diversified

2026
Benefits Information Guide

ANNUAL ENROLLMENT: NOVEMBER 3–14, 2025

Welcome to Your Benefits!

DIVERSIFIED ASSOCIATES,

Diversified is committed to providing associates with choices across several options of comprehensive benefits. We recognize the value of an associate benefits package and strive to create options that best meet a variety of needs.

This guide provides an overview of your benefit options for the 2026 plan year. Please utilize this benefit guide to help you make decisions on your plan elections for both you and your family. We recommend that you share this guide and benefits materials with your spouse/domestic partner, if they are involved in making benefits decisions for your family.

2026 ANNUAL ENROLLMENT - STEPS TO TAKE

The Annual Enrollment period will be from Monday, November 3, to Friday, November 14.

Start by reviewing your benefits in this guide and on the new Diversified benefits website **OneDiversifiedBenefits.com**. When you are ready to enroll, click on **Enroll/Make Changes** in the main menu, then complete your enrollment on the Selerix Enrollment Portal. If you need help logging in to the Selerix Enrollment Portal, click the **How to Enroll/Make Changes** link for instructions.

Unless you actively select a benefit change, your current elections will roll over into 2026 (except for FSA and HSA contributions). However, we suggest that you review your current elections for accuracy, check and update any dependent information, and add your beneficiaries in the Selerix Enrollment Portal even if you intend to keep your coverages the same.

NEW HIRES

You and your eligible family members can participate in the benefit program on the 1st of the month following your date of hire. You have 30 days from date of hire to make your elections. Start by reviewing this guide and the New Hire Information section on the new Diversified benefits website, **OneDiversifiedBenefits.com**. When you are ready to enroll, click on **Enroll/Make Changes** in the main menu, then complete your enrollment on the Selerix Enrollment Portal. If you need help logging in to the Selerix Enrollment Portal, click the **How to Enroll/Make Changes** link for instructions.

At any time if you have questions or need help evaluating your options, please contact one of our Benefit Specialists at 866-549-8660, available Monday–Friday; 8:00 a.m. – 5:00 p.m. CST.

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Your 2026 Benefits

Below are the coverage offerings for 2026. More details about the plans can be found in this guide and on the **Enrollment Portal**.

MEDICAL PLANS

- Anthem Blue $1,000 Deductible Plan
- Anthem Blue $2,000 Deductible Plan
- Anthem Blue HSA $4,000 Deductible Plan
- Anthem Blue HRA $5,500 Deductible Plan
- Kaiser Permanente $0 Deductible Plan (California Associates only)

DENTAL PLANS

- Cigna Dental – Basic Plan with Orthodontia
- Cigna Dental – Enhanced Plan with Orthodontia

VOLUNTARY VISION PLAN

- Sun Life Vision Plan – Exam and Materials

OTHER COVERAGES

Employer Paid:

- Prudential Basic Life and Accidental Death & Dismemberment (AD&D)
- State Mandated Disability (CA, NJ, NY)
- Prudential Short-Term Disability
- Prudential Long-Term Disability
- TELUS Health Employee Assistance Plan (EAP)
- International Medical Group (IMG) Travel Assistance
- Bank of America Health Savings Account (compatible with the Anthem Blue HSA $4,000 Plan only)
- Bank of America Health Reimbursement Account (compatible with the Anthem Blue HRA $5,500 Plan only)

Associate Paid:

- Bank of America Health Care FSA (not compatible with an HSA)
- Bank of America Limited Purpose FSA (compatible with an HSA, **dental, and vision** only)
- Bank of America Dependent Care FSA
- Bank of America Commuter Reimbursement Account (CRA)
- Prudential Supplemental Term Life and Accidental Death & Dismemberment (AD&D)
- Prudential Supplemental Dependent Term Life and Accidental Death & Dismemberment (AD&D)
- Prudential Supplemental Medical Insurance
  - Critical Illness
  - Accident
  - Hospital Indemnity
- Nationwide Pet Insurance
- Farmers Insurance Homeowners and Auto

Important Contacts

COVERAGE	CONTACT	PHONE	WEBSITE
Benefit Management Portal	Enrollment Portal		partners.benselect.com/onediversified
Benefit Specialist	Diversified Benefit Specialist	866-549-8660 Monday–Friday; 8:00 a.m.–5:00 p.m. CST	N/A
Basic Life/AD&D and Supplemental Term Life	Prudential	Life claims: 800-524-0542 Fax: 888-227-6764 Group # 72685 Monday–Friday; 8:00 a.m.–8:00 p.m. EST	mybenefits.prudential.com
Disability (Short-Term and Long-Term) and Absence (FMLA) Reporting	Prudential	877-367-7781 Fax: 877-889-4885 Group # 72685 Monday–Friday; 8:00 a.m.–8:00 p.m. EST	mybenefits.prudential.com
State of California Disability Benefits			edd.ca.gov/disability
Medical Anthem Blue $1,000 and $2,000 PPO plans	Anthem	Member Services: 855-397-9267 Nurseline: 888-724-BLUE Group # GB0541	anthem.com
Anthem Blue HSA $4,000 and HRA $5,500 plans			
Medical Kaiser North and South Plans (California Associates Only)	Kaiser Permanente Pharmacy Benefit Manager: WellDyne	800-464-4000 Group # 605355 (North) Group # 233325 (South)	healthy.kaiserpermanente.org
Pharmacy Benefits Manager (Anthem Plans Only)	WellDyne	800-383-4453	wellview.welldyne.com
Health Savings Account (HSA)	Bank of America	866-791-0250	myhealth.bankofamerica.com
Health Reimbursement Account (HRA)			
Flexible Spending Account (FSA)			

Important Contacts Cont.

COVERAGE	CONTACT	PHONE	WEBSITE
Employee Assistance Program (EAP)	TELUS Health	888-851-7032	one.telushealth.com **Username: DiversifiedUS** **Password: EAP**
Dental	Cigna	800-244-6224	mycigna.com
Voluntary Vision	Sun Life – VSP Network	800-877-7195 Group # 957435	vsp.com/eye-doctor sunlife.com
Travel Assistance	International Medical Group (IMG)	855-847-2194 (inside the US) 317-927-6881 (anywhere in the world)	imglobal.com
401(k) Plan	Merrill Lynch	800-228-4015	benefits.ml.com
Voluntary Accident, Critical Illness, and Hospital Indemnity	Prudential	844-455-1002 Fax: 844-929-9780 Group # 72685 8:00 a.m.–8:00 p.m. EST	mybenefits.prudential.com
Voluntary MetLaw Legal	MetLife	800-821-6400 Group #: 174185	legalplans.com
Voluntary Auto	Farmers Insurance	855-628-2330	myautohome.farmers.com
Voluntary Homeowners	Farmers Insurance	855-628-2330	myautohome.farmers.com
Voluntary Pet Insurance	Nationwide	877-738-7874 Group # 5350	petinsurance.com/diversifiedus

Eligibility and Enrollment

ELIGIBILITY

You are eligible to participate in the insurance plans if you are a regular full-time associate scheduled to work 30 hours or more per week. You and your eligible dependents can enroll in the benefits package on the 1st of the month following your date of hire. If you do not enroll for benefits during your initial eligibility period, you must wait until the next Open Enrollment to elect benefits (unless you have a qualifying life event), and you may be subject to late entrant penalties.

All eligible associates will be automatically enrolled in the company-paid Group Basic Life and AD&D Insurance, Long-Term Disability, Short-Term Disability, EAP, Travel Assist, Health Advocate, and state-mandated disability plans.

