



Annual Open Enrollment

2026 PLAN YEAR

FEBRUARY 9TH THROUGH FEBRUARY 20TH, 2026

Annual Enrollment Opportunity

Change your elections

- Change medical, dental , vision or other plan elections
- Add or drop dependents

One Year Commitments

- Unless you experience a “qualifying life event”
- Marriage, divorce, birth or adoption of a child, loss or gain of other group coverage, etc.
- You have 30 days from the day you experience a change to notify HR

Open Enrollment: Monday, February 10th through Friday, February 20th

Effective March 1, 2026

[IMPORTANT]: Enrollment & changes must be made in your UKG portal



Eligibility

Full-Time employees regularly working a minimum of 30 hours per week

- Initial eligibility, effective 1st of the month after 30 days of employment

Eligible Dependents of Full-Time employees

- Your Spouse / Domestic Partner
- Yours, your spouses or your domestic partner's children, including natural, stepchildren, adopted children, and those whom you are the legal guardian, up to age 26
- Disabled children of any age if you support them, and their disability began before the age of 26

Proof of Dependent Eligibility may be required.

- Proof of dependent eligibility may be requested at any time.

Snapshot of 2026 Changes

Medical

- BRMS – Our new Claims Administrator for our Adjoin Limitless Pathway Benefit Plan. No change to plan benefits or employee payroll deductions
- Ventegra RX – This will change to CarelonRx
- PHCS Professional Network – This will Change to ANTHEM, a member of the Blue Cross Blue Shield Association of Companies
- MediExcel – No change to plan benefits, still no payroll deductions

Dental

- No change to benefits or payroll deductions on the PPO plan, HMO is still free

Vision

- No change to benefits or payroll deductions

Life, Disability, EAP, Accident and Critical Illness

- No change to benefits or cost to employees
- Voluntary Critical Illness and Hospital Indemnity benefit options remain unchanged on benefits and cost.

IGOE FSA

- New higher IRS election and rollover limits.

Workplace Perks

- Costco, AAA and Amazon Prime reimbursements
- The Benefit Hub – discount site

MEDICAL PLANS

MEDIEXCEL

ADJOIN'S LIMITLESS PATHWAY
BENEFIT PLAN

MediExcel

MEDICAL	MediExcel VP-10 HMO
Plan Information	In
Deductible (Single/Family)	None
Out-of-Pocket Max (Single/Family)	\$4,500/\$9,000
Accumulation (Embedded/Aggregate)	Embedded
Professional Services	
Primary Care Visit & Outpatient Mental Health	\$10
Specialist Visit	\$15
Chiropractic/Acupuncture	Not covered
Telehealth	No charge
Preventive Care	No charge
Outpatient Services	
Outpatient Surgery	\$50
Diagnostic Testing	\$5
Imaging (CT/PET/MRIs)	\$30
Hospital Services	
Inpatient Hospitalization	\$50 per day
Emergency and Urgent Services	
Emergency Room Visit	15%; up to \$250 for outpatient
Urgent Care	\$20 Mexico; \$40 United States
Prescription Drugs	
Tier 1/Generic	\$10
Tier 2/Preferred Brand	\$15
Tier 3/Non-Preferred Brand	\$20
Tier 4/Specialty	25% up to \$250
Mail Order	No Mail Order

Offers health benefit coverage for those in San Diego and Imperial Counties, with services available in Mexico.

Covers emergency and urgent care services worldwide.

Visit MediExcel.com to find a doctor or log in to the member portal.

