

ADVOCATEHEALTH

Totally  
*you*



# Your 2026 Benefits Guide

Use this interactive guide to review detailed information on your benefits.

**Want to share this guide with your spouse or partner?**

If you're viewing the guide on your mobile device, simply tap the share icon (which is usually at the bottom or top of your screen) to send it by text, email or another app.



# Welcome to the 2026 Benefits Annual Enrollment guide!

Your benefits are more than just coverage—they support your health, your family, your finances and your future. Whether you’re welcoming a new child, managing a health condition or planning ahead, your benefits are here for life’s meaningful moments.

For 2026, we didn’t just make updates—we listened. Your feedback helped shape a more unified experience with flexible options, easier access and new programs to support your well-being and help you be Totally You. From free virtual primary care and real-time mental health support to no-cost retirement planning, we’ve got you covered.

Health care costs continue to rise nationally and within our own plan. Despite that, **we continue to cover about 82% of your medical coverage costs, which is very market competitive.** Because when we say we put teammates first, we mean it. By working together as one strong enterprise, we can keep our plans strong and sustainable for everyone.

Take time to explore this guide and [totalrewards.org](https://totalrewards.org) so you can make confident choices for the year ahead.

— Nakesha Lopez, Chief People & Culture Officer

## What’s inside

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This year, it’s *Totally You*—your choices, your way—with new benefits shaped by your feedback.

**ANNUAL ENROLLMENT IS OCT. 15-31 AND ACTION IS REQUIRED!**



# What's changing for 2026

## We listened. Here's what's new!

We're making significant investments in your health and well-being for 2026. Here's a compelling look at what's new and changing—each benefit is designed to deliver more value, flexibility and support for you and your family. **And very importantly, our listening won't stop here.** We will continue to use teammate feedback to guide our future benefit decisions.



### MEDICAL

- Three new flexible plan options: **Essentials**, **Choice** and **Premier**—all administered by Meritain Health, an Aetna company
- All plans cover the same services
- More access and providers to choose from
- **Free virtual primary care** for you and your dependents
- Three salary bands for premiums



### PRESCRIPTION DRUG

- Some **co-pays and mail-order medication requirements are changing**



### DENTAL AND VISION

- New vendors and plan options to enhance your care experience
- Both dental and vision plans now offer a **base and enhanced option** to meet diverse needs



### WELL-BEING

- Re-investment into **programs that meet you and your family where you are**—with no mandatory activities
- **Expanded mental health** support through Headspace, with six visits per concern at no cost
- Improved **women's health support** through Progyny—including benefits for family planning, adoption, surrogacy and menopause



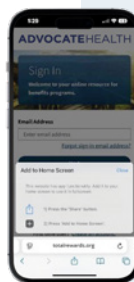
### SURCHARGES

- **Tobacco and spousal surcharge amounts** and rules are now consistent across the organization for those who enroll in medical benefits. You'll be able to certify whether the surcharges apply as you enroll

## What's staying the same—and still bringing value

While we're introducing exciting new benefits, many of the valuable offerings you rely on today are staying right where they are, like spending and savings accounts, life insurance and voluntary benefits. While most of these plans are not changing, there may be some new vendor partners to be aware of.

Visit [totalrewards.org](https://totalrewards.org), your personalized, redesigned benefits and well-being information hub. Find contact information, additional benefit details and more, all in one place! When you're ready to enroll in benefits, it's one click away.



### Did you know?



You can access all your benefits info and get support right from your phone. Just visit [totalrewards.org](https://totalrewards.org) and save it to your home screen for quick app access all year! Instructions to save the app are also available if you need help.





# Your enrollment checklist

**Annual Enrollment is here—and action is required! Use this checklist to keep track of your options, decisions and progress.** You must take action by Oct. 31 to make sure you and your family have the coverage you need for 2026. Your current elections for medical, dental and vision plans, as well as savings and spending account contributions, will not carry over to 2026.

- **Review this guide** to understand changes, review plan details and compare options, costs and more.
- **Visit [totalrewards.org](https://totalrewards.org)** to help you get ready:
  - Review the new **enrollment section** for benefit details
  - Watch the **Summer Learning Series**
  - Find **FAQs**, fast facts, support tools and more
  - Check out the **Virtual Benefits Fair** to get to know our new vendors
- **Pick your health care benefits**
  - **Medical:** Essentials, Choice or Premier (page 5)
  - **Dental:** Standard and Enhanced (page 13)
  - **Vision:** Base and Buy-up (page 14)
  - If enrolling in medical, complete the spousal coverage and tobacco usage self-reporting during your enrollment process
- **Choose your spending and savings accounts** (page 15)
  - Health Care Flexible Spending Account (FSA)
  - Health Savings Account (HSA)
  - Dependent Care FSA
  - Commuter Benefit
- **Supplement your coverage with lifestyle benefits** (page 18)
  - Accident Insurance
  - Critical Illness Insurance
  - Hospital Admission Insurance
- **Prepare for the unexpected** (page 19)
  - Life and Accidental Death & Dismemberment (AD&D) Insurance
  - Short-Term Disability
  - Long-Term Disability
  - Legal Insurance
  - Identity Theft Protection
  - Pet Insurance
- **Submit your enrollment by Oct. 31** (page 21)
  - Ready to enroll? Visit [totalrewards.org](https://totalrewards.org)
- **Take action on requests for additional information**
  - Submit documents to verify new dependents are eligible
  - Respond to Evidence of Insurability (EOI) requests for changes to your disability and life insurance coverage

Once enrolled, your coverage will become effective Jan. 1, 2026, and last through the end of the calendar year unless you experience a qualified life event or status change (learn more on page 21).