DEPENDENT ELIGIBILITY

If you are covered by the Medical, Dental, Vision, Supplemental Life, Critical Illness, Hospital Indemnity, and Accident plans, you may enroll your eligible dependents in the same respective plan. Your eligible dependents include:

- Your dependent children through the end of the day in which they turn age 26.
- Legally adopted children from the date you assume legal responsibility*.
- Your legal spouse or your qualified domestic partner (affidavit required).
- Children who are mentally or physically handicapped and are totally dependent on you for support, regardless of age, with the exception of incapacitated children age 26 or older.

* Also included are your children (or children of your spouse) for whom you have legal responsibility resulting from a valid court decree.

QUALIFYING LIFE EVENTS

No changes are allowed to your Medical, Dental, Vision, or FSA coverage during the plan year, except for a qualifying life event.

Qualifying life events that could result in changes to your coverage include:

- Marriage or divorce
- Birth or adoption of a child
- Death of a dependent
- Medicare entitlement
- Termination of your spouse's employment that affects benefits
- Loss of other group coverage

IF YOU HAVE A QUALIFYING LIFE EVENT

Please contact Zachary Dugger at **zdugger@onediversified.com**, your HR Business Partner and **PeopleCentral@onediversified.com** to report your qualifying life event.

Zachary will provide information on what documentation is needed, where to send it, and your next steps to complete the process. Documentation must be provided within 30 days of the change. If you do not do so within 30 days, you must wait until the next Annual Enrollment or qualifying life event to make benefit changes. For address changes, please log in to Dayforce to make the change.

Enrollment Assistance

TAKE ACTION!

This year, we are thrilled to offer all benefit-eligible associates a valuable one-on-one benefits education and enrollment experience with a Benefit Specialist. All benefit-eligible associates are encouraged to speak with a Specialist to enroll in or decline benefits. During your meeting, the Specialist will explain all benefits offered through Diversified and review voluntary benefits, answer questions, complete the online enrollment process, and help you better understand how our benefits fit you and your family's individual needs.

BENEFIT SPECIALISTS ARE AVAILABLE NOVEMBER 3–14, 2025 | MONDAY–FRIDAY FROM 8:00 AM–5:00 PM CST

There are two ways to reach a Benefit Specialist:

1. Visit **onediversified.simplybook.me** to schedule a specific time to meet with a Benefit Specialist over the phone or through a Teams meeting. Appointments should be scheduled in advance.

2. Call 866-549-8660, where Benefit Specialists are available on a first-come, first-served basis Monday through Friday, 8 a.m. to 5 p.m. CST.

FREQUENTLY ASKED QUESTIONS

How long is a typical enrollment session and what is discussed?

Meetings are about 20 minutes, allowing the Benefit Specialist to:

- Explain all the benefit options available (i.e., medical, dental, vision, voluntary benefits, or other benefit programs).
- Answer specific questions from associates and spouses.
- Enroll the associate electronically in his/her choices.

Will the Benefit Specialist answer all questions regarding benefit plans?

All Benefit Specialists are trained, licensed, and prepared to answer your benefit questions. In the event that an associate asks a question that requires additional research, the Benefit Specialist will take down the associate's contact information and follow up with an answer within 24 hours.

How should an associate prepare for their meeting with a Benefit Specialist?

We suggest reviewing your benefit summary and sharing information with family members, if applicable. For your appointment, please come prepared with any necessary dependent information (e.g., Social Security numbers, birth dates) to ensure demographic and beneficiary information is up-to-date.

Do associates have to meet with a Benefit Specialist?

No, but, all benefit-eligible associates are encouraged to speak with a Specialist to enroll in or decline benefits. The Benefit Specialist will explain all the benefit and voluntary options and enroll associates in their desired plans.

HOW TO ENROLL IN BENEFITS ONLINE

Diversified will use Selerix to enroll in benefits for 2026.

Selerix is our online enrollment tool. The site is accessible 24/7 at **partners.benselect.com/onediversified.** The following tips will help you prepare for and complete the online enrollment process.

Please follow the directions below to log in to the website.

- Go to **partners.benselect.com/onediversified**
- Every associate will need to set up a username and password to log in to the system. Use the following information to create your account
  - Username: Your full Associate ID number – no dashes (your Associate ID can be found in Dayforce)
  - Pin: Last 4 digits of your SSN + last 2 digits of your birth year

A Benefit Specialist can also assist you

with understanding the benefits so you can make the best plan selection for your individual circumstances.

You can reach a Benefit Specialist by calling 866-549-8660, Monday–Friday 8:00 AM–5:00 PM CST or scheduling a one-on-one appointment. See page 6 for details.

BEFORE AND DURING ENROLLMENT

Review Your Options and Make Your Choices

Take time to review the information in this guide. It will help you understand your benefit choices. Discuss it with your family, too!

- Check and confirm your dependents. If you want to add a dependent for coverage for next year, now is the time to do it. You may not add dependents during the plan year unless you have a qualified change in status, also known as a qualified life event. You will need to provide the full name, Social Security number, and date of birth for any spouse or dependent you enroll. If you have not yet received the Social Security number for a newborn, enter 000-00-0001. Contact your Benefit Specialist at 866-549-8660 to update the dependent's Social Security number after you receive it.
- If you are electing Supplemental Term Life and AD&D Insurance, you will need to enter the full name, relationship, and Social Security number(s) of your beneficiaries (it is recommended that they be at least 18 years old or you should appoint a guardian).
- If you need to exit Selerix before finishing your enrollment elections, click "log out".

AFTER ENROLLMENT

Your Payroll Deductions

Equal payroll deductions will be taken from each paycheck to cover your share of the premium. Our Cafeteria Plan allows you to make Medical, Dental, Vision, 401(k), HSA, or FSA elections on a pre-tax basis. Your Supplemental Life, Critical Illness, Accident, Hospital Indemnity, MetLaw, and Pet Insurance premiums are deducted on an after-tax basis. Auto and Homeowners insurance will be on a direct bill basis with Farmers Insurance.

ID Cards

All associates who elect an Anthem BCBS plan will receive a new ID card for 2026. For Kaiser, only new enrollees will receive a card. Anthem plan members can access digital cards at **anthem.com** and Kaiser members at **healthy.kaiserpermanente.org**. There are no physical ID cards for dental or vision. To access a digital ID card for dental, visit **myCigna.com** or download the myCigna app. To access a digital ID card for vision, visit the Sun Life member portal.

Medical Plans

Compare your Diversified 2026 medical plan options below. Review the chart for a quick glance at the in-network coverage in each of the plans. It is important to note that out-of-network services do not count toward your in-network deductible or out-of-pocket maximum.

IN-NETWORK BENEFITS AT A GLANCE

	ANTHEM BLUE $1,000 PLAN	ANTHEM BLUE $2,000 PLAN	ANTHEM BLUE HSA $4,000 PLAN*	ANTHEM BLUE HRA $5,500 PLAN*	KAISER PERMANENTE $0 PLAN (CA ONLY)
Deductible Individual Family**	 $1,000 $2,000	 $2,000 $4,000	 $4,000 $8,000	 $5,500 $11,000	$0
Out-of-Pocket Maximum Individual Family**	 $5,000 $9,500	 $8,000 $16,000	 $8,500 $17,000	 $11,000 $22,000	 $1,500 $3,000
Preventive Care	$0	$0	$0	$0	$0
Telemedicine	$0	$0	20% after deductible $59 visit cost	20% after deductible $59 visit cost	N/A
PCP	$30 copay	$40 copay	20% after deductible	20% after deductible	$30 copay
Specialist	$50 copay	$60 copay	20% after deductible	20% after deductible	$50 copay
Urgent Care	$75 copay	$75 copay	20% after deductible	20% after deductible	$30 copay
Emergency Room	$200 copay	$250 copay	20% after deductible	20% after deductible	$100 per visit
Inpatient Facility	20% after deductible	20% after deductible	20% after deductible	20% after deductible	$500 per admission
Outpatient Facility	20% after deductible	20% after deductible	20% after deductible	20% after deductible	$200 per procedure
Rx Copays (30-day supply) Tier 1 Tier 2 Tier 3	 $10 $35 $60	 $15 $40 $70	After deductible $15 $40 $70	After deductible $15 $40 $70	 $15 $35 N/A
Rx Copays (90-day supply) Tier 1 Tier 2 Tier 3	 $20 $70 $120	 $30 $80 $140	After deductible $30 $80 $90	After deductible $30 $80 $90	$30 / $70

* Prudential Accident and Hospital Indemnity are included with this plan.
** In the Family coverage tier, the plan will begin paying coinsurance for a single person once the individual deductible is met up to the individual out-of-pocket maximum. All family member in-network expenses apply toward the Family deductible and out-of-pocket maximum.