Offered with ***no payroll deductions.***



Adjoin Limitless Pathway Benefit Plan

MEDICAL

Adjoin Limitless Pathway Benefit Plan

BRMS / ANTHEM / CLAIMDOC



Plan Information	In
Deductible (Single/Family)	None
Out-of-Pocket Max (Single/Family)	\$3,000/\$6,000
Accumulation (Embedded/Aggregate)	Embedded
Professional Services	
Primary Care Visit & Outpatient Mental Health	\$5
Specialist Visit	\$30
Chiropractic/Acupuncture	\$10
Telehealth	No charge
Preventive Care	No charge
Outpatient Services	
Outpatient Surgery	\$250 (Center of Excellence: No charge)
Diagnostic Testing	No charge
Imaging (CT/PET/MRIs)	No charge
Hospital Services	
Inpatient Hospitalization	\$500 per admit
Emergency and Urgent Services	
Emergency Room Visit	\$100
Urgent Care	\$5
Prescription Drugs	
Tier 1/Generic	\$10
Tier 2/Preferred Brand	\$25
Tier 3/Non-Preferred Brand	\$45
Tier 4/Specialty	\$100
Mail Order	3x Retail Copay

Employee Cost (Per Paycheck)

2026 Plan Year

Employee Only	\$12.50
Employee + Spouse	\$80.00
Employee + Child(ren)	\$65.00
Employee + Family	\$140.00



Your New Open Access Professional Network



ANTHEM Doctors Only Network:

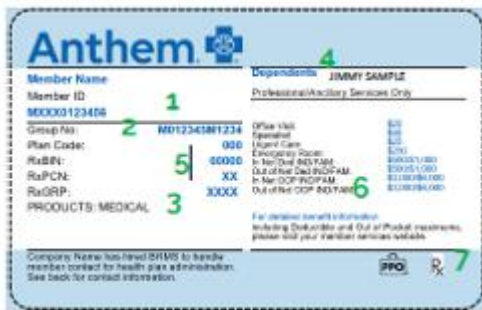
- More familiar with Plan
- Less Paperwork
- No Balance Billing

<https://www.anthem.com/ca/find-care/>



Network to Select:
Prudent Buyer
PPO/EPO

SEPARATE ID CARD FOR ANTHEM DOCTORS ONLY



Use Anthem for Professional Care, such as:

- Primary Care
- Specialists
- Urgent care centers
- Independent laboratories.
- Mental health providers
- Chiropractors
- Dermatologists
- Acupuncturists
- OBGYNs.



ClaimDOC

Our Plan offers members the opportunity to see any provider of your choice. They can do this by using Fair Market Pricing (FMP) in place of a network. FMP is a medical claim pricing program that is designed to eliminate the need for a medical network. Members are not restricted to using specific hospitals, doctors, or surgery centers. FMP does not have restrictions on the providers you choose to use.



Adjoin is partnering with ClaimDOC to assist you with reviewing and evaluating every claim to ensure your healthcare costs are paid at a fair and reasonable price. ClaimDOC provides claim review, member support and advocacy, and expert legal services. If you ever receive a bill that does not match the EOB from BRMS, contact BRMS and they will connect you to ClaimDOC for help. You may also contact ClaimDOC direct. One of their dedicated Member Service Advocates will work with you through the resolution of your billing issue.



New TPA - BRMS

Our medical plan will be administered through our new TPA, Benefit & Risk Management Services (BRMS) effective 3/1/26. Below is a brief description of the components that make up your medical management:

BRMS is the Third-Party Administrator (TPA) for the Adjoin Limitless Pathway Benefit Plan. BRMS provides the following for our employees:

- ✓ Customer service for ALL medical plan related questions
- ✓ Medical management administration
- ✓ MyHealthBenefits Portal
- ✓ Medical ID cards
- ✓ Explanation of Benefits (EOB) documentation
- ✓ Pre-certifications
- ✓ Case Management

