Benefits Guide

Plan Year: 2026

HOBART AND WILLIAM SMITH

CONSILIARIUM
trusted advisor

Pick the best benefits for you and your family.

HOBART AND WILLIAM SMITH

Hobart and William Smith strives to provide you and your family with a comprehensive and valuable benefits package. We want to make sure you're getting the most out of our benefits—that's why we've put together this 2026 Benefits Guide.

This guide will outline all of the various benefits Hobart and William Smith offer, so you can identify which coverages are best for you and your family.

The information within this document are guidelines only. This is not a contract, expressed or implied, guaranteeing any employment rights or obligations. Hobart and Willam Smith retains the right to supplement, modify, amend, or eliminate the policies and plans. Every effort has been made to make these descriptions as brief, accurate and easy to understand as possible. Therefore, all details may not be described here. If there is a difference between the information in this publication and the official plan documents, the official plan documents will govern.

If you have questions about any of the benefits mentioned in this guide, please don't hesitate to reach out to Human Resources at hr@hws.edu.

In addition, the Colleges are introducing our **Employee Benefits Advocate, Consiliarium Group.** Consiliarium provides a single point of contact for assistance understanding and navigating Hobart and William Smith's benefit plans including medical, prescription, dental, and flexible spending plans.

Consiliarium will help with locating providers, ordering replacement I.D. cards, estimating out-of-pocket costs and plan coverage, resolving provider billing and insurance claims, and help answer qualifying event questions during open enrollment and year-round support.

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CONSILIARIUM trusted advisor

Email: **info@consiliariumgroup.com**
Phone: 1-844-890-7955

Who Is Eligible?

If you meet the eligibility criteria under Hobart and William Smith's benefits, you are able to enroll in the benefits outlined in this guide, as well as your eligible dependents.

How to Enroll

Hobart and William Smith utilizes our benefits portal for enrollment, **Employee Navigator**. Employees will receive an email from Employee Navigator with login instructions where you will simply login, review, and finalize your 2026 benefit elections. First, verify all your personal information and make any necessary changes.

Once all your information is up to date, it's time to make your benefit elections.

When to Enroll

A newly hired employee must enroll in eligible benefit coverage within 30 days of the first day of work to receive coverage on the first of the month following the date of hire. If this deadline is missed the new employee must wait until the next benefits open enrollment period to enroll in health coverage. This 30-day requirement also applies to a change in family status.

How to Make Changes

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period. Qualifying events include things like:

- *Marriage, divorce or legal separation*
- *Birth or adoption of a child*
- *Change in child's dependent status*
- *Death of a spouse, child or other qualified dependent*
- *Change in residence*
- *Change in employment status or a change in coverage under another employer-sponsored plan*

HOBART AND WILLIAM SMITH

2026 Benefits at a Glance

Health Insurance

Hobart and William Smith offers employees the Excellus BlueCross BlueShield BluePPO Medical Plan with prescription drug coverage through TrueScripts. Together they form a comprehensive health plan that provides you and your family with flexibility when you need to make health care decisions.

Excellus BluePPO	
BENEFIT DESCRIPTION	IN-NETWORK MEMBER'S COST SHOWN BELOW ***(OUT-OF-NETWORK COVERAGE IS SUBJECT TO ADDITIONAL CHARGES)***
CALENDAR YEAR DEDUCTIBLE	Individual: $500, Family: $1,500 (embedded – each individual does not exceed the single deductible)
MEDICAL COINSURANCE	20%
MEDICAL AND PRESCRIPTION OUT-OF-POCKET MAX.	Medical: $3,500 Individual/$7,000 Family Pharmacy: $2,400 Individual/$4,800 Family (RX accumulates separately)
LIFETIME BENEFIT MAX.	Unlimited
PRIMARY PHYSICIAN'S OFFICE VISIT	$30 copay
SPECIALIST'S OFFICE VISIT	$50 copay
TELEMEDICINE (MDLIVE)	Acute Illness: $0 copay Behavioral Health: $0 copay
DIAGNOSTIC X-RAYS/ IMAGING	$50 copay
ROUTINE ADULT PHYSICALS & IMMUNIZATIONS	Covered 100%
DIAGNOSTIC LABORATORY	Covered 100%
INPATIENT HOSPITAL	Subject to Deductible and Coinsurance
URGENT CARE VISIT	$30 copay
EMERGENCY ROOM VISIT	$300 copay
OUTPATIENT SURGERY	Subject to Deductible and Coinsurance
MATERNITY CARE	Subject to Deductible and Coinsurance
WELL-BABY CARE/IMMUNIZATIONS	Covered 100%
CHIROPRACTIC CARE	$30 copay
PHYSICAL THERAPY	Covered 100%; Physical, Speech and Occupational Therapies limited to 60 days per year
MENTAL HEALTH TREATMENT - INPATIENT	Subject to Deductible and Coinsurance
MENTAL HEALTH TREATMENT - OUTPATIENT	$30 copay
SUBSTANCE ABUSE TREATMENT - INPATIENT	Subject to Deductible and Coinsurance
SUBSTANCE ABUSE TREATMENT - OUTPATIENT	$30 copay
RX PLAN **(COVERAGE PROVIDED THROUGH TRUESCRIPTS)**	Retail: $5/$45/$90; Specialty: $200 (per 30 day supply); Mail Order: $10/$90/$180 (per 90 day supply) *Note: Certain Rx classes may have class-specific copays.*

Pharmacy Benefit – TrueScripts

TrueScripts is the new Pharmacy Benefits Manager for Hobart and Willam Smith. TrueScripts has a dedicated in-house clinical team made up of nurses, pharmacists, technicians, and care specialists who are dedicated to ensuring that you and your family are getting the right medications at the best price possible.

The TrueScripts Member Care team has a 98% one ring response. This team can be reached Monday through Friday from 8am-6pm at (844) 257-1955. Be sure to register for your **TrueScripts** member portal at **https://memberportal.truescripts.com/**. The portal opens for registration 1/1/2026.