Anthem Blue Medical Plans Additional Resources

FIND AN IN-NETWORK DOCTOR

You can save money on care by using in-network providers. To find an in-network provider, follow the steps below.

1. Go to **anthem.com/find-care**
2. Click "Basic search as a guest"
3. Select "Medical Plan or Network"
4. Select the state where you reside
5. Select "Medical (Employer-Sponsored)" for how you get health insurance
6. Select your network
   - For GA providers: BLUE OPEN ACCESS POS
   - For all other states: NATIONAL PPO (BLUECARD PPO)

ANTHEM CONDITION CARE

This no-cost health and wellness program provides access to nurses and other health care professionals who can help answer questions, provide guidance, and support members and covered dependents with:

- Asthma
- Chronic obstructive pulmonary disease (COPD)
- Coronary artery disease
- Type 1 and Type 2 diabetes
- Heart failure

Call 866-962-0952 to get started.

Anthem

Your Prescription Benefits with WellDyne

When you enroll in one of our Anthem medical plans, you will also receive prescription benefits through WellDyne, our Pharmacy Benefits Manager. Here you can see the basics, but be sure to check the formulary for a full list of the prescriptions that are covered by the plan. Remember, you can always ask your doctor about lower-cost alternatives. Generic drugs tend to be less expensive than brand-name drugs, so keep that in mind when shopping around.

IN-NETWORK BENEFITS				
	Anthem Blue $1,000 Plan	**Anthem Blue $2,000 Plan**	**Anthem Blue HSA $4,000 Plan**	**Anthem Blue HRA $5,500 Plan**
RETAIL RX (UP TO 30-DAY SUPPLY)				
Tier 1	$10 copay	$15 copay	$15 copay after deductible	$15 copay after deductible
Tier 2	$35 copay	$40 copay	$40 copay after deductible	$40 copay after deductible
Tier 3	$60 copay	$70 copay	$70 copay after deductible	$70 copay after deductible
MAIL ORDER (UP TO 90-DAY SUPPLY)				
Tier 1	$20 copay	$30 copay	$30 copay after deductible	$30 copay after deductible
Tier 2	$70 copay	$80 copay	$80 copay after deductible	$80 copay after deductible
Tier 3	$120 copay	$140 copay	$140 copay after deductible	$140 copay after deductible

Your Prescription Benefits with WellDyne Cont.

Welldyne Offers Multiple Options for Filling Your Prescriptions

RETAIL PHARMACY NETWORK

With over 65,000 national, regional, and local pharmacies in WellDyne's network, it should be easy to find one nearby.

HOME DELIVERY

WellDyne's mail order pharmacy offers an affordable way to get the medications you take on a regular basis shipped directly to your door. You will get a three-month supply and WellDyne will remind you when it's time to refill so you don't run out of your medication! You can sign up for home delivery by visiting **WellView.WellDyne.com** and selecting "Register Now".

SPECIALTY PHARMACY

If you are taking a specialty medication for a complex health condition, WellDyne's here to give you added support and personalized clinical guidance. To get started with WellDyne Specialty Pharmacy, call 800-641-8475 or fax your prescription to 800-530-8589.

For questions about your pharmacy benefits, visit WellView.WellDyne.com, or call 800-383-4453.

NEW PRESCRIPTION PROGRAMS FOR 2026

InternationalRx Drug Program: An elective program for associates using prescription drugs that can be easily attained at a lower cost outside the U.S.

WellManaged Inflammatory Conditions Program: Requires associates using specific brand-name prescriptions to first try a derivative drug, which costs less but has the same core benefits as the brand drug.

WellManaged Diabetes Program. Provides a copay assistance program for those taking diabetes medications.

WellManaged Weight Program. Requires those taking GLP-1 medications for weight loss to participate in the WellDoc weight management program alongside medication.

If you are eligible for participation in any of the above programs, you will be receiving a letter from WellDyne with more details in the coming weeks.

Medical Coverage – Kaiser Plan

Associates living in California may enroll in our Anthem plans and also have the option to enroll in one of our Kaiser Permanente medical plans. These plans are offered for both Northern and Southern California and provide both medical and pharmacy benefits. A brief description of the benefits is below. See the plan document for full coverage details.

IN-NETWORK BENEFITS	$0 DEDUCTIBLE
Office Visit Copay (PCP/ Specialist)	$30 / $50
Preventive Care	Covered at 100%
Calendar-Year Deductible (Individual/ Family)*	$0 / $0
Coinsurance	100%
Total Out-of-Pocket Calendar-Year Maximum Includes Coinsurance	$1,500 / $3,000
Inpatient Facility Services	$500 per admission
Outpatient Facility Services	$200 per procedure
Urgent Care Copay	$30
Emergency Room Copay	$100 per visit
PRESCRIPTIONS	
Tier 1/Tier 2 Copays (30-Day Supply)	$15 / $35
Home Delivery Copays (90-Day Supply)	$30 / $70

KAISER PERMANENTE®

Medical Bi-Weekly Payroll Deductions (Pre-Tax) Summary

ENROLLMENT TIER	ANTHEM BLUE $1,000 PLAN	ANTHEM BLUE $2,000 PLAN	ANTHEM BLUE HSA $4,000 PLAN*	ANTHEM BLUE HRA $5,500 PLAN*
Associate	$195.00	$125.00	$46.00	$37.00
Associate + Spouse	$460.00	$302.00	$194.00	$156.00
Associate + Child(ren)	$441.00	$298.00	$192.00	$154.00
Family	$707.00	$480.00	$322.00	$258.00

* Prudential Accident and Hospital Indemnity are included with this plan.