New Group Number: 31337

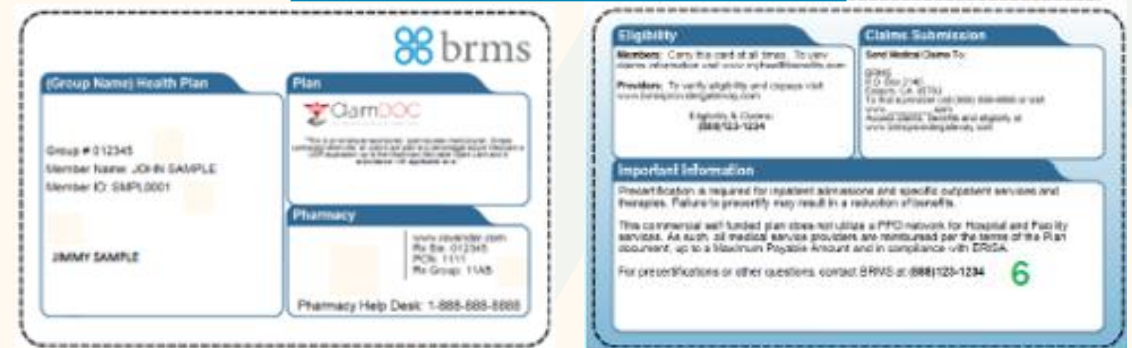
Customer Service: 888-780-6687

IMPORTANT:

- All claims incurred prior to 3/1/26 will be handled by Vitori and you must contact Vitori for any issues on these claims.
- All claims incurred on or after 3/1/26 will be handled by BRMS.

PLEASE ENSURE YOUR NEW ID CARDS ARE SHARED WITH ALL PROVIDERS FOR ALL SERVICES ON OR AFTER 3/1/26

Separate ID Card for Facility (Hospital)/Ambulatory Surgical Center Claims - ClaimDOC



BRMS Member Concierge Support

Call the Concierge for:

- Billing questions or balance bills
- EOB help or reconciliation
- How to find a provider with Anthem
- Questions on prior authorizations
- Benefits or eligibility questions
- Questions on the app / portal
- Claims status
- Pharmacy assistance



If you have any questions regarding your health plan benefits, you have a BRMS Concierge team ready to help!



If you have **any questions at all**, remember to ask for help. BRMS is available 7am to 6pm Pacific Time to assist at **(888) 780-6687**

BRMS Balance Bills



Benefit & Risk Management Services
PO BOX 2140
FOLSOM CA 95763-2140

Forwarding Service Requested

JUDY ADAMS
123 MAIN ST.
FOLSOM CA 95630

Explanation of Benefits

RETAIN FOR TAX PURPOSES
THIS IS NOT A BILL

Customer Service

Questions? Please call our Customer Support
Department
at 888-888-8888
7:00am - 6:00pm PT or visit us on the web
www.brmsclaims.com

Date: 1/31/2025
Group: (Employer)

Please Note

ADDITIONAL INFORMATION MAY PRINT ON BACK

Claim #:	12345678	Provider:	PROVIDER NAME							
Patient:	JUDY ADAMS	Reference:	00000123456789							
		Insured:	JUDY ADAMS							
Dates of Service	Procedure Code	Charge	Discount Amount	Not Allowed	Allowed	Deductible	Co-pay	Coinsurance	Paid	Comment
01/10-01/10/2025	96372	\$213.00	\$182.27	\$0.00	\$30.73	\$0.00	\$30.73	\$0.00	\$0.00	631
01/10-01/10/2025	99281	\$1,086.00	\$929.34	\$0.00	\$156.66	\$0.00	\$156.66	\$0.00	\$0.00	631
01/10-01/10/2025	90675	\$1,408.00	\$1,065.80	\$0.00	\$342.20	\$8.00	\$312.61	\$5.92	\$23.67	631
01/10-01/10/2025	90471	\$253.00	\$191.51	\$0.00	\$61.49	\$0.00	\$0.00	\$12.30	\$49.19	631
Column Totals		\$2,960.00	\$2,368.92	\$0.00	\$591.08	\$0.00	\$500.00	\$18.22	\$72.86	
Patient's Responsibility:		\$518.22		Other Credits or Adjustments		\$0.00		Total Net Payment		\$72.86



Payment Details

Paid To	Check Number	Check Date	Amount
PROVIDER NAME	27264	01/31/25	\$72.86

Comments

631 REDUCED TO HOSPITAL ALLOWABLE CLAIM LIMIT OF 120% OF DEPARTMENT-SPECIFIC COST-RATIO, AS REPORTED TO CMS.

Understanding Your Bill...