If you have any questions about your prescription or if you are on a prescription requiring prior authorization or being sourced through a specialty pharmacy, please be sure to reach out to the TrueScripts Member Care team at least 3 weeks prior to 1/1/2026.

Medical Opt-Out Stipend

The College has established a benefit option that permits all benefits-eligible employees to decline coverage in the Colleges' health insurance programs through Excellus and to instead receive a non-benefits-eligible taxable stipend. The current 2026 value of the stipend amount is $1,000 and distributed to employees based on their enrollment soon after the benefit year starts. If you opt out of the Colleges' health insurance plan at the time of hire, a prorated stipend will be paid to you at that time. Employees who waive health care coverage through the medical opt-out program will not be eligible for COBRA coverage at the time of separation from the Colleges.

Dental Insurance

In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings, and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body, including your heart. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

The following chart outlines the 2026 dental benefits Hobart and William Smith Colleges offer through **Excellus**.

Excellus BCBS Dental Plan Offering		
Benefit	**Low Plan**	**High Plan**
Annual Deductible	Individual: $50 - 2 Per Family	Individual: $50 - 3 Per Family
Annual Benefit Maximum	$1,500 per person	
Preventive Care	Covered 100% - Deductible Waived	
Basic Care	Covered 50% After Deductible	Covered 80% After Deductible
Major Care	No Coverage	Covered 50% After Deductible
Orthodontia	No Coverage	Covered 50% After Deductible
Lifetime Orthodontia Maximum	No Coverage	$1,000
Maximum Rollover	Not Applicable	Yes
Dependent Coverage	26	

In-Network ONLY – Out-of-Network coverage is subject to additional charges

Vision Insurance

Driving to work, reading a news article and watching TV are all activities you likely perform every day. Your ability to do all of these activities, though, depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

Hobart and William Smith's vision insurance entitles you to specific eye care benefits. Our policy covers routine eye exams and other procedures, and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses.

The following chart outlines the 2026 vision benefits through EyeMed. If you seek the services of a provider listed in EyeMed's In-Network Provider directory, your benefits include the following:

Vision Care Services	EyeMed - Insight
EXAM SERVICES	Once Every Plan Year
Eye Exam – *Plus Providers*	$0 Copay
Eye Exam – *Other In-Network Providers*	$10 Copay
FRAMES	Once Every Plan Year
Frames – *Plus Provider*	$0 copay; 20% off balance over $180 allowance
Frames – *Other In-Network Providers*	$0 copay; 20% off balance over $130 allowance
STANDARD PLASTIC LENSES	
Single/ Bifocal/Trifocal Vision	$25 Copay
Progressive – Standard / Premium	Refer to Schedule for Copay
LENS OPTIONS	Refer to Schedule for Reimbursement Schedule
Contacts – Conventional – *Plus Providers*	$0 copay; 15% off balance over $180 allowance
Contacts - Conventional	$0 copay; 15% off balance over $130 allowance
Contacts – Disposable – *Plus Providers*	$0 copay; 100% of balance over $180 allowance
Contacts – Disposable	$0 copay; 100% of balance over $130 allowance
Contacts – Medically Necessary	$0 copay; paid-in-full
Dependent Coverage	26

In-Network ONLY – Out-of-Network coverage is subject to additional charges
Plan allows member to receive frame and lens services OR contacts – cannot have both in one plan year- in lieu of

Bree Health- Employee Assistance Program (EAP)

The Colleges provide confidential referral services to benefits eligible administrative hourly and salaried employees and their eligible dependents through **BreeHealth** (login.breehealth.com) a service provided by ENI.

This program provides personalized support, coaching, and guidance tailored to your individual needs. Support services include career and education, mental and physical health, finances, and family and relationships. A variety of resources are available, along with the BreeHealth mobile app, which users can utilize to access support, track progress and receive coaching along the way.

Participants' right to privacy is fully protected by law and the College's EAP policy. Employees may contact the EAP at 800-327-2255, or the Office of Human Resources for related literature.

Child Health Plus

New York State offers a health insurance program called Child Health Plus for children under the age of 19 who reside in New York State. To be eligible, children must not be covered by another health insurance plan or eligible for Medicaid. The program provides comprehensive coverage with no deductibles or co-payments. Monthly premiums are determined based on household income and family size.

Basic Life Insurance

Life insurance can help provide for your loved ones if something were to happen to you. Hobart and William Smith provide benefit eligible employees with 1x's base annual earnings to a maximum of $200,000 in group life and accidental death and dismemberment (AD&D) insurance (age reduction schedule applies).

Hobart and William Smith pay for the full cost of this benefit, meaning you are not responsible for paying any monthly premiums. You can update your beneficiary information in the Employee Navigator benefits portal.

Voluntary Life Insurance

While Hobart and William Smith offer basic life insurance, some employees may want to purchase additional coverage. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future (for example, college tuition for your child)? Depending on your needs, you may want to consider buying supplemental coverage.

With voluntary life insurance, you are responsible for paying the full cost of coverage through biweekly payroll deductions.

Life Insurance Overview:

Benefits Plan	2026 Highlight
Employer-paid Basic Life Insurance & Accidental Death and Dismemberment	Employer-paid benefit 1x's salary to $200,000 benefit
Voluntary Life Insurance Self, Spouse, Children	Premium subject to change based on age bracket for 2026

During initial eligibility:

- Employee: May elect 1-4x annual salary to a max of $450k – Health questionnaire for carrier approval is required for amounts over $200,000
- Spouse: Option 1 - $10,000 or $25,000 flat amount / Option 2 – 50% of employee's life coverage to a maximum of $100k; Health questionnaire for carrier approval is required for amounts over $25,000
- Dependent Child: Birth to 14 days: $500/ 14 Days to age 26: $4,000

Flexible Spending Accounts

Hobart and William Smith utilize Lifetime Benefit Solutions to administer our Flexible Spending Account.