## Dependent re-verification coming soon!

In early 2026, we will conduct a re-verification of covered dependents to ensure we're in compliance with eligibility rules. **Documentation such as proof of marriage, tax forms and birth certificates will be requested.** Be sure to submit everything timely so coverage continues—stay tuned for more information.

## Have questions, need translation support or want to enroll by phone?

Contact the Benefits Service Center at **800-775-4784**, Monday through Friday, 8 a.m. to 7 p.m. ET/ 7 a.m. to 6 p.m. CT.



# Medical plans

We offer three competitive medical plans, administered by **Meritain Health**, an Aetna company, each offering value, flexibility and choice to meet your unique needs:

- Essentials
- Choice (High-Deductible Health Plan)
- Premier

No matter which plan you choose, you'll get coverage for the same services, \$0 virtual primary care, access to the same provider networks and prescription drug coverage. **None of the plans offer out-of-network coverage, except in urgent/emergency care situations.**

## How the plans work

Essentials	Choice	Premier
<ul style="list-style-type: none"><li>✓ Lowest cost per paycheck</li><li>✓ Predictable co-pays for most services with no deductible to meet before the plan shares the cost</li><li>✓ Moderate deductible that applies to labs, x-rays, inpatient and outpatient care</li></ul>	<ul style="list-style-type: none"><li>✓ Moderate cost per paycheck</li><li>✓ Higher out-of-pocket costs because you will pay the full cost for care for most services until you reach the deductible, then the plan shares costs through coinsurance until you reach your out-of-pocket maximum</li><li>✓ Access to a tax-advantaged Health Savings Account (HSA)</li></ul>	<ul style="list-style-type: none"><li>✓ Highest cost per paycheck</li><li>✓ Predictable co-pays for services</li><li>✓ No deductible to meet when you stay within the Tier 1 network</li><li>✓ More affordable access to the Tier 2 Aetna national provider network</li></ul>
Check out Essentials if you want a <b>low-cost option with easy-to-understand costs</b> and great care from Advocate Health providers.	Choice is great if you <b>don't use care extensively and want flexibility</b> <i>plus</i> a smart way to save for future care.	Premier plan is designed for teammates who want <b>predictability in costs for care and affordable access to the national network</b> . If you use health care more often—maybe for chronic conditions, ongoing care or just peace of mind—and are okay paying more per paycheck.



If you are a teammate whose dependent(s) live 40 miles or more away from an Advocate Health hospital, your dependent(s) will be enrolled in the same plan as you and have the ability to receive care from the Tier 2 Aetna national network at the Tier 1 benefit level.



### Did you know?

If you enroll in a medical plan, you and your dependents receive access to free virtual care through the Advocate Health Virtual Primary Care team. You can use virtual care for primary care, mental health support and prescription refills. For in-person needs (immunizations, bloodwork, physical exams, pap smears, etc.), your Virtual Primary Care clinician will coordinate care at a location convenient for you.





## Provider networks guide your care and costs

Networks really matter—they include the doctors, hospitals and clinics that we depend on for quality care and outcomes. All three plans use a two-tier, in-network system. You have the choice and flexibility to see providers within either network.

### Tier 1: Advocate Health Network

- Most cost-effective tier with the best value!
- Nearly 27,000 primary and specialty care providers
- Over 100 hospitals, ambulatory surgery centers, urgent care clinics
- 600+ additional mental health providers through Headspace, plus access to Aetna's entire mental health provider network as Tier 1

Find an in-network provider by visiting [findAHproviders.com](https://findAHproviders.com).

### Tier 2: Aetna Choice POS II Network

- Nationwide network through Aetna
- Includes providers/facilities outside the Advocate Health Network
- For out-of-area dependents enrolled in a medical plan, the Aetna network provides Tier 1 coverage

**Out-of-network coverage is only available in case of emergencies.**

### Tier 1 Network Notice

- The Tier 1 network includes all wholly owned entities, joint ventures (JVs), affiliates and both employed and aligned network providers.
- The network directory is updated in real time and will continue to be refreshed through the end of the year. If your provider is not currently listed, please check back later for updates.

- For specific inquiries, you may email [EPH-AHTeamMemberProviderVerification@aah.org](mailto:EPH-AHTeamMemberProviderVerification@aah.org). Be sure to include the following details:
  - Clinician's full name
  - Practice name
  - Practice address

Email inquiries will receive a response within 48 hours of receipt.



# Medical coverage and cost

Your cost for care depends on the medical plan you choose, where you go for care and the services you receive.