1. Do NOT pay the bill until you receive an EOB from BRMS
2. Compare your EOB to your provider bill
3. Verify the payment from insurance was applied and total amount due matches your **patient responsibility**
4. If the bill and EOB do not match, contact ClaimDOC, who will work directly with providers to resolve any discrepancies

ClaimDOC is Here to Help!

Member Portal: portal.claim-doc.com

Member Services: 888-330-7295 (7:00 am to 6:00 pm CST)

Email: balancebills@claim-doc.com



CarelonRX - Effective March 1, 2026

Adjoin will partner with Anthem's PBM, CarelonRx. This is a change for all members participating under the Adjoin Limitless Pathway Benefit Plan.

Members will have access to Carelon's National Direct Plus Formulary. Please note **certain medications may have Prior Authorization, Step Therapy or Quantity Limit restrictions.** Please work with your provider of care to contact Anthem to ensure your medications are approved, when needed, with limited disruption.

Anthem's PBM has a wide variety of the most common, well-known pharmacies nationwide. CVS/Walgreens/Walmart to name a few.



Customer Service **833-231-2460**

Anthem 

change

PLEASE ENSURE YOUR NEW ID CARD IS PROVIDED TO YOUR PHARMACY FOR ALL PRESCRIPTIONS ON OR AFTER 3/1/26

adjoin

Telehealth with Teladoc

Teladoc is your anytime, anywhere doctor's office.

Skip the trip to the waiting room. With Teladoc Health you can talk with a doctor within an hour by phone or app from wherever you are - **\$0 cost.**

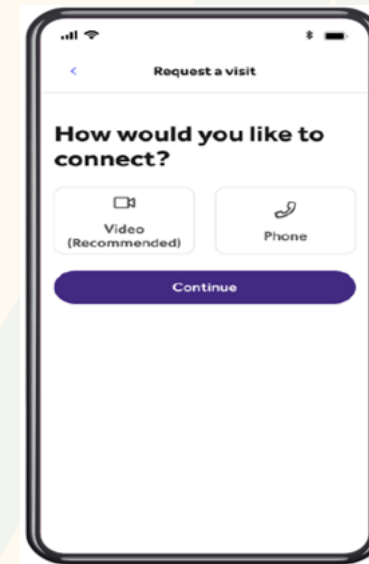
Know your care options:

- **General Medicine** – non-emergency conditions like the flu, allergies, infections, and much more. Teladoc doctors can also prescribe medicine if necessary.
- **Family doctor** – For annual exams and ongoing medical conditions needing regular monitoring.
- **Urgent Care / Emergency** – For severe conditions like chest pain, sprains, cuts, or burns.

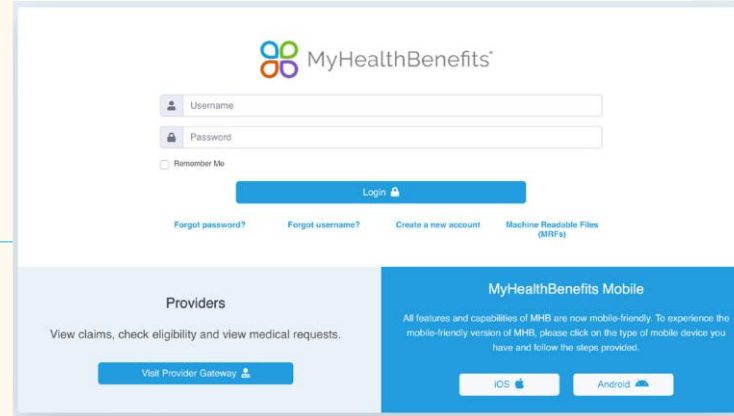
Special Note from BRMS: Teledoc will perform a member merge so your visit history will move over and you will not have to re-register. This could be slightly delayed due to the eligibility file after 3/1/26 if you experience your history is missing prior to the member merge being completed.