What Is a Health Care FSA?

Paying for health care can be stressful. That's why Hobart and William Smith offer an employer-sponsored flexible spending account. A health care FSA lets you use pre-tax dollars for certain IRS-approved medical care expenses not covered by your insurance plan. For example, cash that you now spend on deductibles, copayments or other out-of-pocket medical expenses can instead be placed in the health care FSA on a pre-tax basis.

For 2026, the FSA limit is $3,400

What Are the Benefits of a Health Care FSA?

There are a variety of different benefits of using a health care FSA, including the following:

It saves you money. Allows you put aside money tax-free that can be used for qualified medical expenses.

It is flexible. You can use your FSA funds at any time, even if it's the beginning of the year.

What Is a Dependent Care FSA?

Similar to health FSAs, dependent care FSAs allow you to contribute pre-tax dollars to qualified dependent care. The maximum amount you may contribute each year is $7,500 (or $3,750 if married and filing separately).

How Do I Enroll?

FSA elections will NOT carryover year to year – you must re-enroll through our benefits portal, Employee Navigator, during open enrollment.

FSA Case Study

FSAs provide you with an important tax advantage that can help you pay for certain expenses on a pre-tax basis. Due to the personal tax savings you incur, your spendable income will increase. The example that follows focuses on how a health FSA can save you money.

Bob and Jane live in Texas and have a combined annual gross income of $45,000. They are married and file their income taxes jointly. Since Bob and Jane expect to spend $3,000 in eligible medical expenses in the next plan year, they decide to direct a total of $3,050 into their FSAs. The table demonstrates their savings.

	Without Health FSA	With Health FSA
Gross income	$45,000	$45,000
FSA contributions	$0	(-$3,050)
Gross income	$45,000	$41,950
Estimated taxes	(-$5,400)*	(-$5,034)*
After-tax earnings	$39,600	$36,916
Eligible out-of-pocket expenses	(-$3,000)	(-$150)
Remaining spendable income	$36,600	$36,766
Spendable income increase	--	$166

**Assumes 12% income tax. This example is provided for illustrative purposes only. Each situation varies and it is recommended that you consult a tax advisor for all matters related to taxes.*

Additional Benefit Offerings

You are also eligible to enroll or participate in the following voluntary programs through MetLife:

- **Critical Illness -** Provides coverage for a variety of critical illnesses including cancer, Alzheimer's, coronary artery disease, heart attack, kidney failure, major organ transplants and stroke. Employees can choose coverage amounts for themselves, spouses, and dependent children to age 26

- **Accident Insurance -** Provides coverage for accidents occurring on or off the job. Benefits paid include hospitalization, lacerations, fractures, dislocations, burns, x-rays, and follow-up treatments. Elect coverage for yourself, spouse and dependent children to age 26

VENDOR INFORMATION

Insurance Enrollment
Consiliarium Group
www.employeenavigator.com.benefits/account/login
Customer Service: 1-844-890-7955
Email: info@consiliariumgroup.com

Flexible Spending Account (FSA)
Lifetime Benefit Solutions
www.lifetimebenefitsolutions.com/members/login
Customer Service: 1-800-327-7130
Email: info@consiliariumgroup.com

Health / Dental Insurance
Excellus Blue Cross Blue Shield
www.excellusbcbs.com/hws

Retirement
TIAA
www.tiaa.org
Customer Service: 1-800-842-2252

Transamerica
www.trsretire.com/
Customer Service: 1-800-755-5801

Pharmacy
TrueScripts
https://memberportal.truescripts.com/
TrueScripts Customer Service: 1-800-257-1955
https://www.truescripts.com/contact-us

Vision Insurance
EyeMed
www.member.eyemedvisioncare.com/member/en
Customer Service: 1-866-939-3633

Employee Assistance Program (EAP)
ENI/Bree Health
https://login.breehealth.com/#/login
Phone: 1-800-327-2255
Company ID: 8956

Child Health Plus
NY State of Health
https://nystateofhealth.ny.gov/
Phone: 1-855-355-5777

Medicare Support

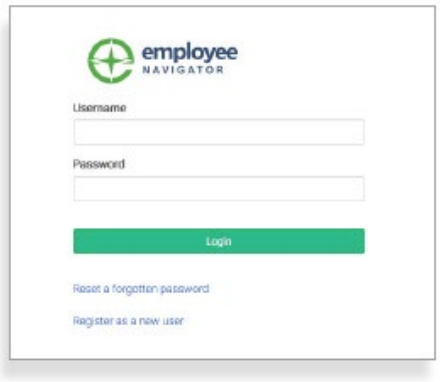
Consiliarium Group's in-house Medicare advisor – Corinne Hillmon, is available to educate and assist employees approaching retirement or Age 65. As part of our organization,

Corinne has a unique perspective with knowledge about employee's group health plan along with the Medicare marketplace and can help employees to evaluate what makes the most sense for them and their family. Understand Medicare

- Ensure Your Doctor Participates
- Maximize Your Coverage
- Minimize Your Costs
- Select a High-Quality Rated Plan

Employee Navigator

ENROLL IN YOUR BENEFITS: One step at a time



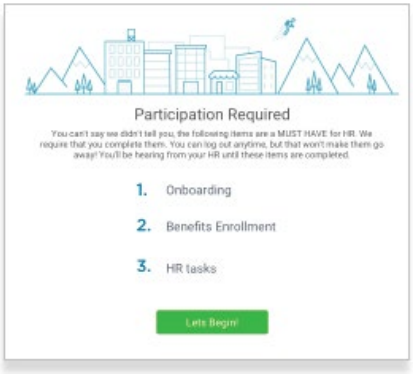
Step 1: Log In

Go to www.employeenavigator.com and click Login

- Returning users: Log in with the username and password you selected.