ENROLLMENT TIER	KAISER PERMANENTE $0 DEDUCTIBLE PLAN – FOR CALIFORNIA ASSOCIATES ONLY PLAN ELIGIBILITY IS DEPENDENT UPON HOME ADDRESS ZIP CODE	
Associate	North Plan	South Plan
	$190.00	$81.00
Associate + Spouse	$469.00	$207.00
Associate + Child(ren)	$426.00	$210.00
Family	$682.00	$337.00

Understanding Your In-Network Medical Plan Exposure

Headcount	117	19	16	14
% Per Pay Increase from 2025	7.0%	7.0%	6.9%	7.0%
$ Per Pay Increase from 2025	$12.78	$30.15	$28.56	$46.23
Per Pay Medical Premium 2026	$195.00	$460.00	$441.00	$707.00
	ANTHEM BLUE $1,000 PLAN ASSOCIATE	ANTHEM BLUE $1,000 PLAN ASSOCIATE + SPOUSE	ANTHEM BLUE $1,000 PLAN ASSOCIATE + CHILD(REN)	ANTHEM BLUE $1,000 PLAN FAMILY
Annual Premium	$5,070	$11,960	$11,466	$18,382
Deductible	$1,000	$2,000	$2,000	$2,000
Coinsurance	20%	20%	20%	20%
OOP Max	$5,000	$9,500	$9,500	$9,500
HSA/HRA Credit	$0	$0	$0	$0
Total Annual Exposure	$10,070	$21,460	$20,966	$27,882

Headcount	239	60	58	96
% Per Pay Increase from 2025	10.0%	7.0%	7.0%	7.2%
$ Per Pay Increase from 2025	$11.39	$19.65	$19.50	$32.19
Per Pay Medical Premium 2026	$125.00	$302.00	$298.00	$480.00
	ANTHEM BLUE $2,000 PLAN ASSOCIATE	ANTHEM BLUE $2,000 PLAN ASSOCIATE + SPOUSE	ANTHEM BLUE $2,000 PLAN ASSOCIATE + CHILD(REN)	ANTHEM BLUE $2,000 PLAN FAMILY
Annual Premium	$3,250	$7,852	$7,748	$12,480
Deductible	$2,000	$4,000	$4,000	$4,000
Coinsurance	20%	20%	20%	20%
OOP Max	$8,000	$16,000	$16,000	$16,000
HSA/HRA Credit	$0	$0	$0	$0
Total Annual Exposure	$11,250	$23,852	$23,748	$28,480

Understanding Your In-Network Medical Plan Exposure Cont.

Headcount	328	67	56	124
% Per Pay Increase from 2025	11.1%	6.8%	7.1%	7.0%
$ Per Pay Increase from 2025	$4.61	$12.39	$12.73	$21.09
Per Pay Medical Premium 2026	$46.00	$194.00	$192.00	$322.00
	ANTHEM BLUE HSA $4,000 PLAN ASSOCIATE	ANTHEM BLUE HSA $4,000 PLAN ASSOCIATE + SPOUSE	ANTHEM BLUE HSA $4,000 PLAN ASSOCIATE + CHILD(REN)	ANTHEM BLUE HSA $4,000 PLAN FAMILY
Annual Premium	$1,196	$5,044	$4,992	$8,372
Deductible	$4,000	$8,000	$8,000	$8,000
Coinsurance	20%	20%	20%	20%
OOP Max	$8,500	$17,000	$17,000	$17,000
HSA Credit	$625	$750	$750	$1,000
Total Annual Exposure	$9,071	$21,294	$21,242	$24,372

Headcount	0	0	0	0
% Per Pay Increase from 2025	0.0%	0.0%	0.0%	0.0%
$ Per Pay Increase from 2025	N/A	N/A	N/A	N/A
Per Pay Medical Premium 2026	$37.00	$156.00	$154.00	$258.00
	ANTHEM BLUE HRA $5,500 PLAN ASSOCIATE	ANTHEM BLUE HRA $5,500 PLAN ASSOCIATE + SPOUSE	ANTHEM BLUE HRA $5,500 PLAN ASSOCIATE + CHILD(REN)	ANTHEM BLUE HRA $5,500 PLAN FAMILY
Annual Premium	$962	$4,056	$4,004	$6,708
Deductible	$5,500	$11,000	$11,000	$11,000
Coinsurance	20%	20%	20%	20%
OOP Max	$11,000	$22,000	$22,000	$22,000
HRA Credit	$625	$750	$750	$1,000
Total Annual Exposure	$11,337	$25,306	$25,254	$27,708

Note: The $300 additional contribution is not included in the HSA and HRA plan calculations.

Understanding Your In-Network Medical Plan Exposure Cont.

Kaiser plans are for California associates only.

Headcount	24	6	4	9
% Per Pay Increase from 2025	4.2%	3.8%	3.8%	3.7%
$ Per Pay Increase from 2025	$7.70	$17.16	$15.74	$24.53
Per Pay Medical Premium 2026	$190.00	$469.00	$426.00	$682.00
KAISER NORTH	KAISER $0 DEDUCTIBLE PLAN ASSOCIATE	KAISER $0 DEDUCTIBLE PLAN ASSOCIATE + SPOUSE	KAISER $0 DEDUCTIBLE PLAN ASSOCIATE + CHILD(REN)	KAISER $0 DEDUCTIBLE PLAN FAMILY
Annual Premium	$4,940	$12,194	$11,076	$17,732
Deductible	$0	$0	$0	$0
Coinsurance	0%	0%	0%	0%
OOP Max	$1,500	$3,000	$3,000	$3,000
HSA/HRA Credit	$0	$0	$0	$0
Total Annual Exposure	$6,440	$15,194	$14,076	$20,732

Headcount	30	2	6	8
% Per Pay Increase from 2025	6.5%	5.0%	4.3%	4.2%
$ Per Pay Increase from 2025	$4.94	$9.95	$8.72	$13.62
Per Pay Medical Premium 2026	$81.00	$207.00	$210.00	$337.00
KAISER SOUTH	KAISER $0 DEDUCTIBLE PLAN ASSOCIATE	KAISER $0 DEDUCTIBLE PLAN ASSOCIATE + SPOUSE	KAISER $0 DEDUCTIBLE PLAN ASSOCIATE + CHILD(REN)	KAISER $0 DEDUCTIBLE PLAN FAMILY
Annual Premium	$2,106	$5,382	$5,460	$8,762
Deductible	$0	$0	$0	$0
Coinsurance	0%	0%	0%	0%
OOP Max	$1,500	$3,000	$3,000	$3,000
HSA/HRA Credit	$0	$0	$0	$0
Total Annual Exposure	$3,606	$8,382	$8,460	$11,762

Health Savings Account (HSA)

If you enroll in the Anthem Blue HSA $4,000 medical plan, a Health Savings Account (HSA) with Bank of America will automatically be established. An HSA is a personal account funded by you and Diversified that allows you to set aside pre-tax dollars to pay for eligible health care expenses like deductibles, prescriptions, dental, and vision. Your HSA can also be used to pay for expenses for tax dependents, such as your legal spouse or children.

HSA ELIGIBILITY REMINDER

You are not eligible to contribute to an HSA if you:

- Are enrolled in Medicare
- Have other non-HDHP health coverage
- Can be claimed as a dependent on someone else's tax return
- Have use of a Health Care FSA (via your own or your spouse's employer)

HOW THE HSA WORKS

- **Eligibility:** You must be enrolled in the Anthem Blue HSA $4,000 medical plan and meet the other eligibility requirements.
- **Contributions:** Diversified will make a significant contribution to your HSA to help you offset the cost of care. You can also make pre-tax contributions to the account up to the IRS limits. Diversified will contribute to your account even if you choose not to make additional contributions.
- **Pay for Care:** You will receive a Bank of America HSA debit card to pay for care at the time of service. You may choose to use your debit card or pay for care out of your pocket.
- **You Own the Account:** You own your HSA. That means the funds roll over year to year, and they're yours to keep even if you change jobs or retire.
- **Grow Your Account:** You can use your funds now or allow the balance to build. Once your balance reaches $1,000, you can invest the funds. It's like a 401(k) for your health care. Note that invested funds cannot be used to pay for expenses until the investments are sold. For details on how to invest your funds, visit **healthaccounts.bankofamerica.com/en/setting-up-your-investments**.

Health Savings Account (HSA) Cont.

2026 HSA CONTRIBUTION LIMITS

COVERAGE TIER	2026 IRS CONTRIBUTION LIMIT (INCLUDES EMPLOYER)	DIVERSIFIED ANNUAL CONTRIBUTION*	YOUR CONTRIBUTION LIMIT
Associate Only	$4,400	$625	$3,775
Associate + Spouse	$8,750	$750	$8,000
Associate + Child(ren)	$8,750	$750	$8,000
Family	$8,750	$1,000	$7,750
Catch-Up (Age 55+)	$1,000	—	$1,000

*Diversified's contributions are made on a per-paycheck basis. Amounts are prorated based on your HDHP enrollment date.