YOUR VIRTUAL CARE IS HERE.
JOIN FOR FREE TODAY!



BRMS Member Portal Access



MyHealthBenefits is mobile Friendly and can be accessed on your smartphone!

To experience the mobile Friendly version of their website, follow the steps below.

IOS

Go to www.myhealthbenefits.com via Safari or another mobile browser.

- Tap the Share icon (the square with an arrow pointing out of it) at the bottom of the screen.
- Scroll down the list of actions and tap “Add to Home Screen” (If you don’t see the action, scroll to the bottom and tap Edit Actions, then tap Add next to the Add to Home Screen action. After that, you’ll be able to select it from the Share Sheet).
- Type a name for the site link, such as “MyHealthBenefits Login”. This will be the title that appears beneath the site icon on your Home Screen.
- Tap “Add” in the top right corner of the screen which will then add our icon to your home screen.

Android

Go to www.myhealthbenefits.com via Chrome or another mobile browser.

- Tap the prompt “Add to Home Screen” at the bottom of the screen or tap on the ellipsis (3 dots) in the top right and choose “Install app”.
- Select the “Install” option and then our icon will be added on your home screen next to other apps.

Once the app is installed, simply tap on the BRMS icon to launch in “App Drawer”/recently visited/current apps running, just like other apps.

You can sign in into the app with the same username/password you use to log in on the website. Contact BRMS Customer Support for help 888-780-6687!

The Standard Dental Plan Options

Standard Dental			
STANDARD DENTAL HMO		STANDARD DENTAL PPO	
IN NETWORK		IN NETWORK	OUT OF NETWORK
GENERAL PLAN PROVISIONS			
Calendar Year Deductible (<i>Individual / Family</i>)	None	\$50 / \$150	\$50 / \$150
Calendar Year Maximum	Unlimited	\$1,500 per member	\$1,500 per member
PREVENTIVE CARE			
Cleanings, X-Rays, Exams	No Charge	No charge	No charge
BASIC SERVICES			
Fillings, Extractions, Periodontics	Flat copay. See fee schedule for pricing	No charge after deductible	20% after deductible
MAJOR SERVICES			
Crowns, Bridges & Dentures	Flat copay. See fee schedule for pricing	40% after deductible	50% after deductible
ORTHODONTIA			
Appliances and Services	Flat copay. See fee schedule for pricing		50%
Lifetime Maximum	N/A		\$1,500
Age Limitation	N/A		Child Only

Dental Plan Premiums

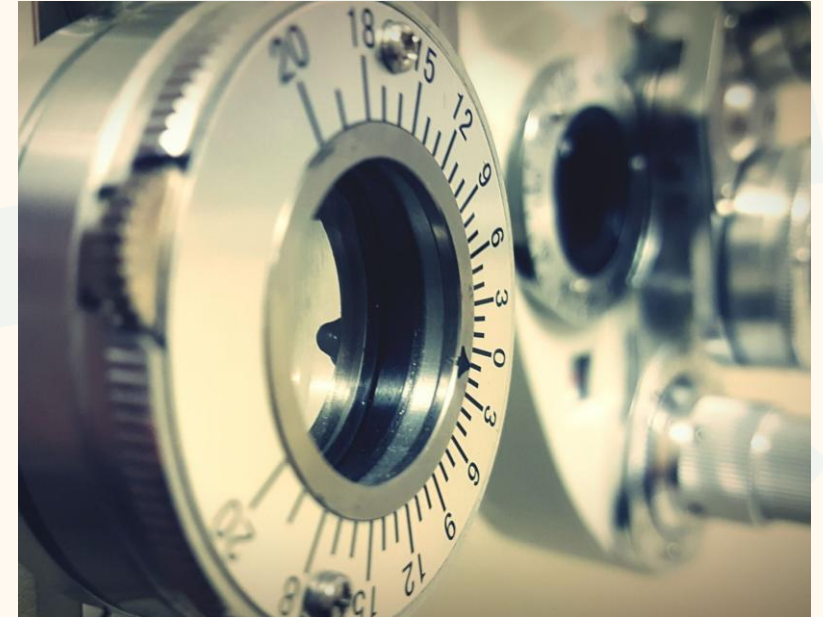


Standard Dental HMO	
TIER	EMPLOYEE COST (Per Paycheck)
Employee Only	\$0
Employee + Spouse	\$0
Employee + Child(ren)	\$0
Employee + Family	\$0