In-Network Medical Coverage	Essentials		Choice (HDHP with HSA)*		Premier	
	Tier 1	Tier 2	Tier 1	Tier 2	Tier 1	Tier 2
<b>Deductible</b> (Individual/Family)	\$750/\$1,500	\$4,000/\$8,000	\$1,800/\$3,600	\$2,500/\$5,000	\$0/\$0	\$1,500/\$3,000
<b>Annual Out-of-Pocket Maximum</b> (Individual/Family)	Tier 1: \$4,000/\$8,000   Tier 2: \$8,000/\$16,000					
<b>Coinsurance</b>	20%	50%	10%	30%	0%	30%
<b>Preventive care</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>Virtual primary care through Advocate Health team</b>	\$0	N/A	\$0	N/A	\$0	N/A
<b>Urgent care video visit through Advocate Health team</b>	\$0	N/A	\$0	N/A	\$0	N/A
<b>Primary care provider</b>	\$20 co-pay	50% AD	10% AD	30% AD	\$20 co-pay	30% AD
<b>Specialist provider</b>	\$60 co-pay	50% AD	10% AD	30% AD	\$60 co-pay	30% AD
<b>Behavioral health**</b>	\$20 co-pay	50% AD	10% AD	30% AD	\$20 co-pay	30% AD
<b>Chiropractic care</b> (20 visit limit per year)	\$60 co-pay	50% AD	10% AD	30% AD	\$60 co-pay	30% AD
<b>Physical, speech, occupational therapy</b> (60 visit limit per year, more if medically necessary)	\$20 co-pay	50% AD	10% AD	30% AD	\$20 co-pay	30% AD
<b>Lab and x-ray</b>	20% AD	50% AD	10% AD	30% AD	\$50 co-pay***	30% AD
<b>Urgent or immediate care</b>	\$75 co-pay	\$75 co-pay	10% AD	10% AD	\$75 co-pay	\$75 co-pay
<b>Emergency room</b>	\$450 co-pay	\$450 co-pay	10% AD	10% AD	\$300 co-pay	\$300 co-pay
<b>Outpatient surgery</b>	20% AD	50% AD	10% AD	30% AD	\$250 co-pay	30% AD
<b>Inpatient admission</b>	\$500 co-pay	50% AD	10% AD	30% AD	\$500 co-pay	30% AD

AD = after deductible

\*Deductible is aggregate (shared) across enrolled family members.

\*\*Outpatient and/or office visit (virtual or in person). Remember the Headspace EAP covers 6 sessions per concern first, no cost to you! See page 16.

\*\*\*Members will only pay one \$50 co-pay if receiving both an x-ray and labs in a single visit.

## Did you know?



You'll get the best value by choosing Tier 1 providers? Always check if your doctor is in-network before scheduling care to save money! Find an in-network provider by visiting [findAHproviders.com](https://findAHproviders.com).

## Learn more about Meritain Health!

Watch a [short video](#) to understand who they are, how their values guide their quality customer service and why we feel they are a great partner.







## Know the lingo!

- **Aggregate cost:** Applies to the Choice deductible; you and your covered family members must collectively meet the family deductible before the plan benefits apply for all of you
- **Co-pay:** A fixed dollar amount you pay to your medical provider at the time of service
- **Coinsurance:** After you meet the deductible, the percentage of the bill you pay
- **Coverage tier:** Who you cover (ex: teammate only, family)
- **Deductible:** A fixed dollar amount you pay before the plan begins to pay some portion of the bill
- **Embedded cost:** Applies to the Essentials and Premier plans and Choice out-of-pocket maximum; each covered member must meet the individual levels (i.e., deductible, out-of-pocket maximum) before the plan benefits apply for that member
- **Out-of-pocket maximum:** The maximum amount you will pay each year for covered services; combines what you've paid in co-pays, deductibles and coinsurance. When you reach the out-of-pocket maximum, Advocate Health will cover 100% of the cost of all remaining eligible expenses
- **Premium:** Amount you pay from each paycheck to have coverage
- **Provider network / Tier:** Network of contracted medical providers and facilities
  - Tier 1 = providers and facilities in the Advocate Health network
  - Tier 2 = providers and facilities in the Aetna Choice POS II national network





### Where you go for care matters.

Here are some key details to help you choose the option that will provide you with the right care at the right time and place. Remember: You can help manage the cost you pay by using the right type of provider. Together, we can help keep our plans affordable for everyone.

FREE* Advocate Health Virtual Primary Care	\$ Provider's office	\$\$ Urgent care clinic	\$\$\$ Hospital emergency room (ER)
<p>Talk to the Advocate Health Virtual Primary Care team from your phone or computer.</p> <p><i>* Note that care with a provider outside of this team will be charged as an office visit, even if you see them virtually.</i></p>	<p>Exams, screenings and non-urgent care; build a relationship with a doctor who knows your health history.</p>	<p>Urgent, but not serious or life-threatening; may be open evenings and weekends.</p> <p>Keep in mind: 24/7, no-cost urgent care video visits are also available for pediatric and family medicine needs through Advocate Health!</p>	<p>Serious or life-threatening emergency. Not meant to be a doctor's office alternative.</p>
Get care for...			
<p>Everyday health needs like cold, flu, allergies, anxiety, depression, prescription refills, skin rashes, minor infections, sleep issues, urinary tract infections</p>	<p>Annual physicals, vaccinations and screenings, diabetes management, high blood pressure, cholesterol checks, minor injuries, sprains, chronic condition follow-ups</p>	<p>Moderate burns or cuts that may need stitches, minor fractures, strep throat, ear infections, asthma attacks, pink eye</p>	<p>Chest pain or pressure, stroke symptoms (sudden numbness, confusion, trouble speaking), major burns, deep or large wounds, head injuries, broken bones with visible deformity, uncontrolled bleeding, anaphylaxis</p>

**! Remember, there is no out-of-network coverage, except in urgent/emergency care situations.**



## Medical premiums per pay period

Your premium cost depends on the plan you choose, who you cover, your full-time or part-time status, your salary and whether the tobacco or spousal surcharges apply.