TRIPLE TAX ADVANTAGE

Your HSA offers triple tax savings, allowing you to save on taxes in three ways:

- **Pre-tax contributions:** The money you contribute to your HSA lowers your federal taxable income.*
- **Tax-free growth:** The balance in your HSA earns interest, and the investment earnings are tax-free, too.**
- **Tax-free withdrawals:** The HSA money you use to pay for eligible expenses is withdrawn tax-free.

*HSA contributions are taxed by California and New Jersey.
** HSA earnings are taxed by New Hampshire and Tennessee. Withdrawals for non-eligible expenses are subject to a tax penalty.

Greater Savings for You in 2026!
In addition to the annual company HSA contribution, Diversified will provide a $300 HSA contribution to any associate who moves from either Anthem PPO plan (the $750 or $1,750 plan) or a Kaiser HMO plan to the Anthem Blue HSA $4,000 Plan for 2026. **That's a $925 to $1,300 HSA contribution (in 2026 only), depending on your coverage tier!**

Health Reimbursement Account (HRA)

If you enroll in the Anthem Blue HRA $5,500 medical plan, a Health Reimbursement Account (HRA) with Bank of America will automatically be established. Diversified funds your HRA and you can use the money in your account to pay for qualified health care expenses for you and your eligible dependents.

HOW THE HRA WORKS

- **Eligibility** – You must be enrolled in the Anthem Blue HRA $5,500 Plan.
- **Contributions** – An HRA is an employer-funded account. Diversified establishes your HRA and contributes a set dollar amount to it each year. Unlike an HSA, you cannot make contributions to your HRA; only Diversified can contribute funds to your HRA.
- **Pay for Care** – You will receive a Bank of America HRA debit card to pay for care at the time of service. You may choose to use your debit card or pay for care out of your pocket and submit claims for reimbursement.
- **Unused Funds** – You will have access to these funds as long as you remain employed at Diversified and are enrolled in the HRA plan. Any unused funds will roll over from year to year.

2026 HRA CONTRIBUTIONS

COVERAGE TIER	DIVERSIFIED ANNUAL CONTRIBUTION
Associate Only	$625
Associate + Spouse	$750
Associate + Child(ren)	$750
Family	$1,000

TAX ADVANTAGES OF AN HRA

- **Tax-Free Withdrawals:** You don't have to pay federal or state income tax on the money you receive from your HRA for eligible health care expenses.
- **No Gross Income:** Employer contributions to your HRA are not considered part of your taxable gross income.

Greater Savings for You in 2026! In addition to the annual company HRA contribution, Diversified will provide a $300 HRA contribution to any associate who moves from either Anthem PPO plan (the $750 or $1,750 plan) or a Kaiser HMO plan to the Anthem Blue HRA $5,500 plan in 2026. **That's a $925 to $1,300 HRA contribution (in 2026 only), depending on your coverage tier!**

Flexible Spending Accounts

Through Flexible Spending Accounts (FSAs), you are able to set aside pre-tax money to pay for eligible out-of-pocket costs for dependent care and health care expenses. Once you determine your annual FSA contribution amount, it will be deducted from your paycheck in equal amounts over the year.

HEALTH CARE FSA (COMPATIBLE WITH THE ANTHEM BLUE $1,000, ANTHEM BLUE $2,000, ANTHEM BLUE HRA $5,500 PLANS AND KAISER PLANS)

- Contribute up to $3,400 per year pre-tax to cover eligible expenses such as copays, prescriptions, lab exams and more.
- You will receive a debit card to pay for eligible expenses. Be sure to keep your receipts to substantiate your claims!
- You cannot contribute to a Health Care FSA if you contribute to an HSA.
- If you do not spend all the money in your FSA by March 31, a maximum of $680 will roll over. Per IRS regulations, the remaining unused dollars will be forfeited.at the beginning of the year.

DEPENDENT CARE FSA (CHILD CARE):

- Contribute up to $7,500 per year, pre-tax (or $3,750 if married and filing separate tax returns) to pay for care expenses that are necessary for you or your spouse to work and/or attend school full time.
- Eligible expenses for children up to age 13 include daycare, after school programs, nanny services, and more.
- Funds are only available to spend once they have been contributed from your paycheck; they are not front loaded.
- If you do not spend all the money in this FSA, per IRS regulations, unused dollars will be forfeited. There is no roll over of funds on the Dependent Care FSA.

LIMITED PURPOSE FSA (COMPATIBLE WITH THE ANTHEM BLUE HSA $4,000 PLAN)

- Contribute up to $3,400 per year pre-tax, to cover eligible dental and vision expenses.
- You will receive a debit card to pay for eligible expenses. Be sure to keep your receipts to substantiate your claims!
- If you do not spend all the money in this FSA by March 31, a maximum of $680 will roll over. Per IRS regulations, the remaining unused dollars will be forfeited.

BANK OF AMERICA

Commuter Spending Accounts

A Commuter Benefit Plan is an employer-sponsored plan that offers a tax break to associates and allows associates to pay for qualified transportation expenses related to commuting to and from work.

Through a Commuter Reimbursement Account (CRA), you are able to set aside pre-tax money to pay for eligible transportation and parking costs. Once you determine your annual CRA contribution amount, it will be deducted from your paycheck in equal amounts over the year.

FEATURES OF COMMUTER REIMBURSEMENT ACCOUNTS:

- Contributions are made on a pre-tax basis and reimbursements are not subject to Federal income tax, Social Security tax, and most state and local taxes; therefore, providing associates with tax-free benefits.
- Associates can defer up to $340 per month for each account: parking and transportation.
- Eligible expenses include, but are not limited to: parking at or near work, parking at or near public transportation to get to work, public transportation and van pooling to and from work, mass transit passes, vouchers, van-pooling, and parking garages.

Important Rules

The government imposes restrictions on Commuter Spending Accounts to give you pre-tax advantages.

If you have a remaining balance, you may rollover the balance into next year's account. There is no limit on the amount that can be rolled over.

BANK OF AMERICA

Supplementing Your Medical Plan

Supplemental health insurance can help protect you from significant expenses not covered by your medical plan. In fact, based on your situation, you may be able to save money by adding a supplemental plan to a lower-cost medical plan. Be sure to consider your anticipated medical needs for the year along with the cost of the medical plans available to you.

Critical Illness

When a serious illness strikes, critical illness insurance can provide financial support to help you through a difficult time. It protects against the financial impact of certain illnesses, such as a heart attack or cancer. You receive a lump-sum benefit that you can use to cover out-of-pocket expenses for your treatment that are not covered by your medical plan.

You can also use the money to take care of your everyday living expenses like housekeeping services, special transportation services and day care. Benefits are paid in addition to your medical plan, and are payable regardless of any other insurance plans you may have. You will be able to elect coverage for yourself and your dependents during your enrollment period regardless of prior health history. Please refer to Selerix for rates and bi-weekly cost as they vary by age and coverage level selected.

Prudential

Accident

You can't always avoid accidents, but you can help protect yourself from accident-related costs that can strain your budget. Accident insurance supplements your medical plan by providing cash benefits in cases of accidental injuries. You can use this money to help pay for non-covered medical expenses, such as your deductible or coinsurance, or for ongoing living expenses, such as your mortgage or rent. Benefits are paid in addition to your medical plan, and are payable directly to you regardless of any other insurance plans you may have. You will be able to elect coverage for yourself and your dependents during your enrollment period regardless of prior health history.