Standard Dental PPO	
TIER	EMPLOYEE COST (Per Paycheck)
Employee Only	\$2.92
Employee + Spouse	\$9.69
Employee + Child(ren)	\$12.03
Employee + Family	\$18.80

Vision Plan – The Standard

Standard VSP Choice Vision PPO		
GENERAL PLAN PROVISIONS	MEMBER RESPONSIBILITY	
	IN NETWORK	OUT OF NETWORK
COPAY		
Eye Exam	\$20	\$20
MATERIALS		
Single Vision	No charge after copay	Amount above \$30
Bifocal	No charge after copay	Amount above \$50
Trifocal	No charge after copay	Amount above \$65
Frames	Amount above \$180	Amount above \$70
CONTACT LENSES		
Medically Necessary	No charge	Amount above \$210
Elective	Amount above \$180	Amount above \$145
FREQUENCY		
Exam, Lenses, Contact Lenses	Every 12 months	
Frames	Every 24 months	



➤ Look up vision providers at vsp.com and the VSP Choice network.



Vision Plan Premiums



Standard Vision	
TIER	EMPLOYEE COST (Per Paycheck)
Employee Only	\$0.50
Employee + 1	\$1.22
Employee + 2 or More	\$2.42

Flexible Spending Accounts (FSA)

FSA – Healthcare offered through iGOE

Pre-tax benefit account to pay for healthcare expenses, funded by you, loaded on a debit card.

- “Use it or Lose it” risk
 - Only expenses in the designated plan year can be reimbursed
 - You have 2.5 months after the plan year ends (until May 15th) to submit for reimbursement for qualified expenses
 - If you leave the company, you forfeit any unused contributions
- The 2026 annual IRS maximum is \$3,400
- You can only change your contribution amount into the FSA during Annual Enrollment, unless you have a qualifying life event
- The 2026 allowed carryover limit into 2027 is \$680



FSA - Dependent Care offered through iGOE

- Pre-tax benefit account to pay for day care expenses for your dependent children or parents
- The 2026 annual maximum allowed is \$7,500 (single and married filing jointly); If you are married filing separate tax returns, each spouse may contribute \$3,750

www.goigoe.com



Employer Paid Life Insurance – The Standard

GROUP LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)

- Adjoin provides Basic Life and AD&D coverage to all active, full-time employees, regularly working a minimum of 30 hours per week
- No cost to you!

LIFE BENEFIT:

- Employee - \$25,000
- Spouse - \$5,000
- Child - \$1,000

AD&D BENEFIT: \$25,000

Remember to designate and/or update your beneficiaries in UKG.



Voluntary Life Insurance – The Standard

EMPLOYEE PAID LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)

- Employee paid benefit provided through The Standard
- Rates are age banded. Check UKG for rates and payroll deductions.
- If you are a new hire, any amount above the Guarantee Issue (GI) amount is subject to medical underwriting for approval. If you currently do not have Voluntary Life, any election during the Annual Enrollment for 2026 will require medical underwriting again (EOI) for first dollar coverage. If you currently have Voluntary Life, any increase above your current benefit will be subject to EOI.
 - Employee: Up to \$500,000 (GI \$100,000)
 - Spouse: Up to \$500,000 (GI \$25,000) – not to exceed 100% of employee election
 - Child: Up to \$10,000 (GI Full Benefit)

Remember to designate and/or update your beneficiaries!

Voluntary Long-Term Disability (LTD) – The Standard

Voluntary Long-Term Disability (LTD) through The Standard is an Employee paid benefit option.