Annual Salary	Coverage Tier	Essentials		Choice		Premier	
		You pay	Advocate Health pays	You pay	Advocate Health pays	You pay	Advocate Health pays
Full time (30+ hours/week)							
\$50,000 or less	Teammate Only	\$20	\$406	\$50	\$362	\$100	\$379
	Teammate + Child(ren)	\$67	\$743	\$123	\$660	\$221	\$689
	Teammate + Spouse/Partner	\$106	\$789	\$169	\$697	\$285	\$721
	Family	\$153	\$1,125	\$242	\$995	\$334	\$1,102
\$50,001 – \$125,000	Teammate Only	\$38	\$388	\$67	\$345	\$119	\$360
	Teammate + Child(ren)	\$101	\$709	\$155	\$628	\$255	\$655
	Teammate + Spouse/Partner	\$144	\$751	\$206	\$660	\$325	\$681
	Family	\$206	\$1,072	\$293	\$944	\$460	\$976
\$125,001+	Teammate Only	\$56	\$370	\$84	\$328	\$137	\$342
	Teammate + Child(ren)	\$134	\$676	\$186	\$597	\$290	\$620
	Teammate + Spouse/Partner	\$183	\$712	\$243	\$623	\$365	\$641
	Family	\$261	\$1,017	\$345	\$892	\$518	\$918
Part time (20 – 29 hours/week)							
All salaries	Teammate Only	\$102	\$324	\$128	\$284	\$185	\$294
	Teammate + Child(ren)	\$222	\$588	\$270	\$513	\$382	\$528
	Teammate + Spouse/Partner	\$285	\$610	\$340	\$526	\$471	\$535
	Family	\$405	\$873	\$482	\$755	\$668	\$768

Note the premiums Advocate Health pays have been rounded for simplicity.

Premiums are deducted on a pre-tax basis. If you cover a domestic partner, their portion of the premium is deducted post-tax.

## Surcharges

Two surcharges may apply and be deducted from your paycheck along with your premiums. As you enroll, you will certify whether the surcharges apply.

**Spousal surcharge – \$60 per pay period.** If your spouse/partner has medical coverage available through another source outside of Advocate Health and you choose to cover them on your medical plan, the surcharge will apply.

**Tobacco surcharge – \$50 per pay period.** If you enroll in a medical plan and use tobacco, you'll pay a \$50 surcharge per pay period. If you enroll your spouse/partner and they use tobacco, the \$50 surcharge per pay period will apply to them as well.

### Important:

If you participate in the tobacco cessation program—or another reasonable alternative that accommodates the recommendations of your provider—the surcharge will be waived, and you'll be reimbursed for any surcharges incurred during the plan year.

To find out more about the tobacco cessation program, or to work with the plan to come up with a different reasonable alternative that accommodates the recommendations of your doctor, you can contact Marquee Health beginning Jan. 1, 2026.

### Did you know?



Advocate Health picks up **about 82% of your medical plan costs**—a major investment in your well-being! You cover the rest through **pre-tax payroll deductions**, plus **deductibles, co-pays and coinsurance** when you receive care.



# Prescription drug coverage

All medical plans provide prescription drug coverage through **Optum Rx**.

What you pay for prescription drugs depends on the medical plan you choose, the type of medication and where it's filled. Prescription drug deductibles and out-of-pocket maximums are shared with your medical plan.

Type of Prescription	Essentials, Choice* and Premier	
	Advocate Health Pharmacy (30-day/90-day)	Optum Network Pharmacy (30-day supply only)
<b>Generic</b>	\$10 co-pay/\$25 co-pay	\$20 co-pay
<b>Preferred Brand</b>	\$35 co-pay/\$85 co-pay	\$70 co-pay
<b>Non-Preferred Brand</b>	\$80 co-pay/\$200 co-pay	\$125 co-pay
<b>Specialty – Generic</b>	\$65 co-pay	N/A
<b>Specialty – Preferred Brand</b>	\$85 co-pay	
<b>Specialty – Non-Preferred</b>	\$150 co-pay	

\*In the Choice plan, co-pays apply after the medical deductible is met, except for select preventive drugs, which are available at the generic co-pay.

## Prescription guidelines: What you need to know

- After your first fill, maintenance medications must be refilled through the Advocate Health mail-order pharmacy, based on your state
- Specialty drugs must be filled at Advocate Health specialty pharmacies (there may be exceptions for some limited distribution drugs)
- Choosing a brand-name drug when a generic is available means you'll pay the brand-name cost plus the difference in price

### Know the lingo!

- **Formulary:** List of prescription drugs, pharmacy care products and supplies chosen for their safety, cost and effectiveness. Medications are listed by categories or classes. It includes both brand and generic prescription medications
- **Generic drug:** A lower-cost alternative to a brand-name drug with the same active ingredients, strength and effectiveness
- **Maintenance medication:** A prescription drug taken regularly to manage chronic or long-term conditions such as high blood pressure, diabetes or asthma
- **Non-preferred brand:** Brand-name drugs not favored on the plan's formulary, often with generic or preferred alternatives available. They usually cost more
- **Preferred brand:** Brand-name drugs included on the plan's formulary for their value and effectiveness, typically with lower co-pays
- **Preventive drug:** Medications that help prevent illness or manage chronic conditions. May be covered at low or no cost
- **Specialty medication:** Used to treat complex or rare conditions and are typically higher-cost drugs, often requiring special handling or administration



If you use discounts, coupons or financial assistance to help pay for certain brand or specialty medications, those savings may not count towards your annual deductible or out-of-pocket maximum.