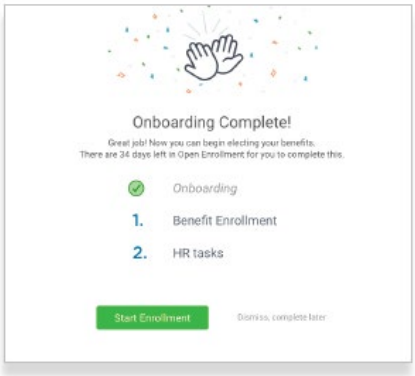
  Click **Reset a forgotten password**.
- **First time users:** Click on your Registration Link in the email sent to you

by your admin or **Register as a new user**. Create an account, and create your own username and password.



Step 2: Welcome!

After you login click **Let's Begin** to complete your required tasks.

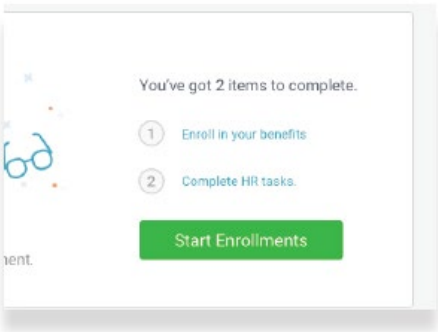


Step 3: Onboarding (For first time users, if applicable)

Complete any assigned onboarding tasks before enrolling in your benefits. Once you've completed your tasks click **Start Enrollment** to begin your enrollments.

TIP

if you hit "Dismiss, complete later" you'll be taken to your Home Page. You'll still be able to start enrollments again by clicking **"Start Enrollments"**



Step 4: Start Enrollments

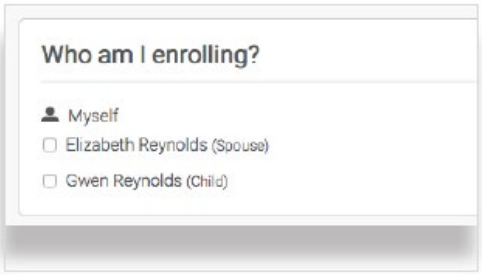
After clicking **Start Enrollment**, you'll need to complete some personal & dependent information before moving to your benefit elections.

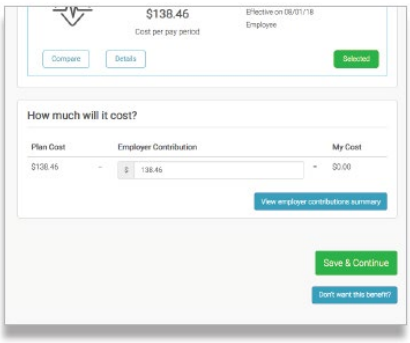
TIP

Have dependent details handy. To enroll a dependent in coverage you will need their date of birth and Social Security number.

Step 5: Benefit Elections

To enroll dependents in a benefit, click the checkbox next to the
dependent's name under **Who am I enrolling?**
Below your dependents you can view your available plans and the cost per pay. To elect a benefit, click **Select Plan** underneath the plan cost.

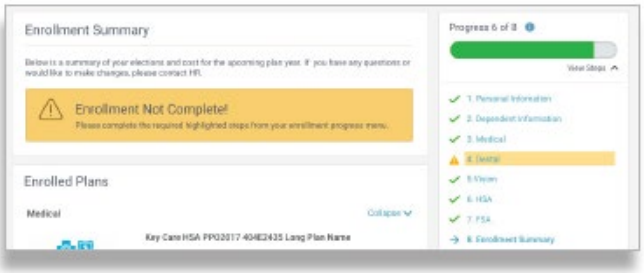




Click **Save & Continue** at the bottom of each screen to save your elections.
If you do not want a benefit, click **Don't want this benefit?** at the bottom of the screen and select a reason from the drop-down menu.

Step 6: Forms

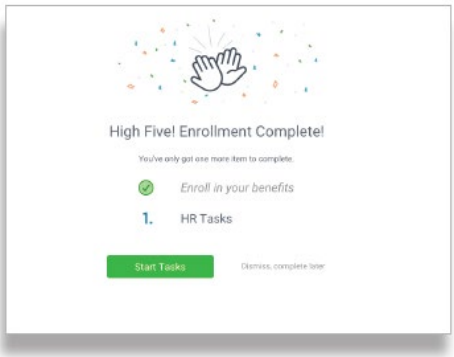
If you have elected benefits that require a beneficiary designation, Primary Care Physician, or completion of an Evidence of Insurability form, you will be
prompted to add in those details.



Step 7: Review & Confirm Elections

Review the benefits you selected on the enrollment summary page to make sure they are correct then click **Sign & Agree** to complete your enrollment. You can either print a summary of your elections for your records or login at any point during the year to view your summary online.