EOI will be subject if you elect during an Annual Enrollment Period and you are not a new hire.

The Standard Voluntary LTD Insurance

BENEFITS

LTD Benefit Amount	66.67% of your monthly covered earnings
Maximum Benefit	\$7,000 per month
Benefit Waiting Period	90 days

Voluntary Accident – The Standard

The Standard Voluntary Accident Insurance



BENEFITS PAID

Surgical Leg Fracture	\$2,000 - \$4,000 depending on fracture or type of repair
Coma Benefit	\$7,500
Ambulance Benefit	Ground: \$300, Air: \$800
Emergency Care Benefit	\$150
Hospital Admission Benefit	\$1,000
Accidental Death	\$50,000 for employee, \$25,000 for spouse, \$12,500 for child



RATES (per month)

Employee	\$6.68
Employee & Spouse	\$10.62
Employee & Child(ren)	\$12.62
Employee & Family	\$19.82

Critical Illness Insurance – The Standard



- **Critical illness insurance provides coverage for specific** critical illnesses and helps pay for expenses not reimbursed by other types of insurance.
- **It is not a replacement for traditional medical or disability income insurance** – rather it is a supplement to these other coverages.

The Standard Critical Illness Insurance

Provides a **lump-sum payment** upon a verified diagnosis

Is **not reimbursement-based**, so covered individuals only need to submit proof of a verified diagnosis

Allows covered individuals to use the lump-sum payments **the way they see fit**

Hospital Indemnity Insurance – The Standard

- **Hospital Indemnity insurance** helps families cope with the financial impacts of a hospitalization



The Standard Hospital Indemnity Insurance

You can receive benefits when you're admitted to the hospital for a covered **accident, illness, or childbirth**

The money is paid directly to you – not to a hospital or care provider

The money can also help you pay the out-of-pocket expenses your medical plan may not cover, such as **coinsurance, co-pays and deductibles**

Hospital confinement: \$150/day (up to 15 days)
Hospital Admission: \$500/calendar year
Critical care benefits included as well

Monthly Rates

Employee: \$11.09

Employee + Spouse: \$18.99

Employee + Child(ren): \$16.10

Employee + Family: \$28.35



Employee Assistance Program (EAP)

The Standard EAP provides confidential counseling and resources via phone, in-person or online chat for a variety of personal and work issues. This program is free, and includes up to 3 face-to-face, phone or video consultations with licensed counselors for you and your eligible dependents, per issue, per calendar year.

You can call (888) 293-6948 to speak with a counselor or schedule an appointment, 24/7/365.

- ✓ Stress, anxiety and depression
- ✓ Substance dependency/addiction
- ✓ Childcare, camps and after-school care
- ✓ Will Preparation
- ✓ Special needs services
- ✓ Identity theft resources
- ✓ Retirement planning
- ✓ Staying healthy

Help is easy to access:

Phone support: (888) 293-6948

Online Support:

healthadvocate.com/standard3

In-person: You can get up to three visits, available at no additional cost to you with a Licensed Professional Counselor. Your counselor may refer you to resources in your community for ongoing support.

- Savings on veterinary pet care
- Up to 40% off prescriptions
- Instant 25% savings on in-house medical services at participating veterinarians
- 24/7 access to real-time support from veterinarians
- ID tag and lost pet recovery service
- Visit petbenefits.com/land/adjoin

RATES (per month)

One Pet: \$11.75

2+ Pets: \$18.50



- 1,500+ vet network; Including mobile vet through BetterVet in greater cities, such as San Diego
- Pre-negotiated rates for members
- Savings 20-50% on every in-network primary care visit
- Members show their UPC card to the vet and savings are instantly applied at checkout.
- Prescription discounts and 24/7 pet telehealth is included.
- **New for 2026!**
 - New Fido Vet Spending Card, powered by medZERO:



- \$500 to cover veterinary expenses
- 0% interest if paid within 12 months and no fees
- No credit card
- Can be used at any vet in the U.S. even outside UPC's network

RATES (per month)

One Pet: \$17.50

Additional Pets +\$16.50 (per pet)



Perks From Work

Pick Your Perk!