How to fill prescriptions

- **Short-term prescriptions (30 days):** Can be filled at Advocate Health pharmacies or any in-network retail pharmacy. You pay the co-pay shown in the table on page 11.
- **Maintenance medications (90 days):** Can be filled at an in-network retail pharmacy once, then through an Advocate Health mail order pharmacy based on the state in which you reside:

State of residence	Required mail order and specialty pharmacy for 2026
NC, SC, GA, AL	CarolinaCARE Wake Forest Baptist teammates and family members: You can continue to fill mail orders and specialty medications at your retail pharmacy.
AR	Optum Home Delivery
All other states	Advocate Aurora Mail Order Pharmacy

Did you know?



You can save money when you use Advocate Health pharmacies. Co-pays for medications are discounted, and maintenance medications may be filled at a lower cost for a 90-day supply.

Another way to save is by choosing generic drugs—talk with your doctor about using a generic equivalent whenever one is available.



Need help with your medications?

Use our **One-on-One Rx Program** to get expert advice. No enrollment required—just call **833-479-1270** to connect to our pharmacy team for personalized assistance with:

- Clinical questions
- Cost-saving opportunities
- Pharmacy benefit details
- Refills and more

Maximize your plan and avoid leaving savings behind—call today!

## Dental plans

You have two dental plan options offered by **Delta Dental**:

- The Standard plan
- The Enhanced plan

Both plans offer free preventive care and provide access to the Delta Dental provider network, which is one of the largest in the country. Check out the [Delta Dental Dentist finder](#) to find an in-network dentist near you (choose from the PPO or Premier network).

	Standard	Enhanced
<b>Deductible</b> (individual/family)	\$50/\$150	
<b>Preventive</b> (oral exams, x-rays)	\$0 out of pocket; cost counts toward annual maximum	\$0 out of pocket; cost <b>does not</b> count toward annual maximum
<b>Basic services</b> (fillings, extractions, etc.)	You pay 20% after deductible	
<b>Major services</b> (crowns, dentures, bridges, etc.)	You pay 50% after deductible	
<b>Orthodontia</b>	Not covered	You pay 50% after deductible, no age limit (\$2,000 lifetime maximum)
<b>Individual annual maximum</b>	\$1,500	\$2,000

## Dental bi-weekly premiums

Plan	Coverage Tier							
	Teammate Only		Teammate + Child(ren)		Teammate + Spouse/ Partner		Family	
	You pay	Advocate Health pays	You pay	Advocate Health pays	You pay	Advocate Health pays	You pay	Advocate Health pays
<b>Standard</b>	<b>\$10.24</b>	\$18.05	<b>\$22.52</b>	\$31.66	<b>\$20.48</b>	\$36.08	<b>\$32.76</b>	\$49.70
<b>Enhanced</b>	<b>\$14.48</b>	\$15.00	<b>\$31.87</b>	\$23.71	<b>\$28.97</b>	\$29.99	<b>\$46.35</b>	\$38.69

Premiums are deducted pre-tax.



## Vision plans

You can choose between two options offered by **EyeMed**:

- The Base plan
- The Buy-up plan

Both plans include free eye exams, an allowance for frames and lenses and discounts on glasses lenses. The EyeMed provider network includes major retailers as well as many neighborhood eye doctors—check out the [EyeMed provider finder](#) (choose the Select network) to locate an in-network eye doctor near you.

	Base	Buy-up
<b>Exams</b> (in-network)	\$0	
<b>Lenses</b> (standard)	\$10 co-pay	\$0
<b>Frames, lenses and contact lenses</b>	\$150/year allowance for frames \$150/year allowance for lenses*	\$375/year allowance**

\* Allowance applies to contact lenses OR glasses lenses. Teammates using the lens benefit for contacts will pay out-of-pocket for glasses lenses, but can purchase them at a discount.

\*\* Allowance applies to any combination of vision materials.

Get cost estimates up front with “Know Before You Go” on [eyemed.com](#). Plus, access these bonus perks:

- 40% off extra glasses
- 20% off non-covered items (even designer shades)
- Up to 66% off hearing aids with free batteries
- HealthyEyes wellness program

## Vision bi-weekly premiums

Plan	Coverage Tier			
	Teammate Only	Teammate + Child(ren)	Teammate + Spouse/ Partner	Family
<b>Base</b>	\$3.25	\$6.47	\$6.15	\$9.50
<b>Buy-up</b>	\$7.24	\$14.40	\$13.69	\$21.15

Premiums are deducted pre-tax.





# Savings/spending accounts

## Health Savings Account (HSA)

Set aside money on a pre-tax basis to pay for current or future qualified medical expenses. The HSA is administered by Bank of America and is only available if you enroll in the Choice medical plan.

### What to know about the HSA

- **Both you and Advocate Health can contribute:**

	Teammate only medical coverage	If you cover any dependents
Advocate Health contributes	If you earn \$50,000 or less: \$500 If you earn \$50,001 - \$125,000: \$250	If you earn \$50,000 or less: \$1,000 If you earn \$50,001 - \$125,000: \$500
Maximum total contribution allowed by IRS (including what you and Advocate Health contribute)	\$4,400 If you'll be 55+ in 2026: \$5,400	\$8,750 If you'll be 55+ in 2026: \$9,750
Reminder! Advocate Health contributions count toward the maximum.		

Teammates making \$125k+ are not eligible for the Advocate Health contribution.