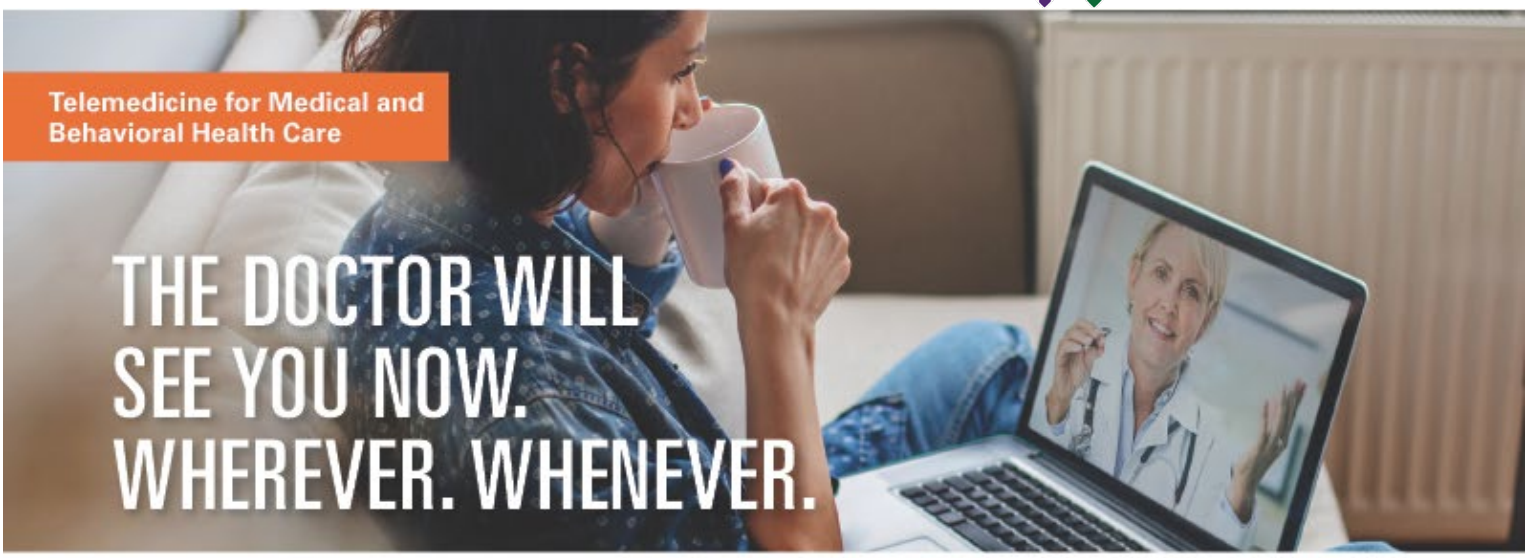
TIP
If you miss a step, you'll see Enrollment Not Complete in the progress bar with the incomplete steps highlighted. Click on any incomplete steps to complete them.



Step 8: HR Tasks (if applicable)

To complete any required HR tasks, click **Start Tasks**. If your HR
department has not assigned any tasks, you're finished!

You can login to review your benefits 24/7



If your doctor isn't available, telemedicine may be an option for you. Telemedicine gives you fast access to medical and behavioral health care 24/7/365, from the comfort of your home, desk, or hotel room. **All you need to do is activate it through your online member account and download the MDLIVE app.**

Rest assured, our health care professionals deliver the same quality of care you receive from your own doctor, via your phone, tablet, or computer.

When do you use telemedicine?

- Instead of going to urgent care or the emergency room for minor and non-life-threatening conditions
- Whenever your primary care doctor is not available
- If you live in a rural area and don't have access to nearby care
- When you're traveling for work or on vacation

Here are some of the common medical conditions treated with telemedicine:

Adults

- Allergies
- Cold and Flu
- Ear Infections
- Fever
- Headache
- Joint Aches and Pains
- Nausea and Vomiting
- Pink Eye
- Rashes
- Sinus Infections
- Sunburn
- Urinary Tract Infections*

Children

- Cold and Flu
- Constipation
- Earache*
- Fever*
- Nausea and Vomiting
- Pink Eye

Excellus BlueCross BlueShield

*MDLIVE does not provide support for urinary tract infections in males; does not provide support for earache conditions for children under 12 years old; does not provide support for fever-related conditions for children under 3 years old.

Excellus BlueCross BlueShield is a nonprofit independent licensee of the Blue Cross Blue Shield Association.

Telemedicine is good for the mind as well as the body.

In addition to whenever, wherever access to medical doctors, you can also consult with a psychiatrist or choose from a variety of licensed therapists from the privacy of your own home. You can even schedule recurring appointments to establish an ongoing relationship with one therapist.

Here are some conditions people rely on behavioral health telemedicine for:

- Addiction
- Bipolar Disorders
- Depression
- Eating Disorders
- Grief and Loss
- LGBTQ Support
- Panic Disorders
- Stress
- Trauma and PTSD

Telemedicine visits with MDLIVE may be covered in the following ways:

Plan Type	Telemedicine Cost Share
Copay	Covered in full
Hybrid / Deductible Non-HSA	If your doctor's visits are subject to deductible, a telemedicine visit will be covered in full after deductible
	If your doctor's visits are a copay with no deductible, a telemedicine visit will be covered in full
Deductible HSA	Covered in full after deductible
Note: This is not a contract. It is intended to highlight the coverage for most plan options. Please refer to your contract for your plan's benefits.	

*If you haven't met your deductible, you will pay the allowable charge of $50. The allowable charge does not apply to Behavioral Health services. The allowable costs for the Behavioral Health services vary but do not exceed $180. This means a member who has not met their deductible will not pay more than $180.

Don't wait until you need it. There are four easy ways to activate telemedicine today.

WEB - Register/Log in at ExcellusBCBS.com/Member
APP - Download the MDLIVE app
TEXT - EXCELLUS to 635483 (Message and data rates may apply.)
VOICE - Call 1-866-692-5045

[1] "New medical cost savings program: Telemedicine means great discounts." R. Schultz, January 9, 2010.
[2] Based on MDLIVE data, 2016.
[3] Based on New York State Department of Health data, 2016.

MDLIVE does not replace the primary care physician. MDLIVE is not an insurance product. MDLIVE operates subject to state regulation and may not be available in certain states. MDLIVE does not guarantee that a prescription will be written. MDLIVE does not prescribe DEA controlled substances, non-therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. MDLIVE physicians reserve the right to deny care for potential misuse of services. MDLIVE phone consultations are available 24/7/365, while video consultations are available during the hours of 7 am to 9 pm ET 7 days a week or by scheduled availability. MDLIVE and the MDLIVE logo are registered trademarks of MDLIVE, Inc. and may not be used without written permission. For complete terms of use and privacy policy, please visit www.mdlive.com/terms-of-use and www.mdlive.com/privacy-policy. MDLIVE is an independent company, offering telehealth services in the Excellus BlueCross BlueShield service area.

Our Health Plan complies with federal civil rights laws. We do not discriminate on the basis of race, color, origin, age, disability, or sex.

Atención: Si habla español, contamos con ayuda gratuita de idiomas disponible para usted. Consulte el documento adjunto para ver las formas en que puede comunicarse con nosotros.