Adjoin employees employed for at least 60 days may be reimbursed annually up to \$100 for any combination of the following:

- Costco Membership
- AAA Membership
- Amazon Prime Membership

403(b) Plan – Empower

New Hires are automatically enrolled into a 403(b) retirement plan starting at a 3% contribution. If no action is made, the contribution will continue increasing by 1% each year until it reaches 6%. Adjoin provides a company match which is 50% of your own contribution with a cap at 8% of gross wages. Employees start receiving the company match after 60 days of working with Adjoin.

To enroll or adjust contribution amounts or waive enrollment entirely, log on to empowermyretirement.com.





How to Enroll

How to Enroll: UKG

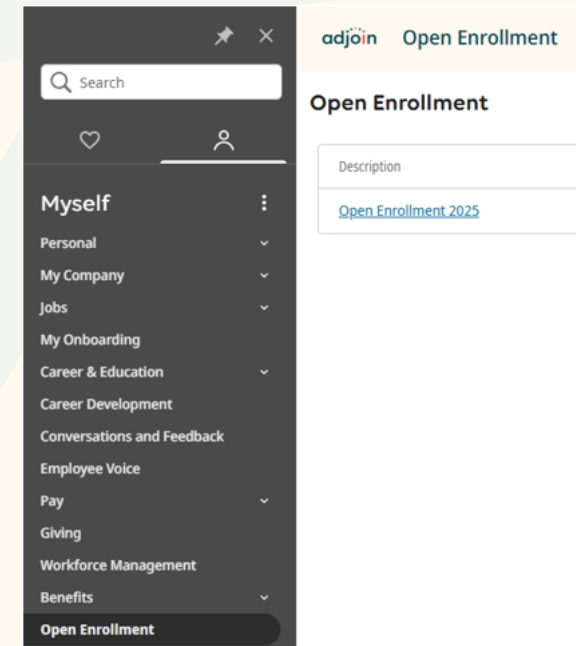
All enrollment elections and changes must be completed online through UKG:

Step 1. Go to adjoin.ukg.net

Step 2. Click **Sign In** or ask HR for login assistance

To access Open Enrollment:

- ✓ On the left-hand side, Navigate to “Myself”, then click “Open Enrollment”
- ✓ Review detailed information about the available benefit plan options & complete





BENEFIT ADVOCACY TEAM (BAT)

<p>MEDICAL</p> <p>Claims, Order ID Cards, Find a Provider</p>	<p>VISION</p> <p>Find Doctors, Questions About Coverage</p>	<p>PHARMACY</p> <p>Learn More About Benefits, Resolve Issues</p>	<p>DENTAL</p> <p>Resolve Claims Disputes, Find Providers</p>
--	--	---	---

Monday – Friday*, 8:00am – 5:30pm PST



Need assistance with resolving a benefits related issue?

Have questions regarding what is covered or where to be seen?

Contact the Benefit Advocacy Team and get the one-on-one support you need.

Call Toll Free | 833.4.SolvIt (833.476.5848)

Text | 833.476.5848

Chat Online | www.solvins.com

Email | BAT@solvins.com

License Number: 0K72752

Solv Benefits Advocacy Team (BAT)

Please use Solv as your first primary point of contact for all benefits related issues!

We are here to help and get you to the right place!



Open Enrollment Review

Key Takeaways



- Enroll through UKG
 - Please make sure you complete your online enrollment by **Friday, February 20th**.
 - Remember to check your beneficiary(ies) and make sure they are up to date.
- Remember that the decisions you make now will remain in force until the next plan year (March 1, 2027) unless you experience a Qualifying Event
 - Qualifying Events include: Marriage, Divorce or Legal Separation, Death, Change in Employment Status, Birth, Loss of Dependent Status, etc.

Questions?

THANK YOU!