient payroll deductions up to the 2026 IRS limit of $24,500 per year. The 2027 limit will be released by the IRS in the late fall.
- Change the amount of your contributions or stop your payroll contributions at any time.
- Decide how to invest your 401(k) or allow the plan to choose for you.
- Age 50 or older? Make an additional "catch-up" contribution of up to $8,000 in 2026 to save even more. The 2027 limit will be released by the IRS in the late fall.
- If you earn $150,000 or more per year and make catch-up contributions, federal guidelines require those catch-up contributions to be made on a Roth (after-tax) basis.
- You are always 100% vested in your contributions to the plan. You are 40% vested in company contributions after two years and 100% vested after three years.
- A Roth 401(k) option is also available, and can be used in place of, or in conjunction with, the pretax provision of the traditional 401(k) plan.

Changing or Stopping Your Contributions

Changes to your 401(k) account can be made at any time by logging on to your account at www.netbenefits.com or contacting a Fidelity representative at 800-835-5097. All changes will become effective within two pay cycles and will remain in effect until modified or terminated by you. You may stop your contributions anytime. Once you discontinue contributions, you may re-enroll again at any time.

Consolidating Your Retirement Savings

If you have an existing qualified retirement plan (pretax) with a prior employer, you may transfer or rollover that account into the Plan anytime. To initiate a rollover into Exyte USA 401(k) Retirement Savings Plan, please contact Fidelity Investment at 800-835-5097 for assistance.

Investing In The Plan

You decide how to invest the assets in your account. Exyte USA 401(k) plan offers a selection of investment options for you to choose from. You may change your investment choices and access your account at any time by logging on to www.netbenefits.com.

PARKWOODS WEALTH PARTNERS

Parkwoods will answer any financial question you may have far beyond the Exyte 401(k) retirement plan for no cost to you. They will help you make sense of confusing financial terms and concepts so that you may learn how to apply them to your life.

But a greater benefit to you...Parkwoods offers all Exyte employees the opportunity to work with a Certified Financial Planner to create a Comprehensive (80-120 page) Financial Plan that outlines simple calls-to-action guiding you towards a better financial future. These financial plans will lead you towards achieving your financial goals while maintaining your standard of living. The current market value of these Financial Plans is approximately $2,500; Parkwoods' offer to Exyte employees is an affordable $160.

Email Deirdre Kochanski at deirdre.kochanski@parkwoods.com to get started.

Deirdre Kochanski

deirdre.kochanski@parkwoods.com

Direct: 520-327-1019

Monday – Friday, 7 a.m. – 4 p.m. Arizona Time

Paid Time Off (PTO)

As a full-time, regular employee, you accrue Paid Time Off (PTO) on a weekly basis. PTO can be used for vacation, sick leave, and personal days. You begin accruing PTO on your first day and may use your PTO anytime, subject to your manager's approval.

Accrual occurs weekly based on an annual number of hours divided by 52 weeks. The maximum accrued balance at any given time is equal to the annual accrual plus 80 hours. Once you are at or above the maximum total accrual level, you will stop accruing PTO until your PTO balance falls below the maximum total accrual level.

TIER	YEARS OF SERVICE	HOURS ACCRUED PER YEAR	HOURS ACCRUED PER WEEK	MAXIMUM ACCRUAL LIMIT
Tier 1	0-4	120	2.308	200
Tier 2	5-9	160	3.077	240
Tier 3	10+	200	3.846	280

Review the PTO Policy on OneNET or in the HRIS system for complete details.

Paid Sick Time

As a part-time or temporary/limited assignment employee, you are eligible to accrue Paid Sick Time. You will accrue 1 hour for every 30 hours worked.

Review the Paid Sick Time Policy on OneNET or in the HRIS system for complete details.

Paid Holidays

As a full-time, regular employee, you receive 9 paid holidays per year, including one floating holiday. These holidays must be reported on your timecard.

HOLIDAY	HOLIDAY OBSERVANCE DATE	CALENDAR DATE OF HOLIDAY
New Year's Day	Friday, January 1, 2027	Friday, January 1, 2027
Memorial Day	Monday, May 31, 2027	Monday, May 31, 2027
Independence Day	Monday, July 5, 2027	Sunday, July 4, 2027
Labor Day	Monday, September 6, 2027	Monday, September 6, 2027
Thanksgiving Day	Thursday, November 25, 2027	Thursday, November 25, 2027
Day After Thanksgiving	Friday, November 26, 2027	Friday, November 26, 2027
Christmas Eve	Friday, December 24, 2027	Friday, December 24, 2027
Christmas Day	Monday, December 27, 2027	Saturday, December 25, 2027
Floating Holiday	See "Floating Holiday Policy" for details	

Important Contacts

If you have any questions after you enroll, please call the benefit plan providers directly or log on to their websites. See the table below for contact information.

COVERAGE	CONTACT	PHONE	WEBSITE
Medical **Group # 419536**	BlueCross Blue Shield of Texas	866-818-8106	www.bcbstx.com
Dental **Group # 419541**	BlueCross BlueShield of Texas	866-818-8106	www.bcbstx.com
Vision **Group #40161378**	VSP Advantage	800-877-7195	www.vsp.com
HSA/FSA/CSA	Rocky Mountain Reserve	888-722-1223	user.rmrbenefits.com/login
Life & AD&D	Lincoln Financial	800-423-2765	www.lincolnfinancial.com
Disability	Lincoln Financial	800-238-6252	www.lincolnfinancial.com
401(k) Retirement Plan **Group #51051**	Fidelity	800-835-5097	www.netbenefits.com
Employee **Assistance Program**	Spring Health	855-629-0554	springhealth.com/support
Accidental Injury & **Hospital Indemnity**	Lincoln Financial	800-423-2765	www.lincolnfinancial.com
Legal Benefits	LegalShield	888-807-0407	benefits.legalshield.com/exyte
Wellness Rewards	GO Wellbeing	Available January 1	Available January 1
Holmes Murphy **Benefit Analyst**	Michelle Toledo	214-265-2260	MToledo@holmesmurphy.com
Parkwoods Wealth Partners	Deirdre Kochanski	520-327-1019	deirdre.kochanski@parkwoods.com



Benefits Website

For more information on your benefit offerings or if you have any questions, visit our benefits website at ExyteUSABenefits.com.

Holmes Murphy Benefits Analyst

QUESTIONS ABOUT YOUR BENEFITS?

All you have to do is call or email your Benefits Coordinator and chances are she can help you answer many of the benefit questions you have!

Such as...

- How do I order a new ID card?
- Is my doctor/dentist In-Network or Out-of-Network?
- What is my deductible and what on earth does "co-insurance" mean?
- I received a bill from my doctor, was my claim paid correctly?
- What is an "EOB" and how do I read it?
- I just need to get my teeth cleaned, how is this covered?
- I have an HSA – how do I know if something is a qualified expense?
- How often can I get new eyeglasses/contacts?
- I paid for my prescription out of pocket, where can I find a claim form?



MICHELLE TOLEDO

Sr. Benefit Analyst

MToledo@holmesmurphy.com

Direct: 214-265-2260

Notes

Notes

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2027 BENEFITS GUIDE

October 2026