PRUDENTIAL ACCIDENT BI-WEEKLY PAYROLL DEDUCTIONS (POST-TAX)

Associate	$1.98
Associate + Spouse	$2.84
Associate + Child(ren)	$3.02
Family	$4.27

Hospital Indemnity

A trip to the hospital can be stressful, and so can the bills. Even with a medical plan, you may still be responsible for deductibles, coinsurance, and other out-of-pocket costs. A Hospital Indemnity plan provides supplemental payments that you can use to cover expenses that your medical plan doesn't cover for hospital stays, ambulance service, surgery, and certain inpatient or outpatient treatment. Benefits are paid in addition to your medical plan, and are payable regardless of any other insurance plans you may have. You will be able to elect coverage for yourself and your dependents during your enrollment period regardless of prior health history.

PRUDENTIAL HOSPITAL INDEMNITY BI-WEEKLY PAYROLL DEDUCTIONS (POST-TAX)

Associate	$3.10
Associate + Spouse	$5.11
Associate + Child(ren)	$5.11
Family	$7.44

If you choose the Anthem Blue HSA $4,000 Plan or the Anthem Blue HRA $5,500 Plan, you will automatically be enrolled in Accident and Hospital Indemnity insurance, at the same tier level, at no additional cost.

Keep in Mind

Supplemental health plans are intended to enhance your medical plan. On their own, they don't provide the minimum level of medical coverage needed to meet the Affordable Care Act requirement to have medical insurance.

Your Dental Plan

This plan allows you the freedom to visit any dentist and reimburses you for treatment expenses. By using a Cigna network dentist, you have the benefit of reduced out-of-pocket expenses. You also have peace of mind that their providers go through an extensive credentialing process. In addition, network dentists will file the claim for you. Reimbursement will be based on Diversified's Schedule of Benefits. Benefits will be payable after your deductible and coinsurance are satisfied (if applicable).

IN-NETWORK DENTAL BENEFITS	BASIC WITH ORTHODONTIA**	ENHANCED WITH ORTHODONTIA**
Annual Maximum Benefit	$1,250	$1,500
Individual/Family Deductible (waived for preventive services)	$50/$150	$50/$150
Preventive Services	Plan pays 100%*	Plan pays 100%*
Basic Services	Plan pays 80%	Plan pays 100%
Major Services	Plan pays 50%	Plan pays 60%
Orthodontia Services	Plan pays 50%**	Play pays 50%**
Orthodontia Maximum Lifetime	$1,250**	$1,250**

* Deductible does not apply.
** Orthodontia coverage is only available for eligible children through age 25.

EXAMPLES OF PREVENTIVE SERVICES

- Routine examinations (two every 12 months)
- Routine cleaning (two every 12 months)
- Topical applications of fluoride (through age 15)
- Dental x-rays (frequency varies by type)
- Sealants (through age 15)

EXAMPLES OF BASIC SERVICES

- Fillings
- Simple extractions
- Surgical extractions
- Periodontal maintenance
- Scaling and root planing

EXAMPLES OF MAJOR SERVICES

- Implant services
- Bridges
- Dentures
- Crowns, onlays, inlays
- Root canal
- Periodontal surgery

CIGNA DENTAL BI-WEEKLY PAYROLL DEDUCTIONS (PRE-TAX)

	BASIC	ENHANCED
Associate	$7.62	$12.39
Associate + Spouse	$16.33	$26.07
Associate + Child(ren)	$19.25	$29.64
Family	$30.50	$46.46

To find an in-network dentist, visit **myCigna.com**.

cigna healthcare℠

Voluntary Vision Insurance

Having an annual eye exam is one of the best ways to make sure you're keeping your eyes healthy. Eye exams can help prevent and treat easily correctable vision problems that can cause permanent vision impairment. You can enroll in vision coverage to save money on eligible vision care expenses, such as eye exams, glasses, and contact lenses. Voluntary Vision coverage is provided through Sun Life and gives you access to vision specialists in the VSP network.

	IN-NETWORK VISION BENEFITS
Exam (eye health exam, dilation, prescription, and refraction for glasses)	$10 copay (once every calendar year)
Lenses* (single vision, lined bifocal, and lined trifocal)	$10 copay – applies to lenses and frames (once every calendar year)
Contact Lenses (in lieu of Frames and Lenses)	Up to $60 – 15% savings for Contact Fitting and Evaluation (once every calendar year)
Frames	$150 for the frame of your choice and 20% off the amount over your allowance $80 allowance at Costco
Contact Lenses Necessary (in lieu of Frames and Lenses)	$10 copay (once every calendar year)
Contact Lenses Elective (in lieu of Frames and Lenses)	Up to $150 (once every calendar year)

* Coverage for lenses includes standard polycarbonate (for children up to age 18) at no additional cost.

	SUN LIFE VOLUNTARY VISION BI-WEEKLY PAYROLL DEDUCTIONS (PRE-TAX)
Associate	$3.37
Associate + Spouse	$6.75
Associate + Child(ren)	$7.22
Family	$11.55

TO FIND A PARTICIPATING VISION SPECIALIST:

- Go to **vsp.com/eyedoctor**
- Enter your zip code
- Click "Search"

Sun Life

Basic Life and AD&D

Diversified automatically provides Basic Term Life insurance and Accidental Death and Dismemberment (AD&D) coverages equal to 1 times annual earnings with a maximum of $500,000 and a minimum of $50,000 at no cost to you. Anyone with coverage over $50,000 will have imputed income on their premium.

Basic Life and AD&D	1 times annual earnings – minimum $50,000; maximum $500,000
Age Reduction Schedule	Reduces to: 35% of the original amount at age 65 55% of the original amount at age 70 70% of the original amount at age 75 80% of the original amount at age 80

Select a Beneficiary

It's important to choose a beneficiary or beneficiaries to receive the policy's benefit payment in the event of the insured person's death. For 2026, you are required to designate your beneficiary/beneficiaries on the Enrollment Portal.

Prudential

Supplemental Term Life

Supplemental Term Life insurance provides associates the opportunity to purchase additional life insurance benefits beyond the Basic Life insurance benefits provided by Diversified.

SUPPLEMENTAL TERM LIFE INSURANCE BENEFITS

	ASSOCIATE	SPOUSE	CHILD(REN)
Benefit Amount	$10,000 increments	$5,000 increments	$1,000 increments
Benefit Minimum	$10,000	$5,000	$1,000
Benefit Maximum	The lesser of 5x your annual earnings or $500,000	50% of associate's benefit, up to $100,000	$10,000
Guaranteed Issue	$250,000	$50,000	$10,000

Associates are given an opportunity to enroll in Voluntary Life coverage for the first time or increase current Voluntary Life coverage during our Annual Enrollment.

EVIDENCE OF INSURABILITY (EOI) RULES

Evidence of Insurability (EOI) is documentation the insurance company needs to verify your health and risk level to determine if you qualify for coverage.

ASSOCIATE STATUS	EOI RULE FOR VOLUNTARY ASSOCIATE LIFE	EOI RULE FOR VOLUNTARY SPOUSE LIFE
This Year Only	Associates may add or increase coverage by any plan increment up to $250,000 (not to exceed the Guaranteed Issue limit), without EOI. Elected amounts in excess of the plan Guaranteed Issue limit are subject to EOI.	Associates may add or increase spouse coverage up to $50,000 without EOI. Elected amounts in excess of the plan Guaranteed Issue limit are subject to EOI.
New Hires	New hires may elect up to the Guaranteed Issue limit of $250,000 without EOI. Any amounts over the Guaranteed Issue limit require EOI.	New Hires may elect up to the Guaranteed Issue limit of $50,000 without EOI. Any amounts over the Guaranteed Issue limit require EOI.
Late Entrants (An applicant who applies for insurance after the initial eligibility period has expired)	All amounts if enrolling more than 31 days from when you are first eligible to enroll are subject to EOI.	All amounts are subject to EOI.