- **It's your money:** The entire balance is yours. If you leave, it goes with you
- **You can invest the balance:** Once your account value reaches \$1,000, you can begin to invest the money in your HSA to help it grow over time
- **It decreases your taxes in three ways:** Money goes in, grows and comes out tax-free. Your payroll contributions are taken on a pre-tax basis, you don't pay federal taxes on any investment earnings, and you don't pay federal taxes on the money you use for qualified expenses

**Important!** If you have an HSA today through Bank of America, you must re-elect contributions during enrollment. If you take no action, your contributions will be reset to \$0 for 2026; however, you can change your contribution amount at any time if you are enrolled in the Choice plan.

## Flexible Spending Accounts (FSAs)

FSAs can help you save on eligible health care or dependent care expenses. You can make pre-tax contributions through payroll deductions and use the funds to pay or reimburse yourself. FSAs are "use it or lose it," meaning that you will forfeit any remaining balance at the end of the year.

### Here's how they work

	Health Care FSA (HCFSAs)	Limited Purpose FSA (LPFSA)	Dependent Care FSA (DCFSA)
Pays for...	Eligible out-of-pocket <b>health care expenses</b> (i.e., co-pays or prescription drug costs)	Eligible out-of-pocket <b>dental and vision</b> expenses	Eligible <b>dependent care expenses</b> like day care, after-school care or home care
You can contribute...	Up to \$3,300	Up to \$3,300	Up to \$7,500
Pairs well with...	Essentials or Premier plan	Choice plan	N/A

Note: You do not need to be enrolled in an Advocate Health medical plan to elect an HCFSAs or DCFSA.

#### Did you know?



You can use your **HSA** or your **HCFSAs** for eligible over-the-counter items like sunscreen, first aid kits, contact lens solution and menstrual products. Visit [totalrewards.org](https://totalrewards.org) to learn more about eligible expenses.

#### Did you know?



You also have access to **commuter benefits** that help save you money by allowing you to pay for transit and parking expenses with pre-tax dollars. You can enroll in the account at any time. Learn more on [totalrewards.org](https://totalrewards.org).



## NEW Mental health partner

Mental health is a key part of your well-being—and we're making it easier to get the care you need. In 2026, we're combining the personal touch of our local EAP teams with the powerful digital and clinical resources of **Headspace**, our new EAP partner. With Headspace, you'll have a single app that brings together coaching, therapy, mindfulness and sleep support.

Through Headspace, you can:

- Connect with licensed therapists or psychiatrists for one-on-one virtual support. Plus, **you'll have access to 6 EAP sessions per concern** each year for you and your household members at **no cost**
- Get mental health coaching through everyday challenges like managing anxiety, handling work stress or struggling with sleep—chat with a coach instantly or schedule a private session
- Improve your mindfulness through hundreds of guided exercises and expert-led courses
- Access a suite of work-life services to help with everyday challenges like finding child and elder care support, legal assistance, financial consultations, career guidance, help with housing and family needs and more

Headspace is available how and when you need it with 24/7 phone support from licensed mental health professionals. You can connect with a coach in under 2 minutes or schedule therapy with availability in less than 2 days. Plus, you have access to self-guided tools at any time.

### Meet Ebb!

Ebb is your in-app companion in Headspace, offering caring support in real time—during everyday challenges and between appointments. It helps you reflect, reset and build self-awareness by identifying patterns and recommending personalized content and exercises. Ebb also keeps you on track between therapy or coaching sessions, guiding you toward the right tools and next steps based on your unique needs.

### More information coming soon

Details on how to access Headspace and its services will be available closer to Jan. 1 launch.

Stay tuned for updates and tools to help you make the most of your mental health benefits.



## NEW Family health support

Starting in 2026, we are partnering with **Progyny** to enhance family health benefits with personalized, high-touch support for life's pivotal moments.

- Build your family your way with fertility, adoption and surrogacy support, including:
  - A new benefit that covers two “Smart Cycles” (inclusive of all individual services, tests and treatments) to give you comprehensive coverage through your full treatment plan
  - \$10,000 full time/\$5,000 part time benefit for adoption
  - \$25,000 full time/\$12,500 part time benefit for surrogacy
- Get expert guidance from a dedicated patient care advocate for every step, from preconception to postpartum and child development
- Access holistic care including baby planning, lactation and parenting support
- Connect with expert menopause providers and coaches, plus receive treatment and lifestyle tips for symptom relief, to help you thrive through midlife and beyond

### Fertility services

With Progyny, fertility treatments are bundled into “Smart Cycles.” For example, one IVF cycle equals one Smart Cycle. This approach ensures you won’t run out of coverage mid-treatment and gives you and your doctor the flexibility to choose the best care plan without worrying about cost-based limits.

Services are subject to the same deductible and coinsurance as other medical expenses. Progyny will work directly with Meritain Health on any fertility-related claims.

### More information coming soon

Details on how to access Progyny services—including support resources and call center contact information—will be shared closer to Jan 1. launch. Stay tuned for updates and tools to help you navigate your family health benefits with confidence.