注意：如果您说中文，我们可为您提供免费的语言协助。*请参见随附的文件以获取我们的联系方式。*

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DID YOU KNOW?

70%

of doctor's office visits could be handled over the phone.[1]

20.3

days is the average wait time between scheduling an appointment and seeing a primary care doctor.[2]

90%

of emergency room visits can potentially be prevented with telemedicine.[3]

Excellus BlueCross BlueShield

TrueScripts Amazing Care

The Distinct Rx Advantage You Can Trust

TrueScripts delivers a uniquely robust set of services that go beyond the basics of pharmacy benefit administration to meet the diverse and evolving needs of today's clients. Our *lowest net cost model* is the foundation—but what makes us distinctive is how we bring this to life through our integrated clinical programs, high-touch support, and flexible innovation.

We are proud to be a *100% pass-through and transparent PBM*, with clearly defined administrative fees and *no hidden revenue streams*. We do *not own our own pharmacies*, ensuring there are no conflicts of interest in our recommendations or utilization management practices—no self-preferencing like other PBMs. Our clients can trust that every clinical and financial decision is made in their best interest.

Key proactive in-house, fully integrated services include:

- **Patient Assistance Program (PAP) –** A high-touch, pharmacist-led program providing end-to-end support for members on high-cost specialty medications, improving adherence, outcomes, and affordability by proactively pursuing available *manufacturer assistance for qualifying members,* reducing plan spend.
- **Brand & Specialty Copay Cards –** We assist members in accessing available manufacturer copay assistance for brand and specialty medications. These savings are seamlessly applied, reducing costs for both the member and the plan.
- **Biosimilar Savings –** We lead biosimilar conversion efforts with provider outreach, member education, and targeted clinical guidance to accelerate uptake and deliver meaningful savings without member confusion.
- **340B Program –** For clients that participate in 340B arrangements, we support full integration and claims coordination while carefully evaluating each opportunity to ensure it results in the *lowest net cost.* If a better savings opportunity exists—such as rebates or patient assistance—we will always pursue that option instead.
- **Integrated International Mail –** Our program partners with licensed international pharmacies to source brand-name medications at significantly reduced costs. This program is fully integrated with our claims system, ensuring members still receive deductible/OOP credit with no disruption.
- **Discount Card Integration (PriceProtector+) –** At the point of sale, we automatically compare benefit pricing to market discount programs like GoodRx, applying the lower cost and crediting deductible/OOP—all proactively with no member action required.

TrueScripts Amazing Care

- **Formulary Guard** – Our proactive monitoring and exclusion program eliminates low-value, high-cost drugs—like overpriced generics—to safeguard plan spend before a claim is even submitted.
- **Domestic Mail Order & Cost Plus Options** – Through relationships with partners like Mark Cuban Cost Plus Drugs, members can access low-cost generics with transparent pricing and seamless integration—no need for new ID cards or disruption to plan design.
- **Weight Management & GLP-1 Support** – Through our RestoreHealth partnership, we offer an integrated solution to support long-term success for members prescribed GLP-1s and other weight management therapies.
- **PrecisionCare+ (PGx Testing)** – Using FDA-approved pharmacogenomic testing, we help prevent costly trial-and-error prescribing by identifying which medications are most effective for each individual member.

At TrueScripts, integrity is not just a core value—it's our operating principle. Our approach blends advanced clinical strategy with compassionate member support and full financial transparency to deliver an elevated, conflict-free pharmacy benefit experience.

PROACTIVE IN-HOUSE APPROACH

Maximizing Cost Containment & Delivering Amazing Care

Amazing Care TrueScripts

Maximize Your Savings
By Considering These Best Practices

90 Day Supply / Retail Pharmacy: To help cut costs and increase convenience to you, TrueScripts allows 90-day prescriptions to be filled at retail pharmacies nationwide. To obtain a 90-day prescription, have your prescribing provider call into your pharmacy of choice with the updated prescription; an office visit is typically not required.

Generic Medications: Generic medications provide quality, cost-effective alternatives to brand medications. Generic equivalents work the same way in the body and have the same ingredients, strength, dosage, and form as their brand-name counterparts. Unless otherwise directed by your doctor, it is a good idea to use generic equivalents when possible.

Over-the-Counter (OTC) Products: Some brand-name prescription drugs have OTC alternatives that are therapeutically identical and are likely a much lower cost option for treating your condition. When talking to your prescriber, ask if an OTC product is available. TrueScripts will also do our part to identify situations where OTC coverage will benefit both you and your health plan.

Coupons & Copay Cards: Several websites, such as goodrx.com, offer large databases of savings opportunities. Please have your pharmacy check pricing through all sources before checking out. If any of those sources provide greater savings, please select that option and submit your receipt(s) via the Electronic Drug Reimbursement form found at www.truescripts.com/members. The amount paid will be applied to your deductible and/or out of pocket, based upon plan structure.

Manufacturer websites also list additional copay assistance programs on their websites. Keep in mind that only copay cards can be used *in addition to* your TrueScripts coverage.

Shop Around: Drug prices can vary significantly by pharmacy location. Use our Drug Price Lookup tool to compare drug prices at more than 70,000 pharmacies nationwide. Please note that prices are subject to change without notice at any time.

Take Medications as Directed: Not taking your medication as directed by your doctor can lead to health complications. This includes missing doses, ending prescribed medicines early, or not taking them at all. If you are unable to afford your medication, please speak freely with your physician to discuss other options.

TrueScripts™ Amazing Care

We are Experts in Prescription Benefits.
Questions? Please call and speak to a care specialist who will answer your questions. **844-257-1955**

MORE DENTISTS. MORE SAVINGS. MORE PEACE OF MIND.

In addition to our local network, your Excellus BlueCross BlueShield dental plan gives you access to more dentists nationwide than ever before through the National Dental GRID+ DenteMax network—one of the largest national PPO dental networks in the country. So you can feel confident knowing you're covered wherever life takes you.