Note: Children are never subject to EOI.

The cost for Supplemental Term Life insurance varies by your age and the benefit amount you elect. You can obtain rates when you enroll online or call your Benefit Specialist at 866-549-8660.

Note: Associates must elect coverage for themselves in order to elect coverage for dependents. The Spouse Life amount and the Child Life amount may not exceed 50% of the associate's elected amount.

FOR MORE INFORMATION, GO TO

mybenefits.prudential.com
Control #72685
800-524-0542

Short-Term Disability

Short-Term Disability (STD) provides a weekly benefit to replace a portion of your income for up to 24 weeks due to illness or accident. This benefit is paid for by Diversified and is available to you at no cost.

STD SUMMARY OF BENEFITS	
Weekly Benefit Percentage	60% of basic weekly earnings
Maximum Weekly Benefit	$1,500
Weekly Benefits Begin On	8th day for injury; 8th day for sickness
Maximum Benefit Duration	25 weeks

Not applicable to associates in CA, NJ, or NY. State Mandated Benefits in CA, NJ, and NY will have a different date that benefits begin, and these payments offset Prudential STD payments.

If you live in a state that requires Diversified to offer STD benefits, your disability claim will be coordinated between Diversified and Prudential. This applies to associates in New York and New Jersey. Associates in California should contact the State of California directly for information on disability benefits and eligibility at **edd.ca.gov/disability**.

FOR MORE INFORMATION, GO TO

mybenefits.prudential.com
Control #72685
800-524-0542

BENEFITS

- **Maternity:** Coverage is included. The benefit is generally 6 weeks for natural birth and 8 weeks for complications or cesarean birth. Please note that the 6–8 weeks includes the 1-week elimination period. Therefore, you are considered disabled for 6–8 weeks but you only receive payment from STD benefits for 5–7 weeks after you meet the 1-week elimination period.
- **Other Income:** Benefits are reduced by income received from the employer's salary continuance or accumulated sick leave plan, Social Security, and any state cash sickness plan.

HOW YOUR SHORT-TERM DISABILITY BENEFITS WORK

1ST DAY UTILIZE PTO OR UNPAID TIME

↓

8TH DAY STD BENEFITS BEGIN

↓

180TH DAY LONG-TERM DISABILITY BEGINS, ASSUMING YOU REMAIN DISABLED

Prudential

Long-Term Disability

If you experience a disability, illness or injury that lasts longer than 180 days, Long-Term Disability (LTD) insurance can replace 60% of your base monthly income (up to a maximum monthly benefit of $10,000.) The benefit is completely paid for by Diversified and therefore your benefit will be taxed when received.

LTD SUMMARY OF BENEFITS	
Monthly Benefit Percentage	60% of basic monthly earnings
Maximum Monthly Benefit	$10,000
Monthly Benefits Begin On	180 days following an accidental injury or illness
Maximum Benefit Duration	Up to your normal retirement age under the Social Security Act.

HOW YOUR LONG-TERM DISABILITY BENEFITS WORK

SHORT-TERM DISABILITY COVERS UP TO THE FIRST 180 DAYS OF DISABILITY, AS LONG AS YOU REMAIN DISABLED

↓

IF YOU REMAIN DISABLED AFTER 180 DAYS, LONG-TERM DISABILITY WILL BEGIN

↓

YOUR LTD COVERAGE WILL CONTINUE PROVIDING A MONTHLY BENEFIT FOR AS LONG AS YOU REMAIN DISABLED, UP TO THE SOCIAL SECURITY NORMAL RETIREMENT AGE (NRA)*

*You must remain disabled in order for the Long-Term Disability benefit to go into effect.

Employee Assistance Program

The Employee Assistance Program, through TELUS Health, offers you and your family support for your physical, emotional and financial wellbeing.

Free confidential counseling: Up to 6 counseling sessions per issue, per person, per calendar year by highly trained clinicians. You can set up an appointment to speak with the counselor over the phone or schedule a face-to-face visit.

This program is available 24 hours a day, 7 days a week, 365 days a year for confidential counseling, referral, and follow-up services for topics such as:

Health

- Mental health
- Addictions
- Fitness
- Managing stress
- Nutrition
- Sleep
- Smoking cessation
- Alternative health

Family

- Parenting
- Couples
- Separation/divorce
- Older relatives
- Adoption
- Death/loss
- Child care
- Education

Life

- Retirement
- Midlife
- Student life
- Legal
- Relationships
- Disabilities
- Crisis
- Personal issues

Work

- Time management
- Career development
- Work relationships
- Work stress
- Managing people
- Shift work
- Coping with change
- Communication

Money

- Saving
- Investing
- Budgeting
- Managing debt
- Home buying
- Renting
- Estate planning
- Bankruptcy

24/7 SUPPORT, RESOURCES & INFORMATION

Call: 888-851-7032
Website: **One.TelusHealth.com**
Username: DiversifiedUS
Password: EAP

LiveHealth Online (For Anthem Plans)

SEE A DOCTOR WHENEVER, WHEREVER

When you're sick and need care quick, LiveHealth Online is a convenient way to start feeling better faster.

Using LiveHealth Online, you can have a private and secure video visit with a board-certified doctor on your smartphone, tablet, or computer with a webcam. This service is available 24/7 with no appointment needed. The doctor can assess your condition, provide a treatment plan, and even send a prescription to your pharmacy*, if needed.

SCHEDULE A VIDEO VISIT WITH A THERAPIST

If you are feeling anxious or having trouble coping on your own and need some support, you can have a video visit with a therapist using LiveHealth Online. Make an appointment in four days or less. Evening and weekend appointments are available. You can get help for anxiety, depression, grief, panic attacks, and more.

To get started, go to **livehealthonline.com** or download the free LiveHealth Online app to your mobile device.

For questions about how to use LiveHealth Online, you can call toll free at 888-LiveHealth (548-3432) or email **help@livehealthonline.com**.

LiveHealth Online Visits Can Save You Time and Money

On the Anthem Blue $1,000 Plan and Anthem Blue $2,000 Plan, there is no cost to you for primary and urgent care LiveHealth Online visits. For mental health visits, there will be a $30 copay.

You can still save money by using LiveHealth Online on the Anthem Blue HSA $4,000 Plan and Anthem Blue HRA $5,500 Plan because the cost for a LiveHealth Online primary or urgent care visit is $59, which is much less than a typical visit to see your doctor. The primary, urgent and mental health care provided by Live Health Online is subject to your deductible and then coinsurance.

LiveHealth® ONLINE

FURTHER INFORMATION

* Prescription services may not be available in all states. Psychologists or therapists using LiveHealth online cannot prescribe medications.

Online counseling is not appropriate for all kinds of problems. If you are in crisis or have suicidal thoughts, it's important that you seek help immediately. Please call 800-784-2433 (National Suicide Prevention Lifeline) or 911 and ask for help. If your issue is an emergency, call 911 or go to your nearest emergency room. LiveHealth Online does not offer emergency services.