# Additional benefits to protect you and your family

## ACCIDENT INSURANCE

Voya offers financial protection for expenses resulting from an unplanned covered accident. You can choose between a high or low plan. **See rates on page 20.**

- Provides a fixed cash benefit paid directly to you for injuries or treatments from a covered accident
- It helps with costs like rehab, transportation, household expenses or childcare—even if you're still working—and complements your medical and disability coverage. Use the money now, or save it for a rainy day

## CRITICAL ILLNESS INSURANCE

Voya offers financial protection from covered illnesses such as cancer, heart attack, stroke, and more! You can choose between a high or low plan. **See rates on page 20.**

- Provides a fixed cash benefit of up to \$15,000 or \$30,000 if you're diagnosed with a covered condition
- You can use the money for out-of-pocket costs like travel, rent, groceries or other everyday expenses

## HOSPITAL ADMISSION INSURANCE

Voya's coverage supplements your existing health insurance for hospital stays and even maternity stays. **See rates on page 20.**

- Provides cash benefits for hospital admissions and daily hospital stays
- You can choose between a high or low plan. Benefit amounts vary by plan and the covered stay
- This benefit helps cover expenses your health plan doesn't, including travel for treatment and household costs during recovery



## Changes and enhancements to voluntary benefits

As we align benefits across our organization, some teammates will see updates to their voluntary benefits based on location.

- **Greater Charlotte:** Life and disability coverage is staying the same but moving to New York Life as the vendor partner
- **NC and GA divisions:** Accident, Critical Illness and Hospital Admission Insurance will offer improved coverage and lower premiums through Voya. Legal Insurance through MetLife Legal will be significantly upgraded with a slight increase in cost
- **IL and WI divisions:** Legal Insurance through MetLife Legal will be enhanced with a slight reduction in cost

### **SUPPLEMENTAL LIFE INSURANCE**

Provides financial benefits if something were to happen to you. You can purchase additional coverage for yourself, your spouse or your eligible children.

### **SUPPLEMENTAL ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) INSURANCE**

Provides financial benefits to you and your beneficiaries in the event of accidental death, serious injury or dismemberment from an accident.

### **SHORT- AND LONG-TERM DISABILITY**

Provides a salary continuation benefit if you can't work for periods of time due to illness or injury.

### **ENHANCED LEGAL INSURANCE**

MetLife Legal provides confidential access to attorneys for personal legal matters such as wills, trusts, divorce, adoption, real estate and more

- Includes consultations, document drafting and review and court representation (excluding workplace issues)
- Helps manage legal costs with affordable coverage

### **IDENTITY THEFT PROTECTION**

Allstate Identity Protection helps safeguard your and your family's identity and devices

- Includes scam alerts, data removal, credit monitoring and personal device security
- Provides full remediation services in the event of identity theft

### **PET INSURANCE**

Nationwide offers affordable coverage for your pet's health

- Includes coverage for accidents and illnesses
- Allows you to use any veterinarian, including specialists and emergency providers

You can learn more about these other benefits—and view your personalized premiums—as you enroll.

### **Did you know?**



If you're increasing life insurance or enrolling in disability coverage, you may need to complete Evidence of Insurability (EOI)—a quick 2–3 step process during enrollment. Have Social Security numbers ready for yourself and anyone you're covering. You may be asked to confirm good health, and you'll be notified if your application is approved or if more info is needed.



## Accident Insurance bi-weekly rates

Plan	Teammate Only	Teammate + Child(ren)	Teammate + Spouse/ Partner	Family
<b>Low Plan</b>	\$1.69	\$3.33	\$2.79	\$4.43
<b>High Plan</b>	\$2.64	\$5.20	\$4.35	\$6.91

Premiums deducted post-tax.

## Critical Illness Insurance bi-weekly rates

Plan	Age	Teammate Only	Teammate + Child(ren)	Teammate + Spouse/Partner	Family
<b>Low Plan</b> Teammate: \$15,000 Spouse/Partner: \$15,000 Child(ren): \$7,500	Under 25	\$1.04	\$1.91	\$2.56	\$3.43
	25 - 29	\$1.25	\$2.11	\$2.98	\$3.84
	30 - 34	\$1.38	\$2.25	\$3.32	\$4.19
	35 - 39	\$2.01	\$2.88	\$4.43	\$5.30
	40 - 44	\$3.12	\$3.98	\$6.85	\$7.72
	45 - 49	\$4.71	\$5.58	\$11.08	\$11.94
	50 - 54	\$7.41	\$8.28	\$18.00	\$18.87
	55 - 59	\$10.94	\$11.81	\$27.42	\$28.28
	60 - 64	\$15.16	\$16.03	\$38.28	\$39.15
	65 - 69	\$20.63	\$21.50	\$51.02	\$51.89
	70 +	\$27.76	\$28.63	\$65.98	\$66.84
<b>High Plan</b> Teammate: \$30,000 Spouse/Partner: \$30,000 Child(ren): \$15,000	Under 25	\$2.08	\$3.81	\$5.12	\$6.85
	25 - 29	\$2.49	\$4.22	\$5.95	\$7.68
	30 - 34	\$2.77	\$4.50	\$6.65	\$8.38
	35 - 39	\$4.02	\$5.75	\$8.86	\$10.59
	40 - 44	\$6.23	\$7.96	\$13.71	\$15.44
	45 - 49	\$9.42	\$11.15	\$22.15	\$23.88
	50 - 54	\$14.82	\$16.55	\$36.00	\$37.73
	55 - 59	\$21.88	\$23.61	\$54.83	\$56.56
	60 - 64	\$30.32	\$32.05	\$76.57	\$78.30
	65 - 69	\$41.26	\$42.99	\$102.05	\$103.78
	70 +	\$55.52	\$57.25	\$131.95	\$133.68

Premiums deducted post-tax.