Having the National Dental GRID+ DenteMax network means:

Access to more than 8,000 dentists across New York state

Coverage in all 50 states, with access to 123,000+ unique providers nationwide

Competitively negotiated rates for increased savings, value, and lower out-of-pocket costs

With our online Find a Dentist tool, you can quickly and easily find a participating dentist in the National Dental GRID+ DenteMax network:

- Use the National Dental GRID+ DenteMax search option and enter your location to find a provider near you
- Search for a dentist by name, location, and dental specialty
- Filter results by specialty, languages spoken, handicap accessibility, if they're accepting new patients, and more
- See side-by-side comparisons and create a PDF of results to save, share, or print

Find a participating dentist today at
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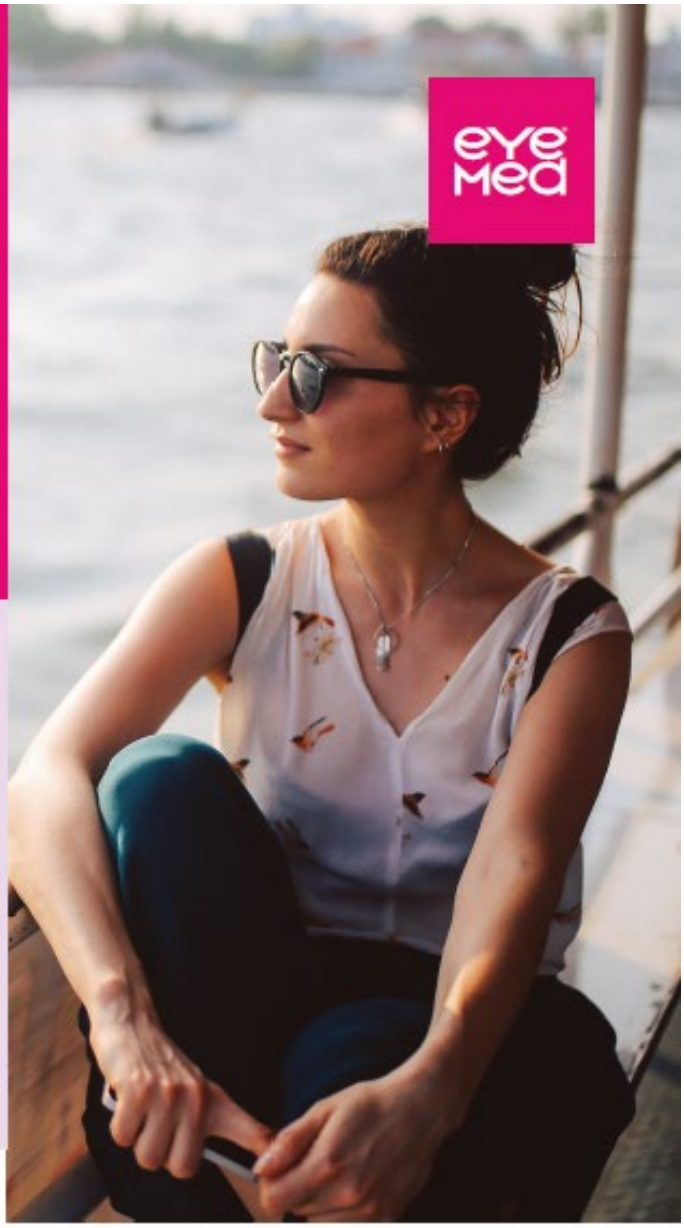
Savings plus convenience plus choice

PLUS Providers add another layer of coverage

Staying in-network helps you save money on eye exams, frames and lenses. Visiting a PLUS Provider is designed to help you save even more. And since PLUS Providers are already in our network, the additional perks are built right into your vision benefits.

No promo codes, no coupons, no paperwork. The same vision benefits, plus a little more savings.



The choice is yours

Find plenty of in-network eye doctors – including PLUS Providers – on our Provider Locator. Just look for the PLUS.

Need extra assistance? Contact us at 1.866.939.3633 or visit eyemed.com.

INDEPENDENT PROVIDER NETWORK + LENSCRAFTERS PEARLE VISION TARGET OPTICAL

Enroll in an FSA today

An FSA is a special account you can use to put money aside pre-tax for certain out-of-pocket health care or dependent care costs. It's a smart and simple way to prepare for unexpected expenses and increase your spendable income.

An FSA saves you even more money by reducing your taxable income. With an FSA, your contributions are taken out before taxes, then taxes are calculated on the lower amount that remains.

Types of FSAs

Medical

As health care costs continue to rise, you can stay ahead by using this account to pay for qualified medical expenses not reimbursed by insurance. This includes everyday out-of-pocket expenses such as copays, coinsurance, prescription drugs, orthodontics, vision expenses, hearing aids, dental services, eligible over-the-counter (OTC) items and more.

Dependent Care ($7,500 maximum)

Have kids in day care or other family members who depend on you? Plan ahead for ongoing expenses for dependent children and adults.

Limited Purpose

This FSA type focuses on helping you cover dental and vision expenses for you and your family. It can be used together with a Health Savings Account – another type of tax-advantaged benefit plan.

Estimate your expenses

You can maximize your FSA account using this helpful planning tool. You may also use the FSA calculator on our website at lifetimebenefitsolutions.com/fsa-calculator. Some common items to consider are listed in the chart below:

Medical FSA Account	Annual Expense
Deductibles	$
Copays	$
Dental Expenses Not Covered by Insurance	$
Orthodontia	$
Vision Expenses (Exams, Glasses, Lenses)	$
Hearing Expenses (Exams, Hearing Aids)	$
Prescription Drugs	$
Eligible Over-the-Counter Items	$
Diabetic Supplies	$
Therapy (Physical Therapy, Speech, Chiro)	$
Medical Mileage	$
Other	$
Total Estimated Health Care Expenses	$
Dependent Care Account	**Annual Expense**
Payment to Dependent Care Facility	$
Payment to Dependent Care Individual	$
Payment to Adult Care Provider	$
Total Estimated Dependent Care Expenses	$
Total Health Care PLUS Dependent Care	$

Plan ahead for your FSA!