Online Will Preparation

A will is the cornerstone of any estate plan and can protect your assets and loved ones. Through an easy-to-use website, associates and their spouses can create a will in about 20 minutes. It includes:

- Step-by-step guidance on a secure, password protected website
- Customization to an associate's unique situation, including married, divorced, children, state of residence, and more
- Glossary of legal definitions
- Naming of an executor to carry out your wishes
- Naming of a guardian to take care of minor children
- Ability to create a living will online for an additional fee
- Final arrangements planning at no additional cost

FOR MORE INFORMATION

Online: **estateguidance.com**
Web ID: GRS311

Travel Assistance

Travel Assistance is provided at no cost through International Medical Group (IMG), a partner of Prudential, and includes services such as:

EMERGENCY MEDICAL TRANSPORTATION

- Emergency Medical Evacuation Return of Travel Companion
- $25,000 emergency hospitalization guarantee of payment*
- Medical repatriation
- Return of dependent children
- Vehicle return services
- Visit of a family member or friend

*Only available when traveling outside your home country and the U.S. and can only be used in conjunction with an eligible medical evacuation.

MEDICAL ASSISTANCE

- Convalescence arrangements/emergency travel arrangements
- Outpatient and inpatient care
- Interpretation services
- Medical monitoring
- Medical and dental referrals
- Prescription transfer and shipping
- Telemedicine
- Replacement of medical devices

TRAVEL ASSISTANCE

- Emergency cash transfer
- Consulate and embassy location
- ID theft assistance
- Legal referrals
- Lost luggage and/or document assistance
- Pet housing and return
- Pre-trip informational services
- Urgent message relay

SECURITY ASSISTANCE

- Emergency political evacuation/repatriation
- Location intelligence app
- Natural disaster evacuation

CONTACT IMG

Toll-free from within the U.S.:
+1-855-847-2194

From anywhere in the world:
+1-317-927-6881

Use the IMG Mobile app for easy access:

1. Download the IMG Mobile app from the Apple Store or Google Play
2. Click on **Create an account**
3. Enter referral code: PRUDENTIALIMG1
4. Click on **Continue** to enter your new account credentials including username, password, and email

Legal and Identity Theft

The MetLaw Legal Plan offers you economical access to attorneys for common legal services such as:

- Estate planning documents, including wills and trusts
- Real estate matters
- Identity theft defense
- Financial matters, such as debt-collection defense
- Traffic offenses
- Document review
- Family law, including adoption and name change
- Advice and consultation on personal legal matters
- And more

METLAW BI-WEEKLY PAYROLL DEDUCTIONS (POST-TAX)	$9.35

One premium covers you, your spouse, and your dependents.

FOR MORE INFORMATION, GO TO

legalplans.com
Group #: 174185
Customer service: 800-821-6400

MetLife

Pet Insurance

You work hard to provide your family with everything they need. So, whether your family includes kids with two feet or kids with four paws, you know what responsibility looks like.

Nationwide offers two plans, plus the ability to customize coverage plans for individual pets and their specific care needs.

NATIONWIDE'S PET INSURANCE PLANS COVER:

- Accidents and injuries
- Common illnesses
- Serious illnesses
- Chronic illnesses
- Hereditary conditions
- Testing and diagnostics
- Procedures
- Holistic and alternative care
- And, more!

Coverage includes emergency care and specialists. No networks, no pre-approval, no problem.

My Pet Protection Choice helps you provide your pets with the best care possible and reduce the financial burden of veterinary costs. The plan allows you to customize coverage to fit your needs and budget. You can choose Accident and Illness; Accident, Illness and Wellness; or Customizable Coverage, which each have different annual deductibles, reimbursement levels, and annual maximums.

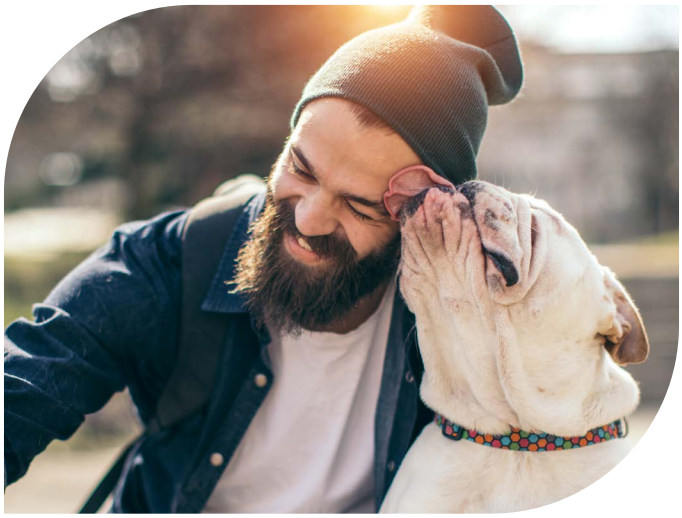
FOR MORE INFORMATION, GO TO

petinsurance.com/diversifiedus
Group #: 5350
Customer service: 877-738-7874

EASY TO USE, EASY TO UNDERSTAND

Using a Nationwide pet insurance plan is easy:

- Visit any vet, anywhere
- Submit a claim from any device
- Get reimbursed for eligible expenses once the deductible is met



Perks at Work – Coming in 2026!

Exclusive Savings
Employee Pricing: Access to more than 30,000 national and local employee discounts. There are over 20 different categories ranging from electronics, home appliances, food and groceries, car buying, travel, fitness, and more.

Free Online Classes
COA Community Online Academy: A free resource for live and on-demand classes for both adults and kids on topics from wellness to personal development.

Personal Development
HR Technologies: Resources that help you enhance your technology skills to achieve better performance.

Auto and Home Insurance

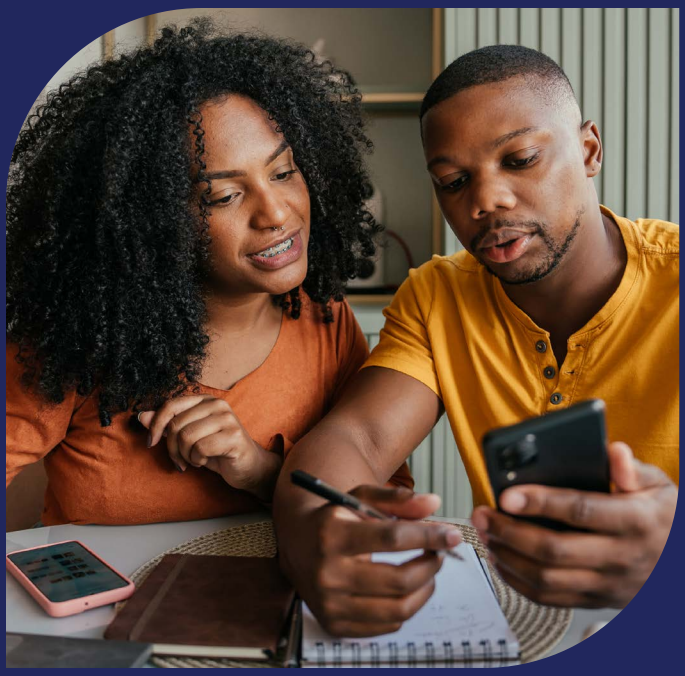
You are eligible for discounts on your home and auto insurance as an associate of Diversified. You are eligible right now. All you have to do is go online or call for a quote.

- You can switch at any time—no need to wait until your current policy expires.
- It only takes one quick and easy phone call to Farmers Auto & Home. Just mention you work for Diversified and you'll receive your personalized premium quotes.

This program offers Diversified associates money-saving discounts, including:

- A discount of up to 20% based on how long you've worked for Diversified
- A multi-vehicle discount
- A discount for having your premium payments deducted from your bank account*

* This benefit is not payroll deducted.



Call for your FREE associate quote from Farmers insurance

For more information, go to **myautohome.farmers.com**

Enter ONE DIVERSIFIED as your Employer online to access the discounted rates

Customer service: 855-628-2330

FARMERS® INSURANCE

diversified

2026 BENEFITS INFORMATION GUIDE

November 2025