## Hospital Admission Insurance bi-weekly rates

Plan	Teammate Only	Teammate + Child(ren)	Teammate + Spouse/ Partner	Family
<b>Low Plan</b> Daily benefit: \$100	\$3.55	\$6.98	\$8.28	\$11.71
<b>High Plan</b> Daily benefit: \$200	\$7.10	\$13.97	\$16.56	\$23.42

Premiums deducted post-tax.





# Ready to enroll?

Remember, you must submit your enrollment between Oct. 15 through Oct. 31. When you're ready:

- Visit [totalrewards.org](https://totalrewards.org)
- Click on the enrollment tile on the home page
- Be sure to enter a home address for each dependent so they receive maximum plan benefits

Once enrolled, your coverage will become effective Jan. 1, 2026, and last through the end of the calendar year unless you experience a **qualified life event or status change**.

## What happens if you don't enroll?

- Teammates currently enrolled in a medical plan will be automatically enrolled in **the lowest cost plan** at your current coverage level (teammate-only, teammate + spouse, etc.).
  - Spousal/partner and tobacco surcharges **will apply** if you are defaulted into medical coverage.
- Teammates currently enrolled in dental and/or vision coverage will be automatically enrolled in the lower plan option (Standard Dental or Base Vision) at your current coverage level.
- Health Savings Account and Flexible Spending Account (Health Care, Dependent Care or Limited Purpose) elections from 2025 will not roll over to 2026. You must re-enroll and select contribution amounts each year.

### Qualified Life Events (QLEs) and Status Changes

A **QLE** is an event that happens outside of work that impacts your benefits. Examples include getting married, having a baby or losing other health coverage. If you experience a QLE, you must notify the Benefits Service Center or submit a QLE online within 31 days of the event (60 days for the birth or adoption of a child).

A **qualified status change** is an event that happens at work that impacts your benefits. Examples include changing status (moving from part-time to full-time), changing certain management levels, compensation changes or becoming benefits ineligible. If a qualified status change occurs that allows you to change/update your benefits, you will receive a notification from the Benefits Service Center with details and required actions.

**Note and new for 2026:** Even if your salary changes, your medical plan premium will be locked in for the year and not change.



### Get personalized enrollment support with Violet

When you enroll, Violet can guide you through the process with personalized support. It helps you understand your options and compare plans based on your needs, lifestyle and budget so you can make confident benefit decisions.

### Need help or translation support?

Contact the Benefits Service Center at **800-775-4784**, Monday through Friday, 8 a.m. to 7 p.m. ET/ 7 a.m. to 6 p.m. CT.



# Benefit support when you need it

## General benefit questions

The Benefits Service Center is available to answer benefits or enrollment questions. You may also contact the vendors directly at the numbers referenced below.



## Benefits and vendors

Benefit	Vendor	Website	Phone	App
Medical	Coming in Dec. — Meritain Health	<a href="https://meritain.com">meritain.com</a>	Coming soon	<a href="#">Apple App Store</a> <a href="#">Google Play Store</a>
Prescription drug	Optum Rx	<a href="https://optumrx.com">optumrx.com</a>	800-665-2356	<a href="#">Apple App Store</a> <a href="#">Google Play Store</a>
Prescription drug	Advocate Health Pharmacy	<a href="https://totalrewards.org">totalrewards.org</a>	833-479-1270	
Dental	Delta Dental	<a href="https://deltadentalinc.com">deltadentalinc.com</a>	866-327-0686	<a href="#">Apple App Store</a> <a href="#">Google Play Store</a>
Vision	EyeMed	<a href="https://eyemed.com">eyemed.com</a>	877-857-2413	<a href="#">Apple App Store</a> <a href="#">Google Play Store</a>
Saving and spending accounts	Bank of America	<a href="https://myhealth.bankofamerica.com">myhealth.bankofamerica.com</a>	866-731-4206	<a href="#">Apple App Store</a> <a href="#">Google Play Store</a>
Employee Assistance Program	Coming in Jan. 1, 2026 — Headspace			
Family health support	Coming in Jan. 1, 2026 — Progyny			
Accident, Critical Illness, Hospital Admission Insurance	Voya	<a href="https://presents.voya.com/EBRC/advocatehealth">presents.voya.com/EBRC/advocatehealth</a>	877-236-7564	
Legal Insurance	MetLife	<a href="https://legalplans.com">legalplans.com</a>	800-821-6400	<a href="#">Apple App Store</a> <a href="#">Google Play Store</a>
Identity Theft Protection	Allstate	<a href="https://myaip.com/aah">myaip.com/aah</a>	800-789-2720	<a href="#">Apple App Store</a> <a href="#">Google Play Store</a>

You can find additional vendor contact information on [totalrewards.org](https://totalrewards.org).

### Unlock your potential

### More learning. More growth. More opportunities. Coming soon!

Your goals matter, and now it will be easier than ever to reach them. Our new partnership with InStride for education assistance expands access to degrees, credentials and skill-building programs designed for your career goals. Your next step is within reach. Look for more information later this fall.

To review or receive a copy of your current annual notices, visit [totalrewards.org](https://totalrewards.org) or call the Benefits Service Center at 800-775-4784.

This document summarizes programs and benefits available to teammates and eligible dependents. Official Plan documents, policies and certificates of insurance that contain the details, conditions, maximum benefit levels and restrictions on benefits govern our benefit programs and will be available at [totalrewards.org](https://totalrewards.org). In case of a conflict between this document and the official Plan documents, the official Plan documents prevail.