Planning ahead is important when signing up for your company's FSA plans. Understanding the benefits offered is critical.

Read your Summary Plan Description (SPD) carefully to understand the specific terms of your plan. The plan document and SPD govern your rights and benefits under each plan and are available through your employer.

Experience the difference with Lifetime Benefit Solutions

By partnering with LBS, you and your employees will enjoy:

- A comprehensive, integrated platform
- Automated scheduling of contributions based on your timing preference, allowing for easy mid-year enrollments (when applicable)
- 24/7 access to account information at your fingertips through web-and mobile-based portals
- A virtually paper-free administrative process with automated email alerts and monthly account summaries available online
- Quick and easy access to all account funds in one place through online distribution requests or the use of a convenient debit card

An easier way for employees to use their FSA

LBS saves your employees the time and hassle of questioning what items are considered eligible by providing access to FSA Store, where participants can shop the largest selection of FSA-eligible products available online with their LBS Health Spending Card. Funds are deducted directly from their account, eliminating the additional step of saving and submitting receipts. Furthermore, employees will skip the trip to the store and enjoy the added convenience of having eligible items delivered right to their door.

Important information about FSAs

Electing an FSA

Typically, employees only have one opportunity to elect an FSA – during open enrollment. However, if during the year an employee experiences a qualified event, they will be allowed to update their election. Examples of qualified events include:

- A marriage or divorce
- Birth or adoption of a child
- A change in employment status
- Loss of spouse's insurance coverage

Calculating the ideal contribution

It is crucial that employees carefully calculate how much to contribute to their FSAs. Typically, any money that remains in the account at the end of the plan year will be forfeited. However, employer groups can elect an option that allows participants to carryover up to $660 into the following plan year. When planning contributions for the upcoming year, LBS takes the guesswork out of it by tracking and providing detailed monthly spending reports and account summaries on our integrated portal for the current plan year. And, as always, your dedicated team at LBS is here to support you and your employees every step of the way.

Saving made simple

If employees expect to incur qualified expenses that can't be reimbursed by their regular insurance plan, they should consider electing an FSA. Employees will take advantage of using tax-free funds to pay their out-of-pocket medical, dental, vision, and/or dependent care expenses starting on the first day of the plan year.

Certain FSAs allow employees a three month grace period after the end of the plan year to submit claims for eligible expenses that they incurred during the applicable plan year.

Take the first step toward savings. Contact your dedicated LBS Account Manager to elect a Flexible Spending Account today.

LifetimeBenefitSolutions.com

Lifetime Benefit Solutions

Bree HEALTH

Enhance Your Well-Being with Mindfulness

Bree Health's provides personalized guidance to help you cultivate mindfulness practices that improve focus, resilience, and emotional balance. Whether you're managing stress, navigating life changes, or building healthier thought patterns, our Solutions Paths, Video Library, and expert coaching will support your journey.

- **Mindfulness for Stress Relief:** Follow guided exercises and structured Solutions Paths designed to help you manage stress and enhance emotional resilience.
- **Focus and Clarity:** Utilize tools like the Bree Video Library to improve concentration and productivity with expert-led mindfulness techniques.
- **Building Healthy Thought Patterns:** Learn strategies to manage negative thinking and foster a balanced mindset through personalized coaching and self-guided resources.
- **On-Demand Mindfulness Tools:** Access guided meditations, breathing exercises, and expert-curated content anytime, anywhere to support your well-being.

Access Barrier-Free Certified Life Coaching via the Mobile App.

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Bree HEALTH

Tailored Support for Your Well-Being Journey

Your journey to well-being starts here—customized support, expert coaching, and guided resources, all tailored to your unique needs.

Customized Resources

Find support tailored just for you with Bree Health's Solutions Paths. Whatever life brings your way—stress, relationships, career changes, or just a desire to boost your well-being—Bree Health's personalized approach connects you to resources, tools, and guidance designed to help you thrive.

What Are Solutions Paths?

Solutions Paths are guided, customized journeys created to address your unique needs and goals. By choosing a category or typing in a personal challenge, Bree Health's AI Branching technology builds a Solutions Path that fits where you are today, bringing together helpful resources and support.

Solutions Paths Can Support You In:

- Career & Education
- Finances
- Family & Relationships
- Physical Health
- Spirituality & Religion
- Mental Well-Being

Personalized Guidance

Solutions Paths offer curated resources—including articles, videos, and podcasts to help you tackle life's challenges with confidence.

Areas That Matter Most

Find support in areas like mental health, personal growth, family, finances, and physical well-being. No matter your focus, there's a path that's just right for you.

Track Your Progress

Stay motivated as you see your progress on completing resources and experience growth toward your well-being goals.

Weekly Happiness Boosts

Keep motivated and uplifted with encouraging messages from the Bree Health coaching team, designed to brighten your week.

Easy Access to Expert Coaching

When you're ready, connect seamlessly with certified coaches specializing in stress management, career guidance, and more. Choose a format that fits your comfort, from live chat to video sessions.

Bree Health Video Library

Access guided meditations, relaxation exercises, and educational insights, all tailored to uplift and support your journey.

(800) 327-2255 login.breehealth.com Mobile App: Bree Health

PERSONALIZED SUPPORT FOR EVERY STEP OF LIFE'S JOURNEY.

How to Get Started

- Log in to Bree Health.
- Choose a category that resonates with you, or type in a specific challenge. Bree's smart AI will create a Solutions Path filled with the resources and support you need.
- Explore your customized path and track your journey toward a balanced, empowered life.

Discover a New Approach to Well-Being

Log in to the Bree Health portal and let Solutions Paths guide you to a healthier, more fulfilling life. Start your journey today!

Download the app by scanning the QR code or find the Bree Health App on on the Apple App Store or the Google Play Store.