



For Your Benefit

A guide to our 2026
associate benefits package



Our associate benefits

We are pleased to offer our associates a complete benefits package that includes medical, dental, prescription, vision coverage, paid time off, a retirement savings plan, tuition reimbursement, and more. Read this booklet for an overview of the benefits available to associates of the Independence Family of Companies (Independence).

Get health coverage that meets your needs

We provide coverage for all full-time associates and part-time associates scheduled to work 15 or more hours per week, along with their eligible dependents (including domestic partners). Coverage is effective the first of the month following or coinciding with the date of hire.

Most of the cost for medical and dental insurance for our full-time associates and part-time associates is paid for by the company.

Independence remains strongly committed to providing you and your family with quality health care options while continuing to pay, the majority of the medical and dental plan costs, but we must balance this with fiscal responsibility.

Evaluate your health care options with Budgie Health

Budgie is a tool that uses your actual claims data to guide your health plan and benefits selections — it could also result in year-round savings opportunities. Log in to budgie-health.com/ibx to see your personalized recommendations. With Budgie you can:

- Compare your options quickly and confidently to save money
- Learn about Health Savings Accounts(HSA) and other benefits
- Chat with Budgie experts for 1:1 support.

The banded premium structure

means associates in career bands 100 to 300 will pay a slightly lower premium than those in career bands 400 and above. This approach helps manage costs and also aligns with the Affordable Care Act (ACA) requirements for affordable coverage



Medical plans

The High Deductible Health Plan (HDHP) option may be a good fit for associates (under the age of 65) looking to spend the minimum amount on health care premiums.

The plan combines a high-deductible preferred provider organization (PPO) medical plan with a Health Savings Account (HSA) for you and your dependents.

This plan allows you to direct pre-tax dollars to a self-funded HSA that you can use for your out-of-pocket medical expenses. To participate in the HSA, you must be under 65 years old and enrolled in the HDHP plan.

Because the HDHP plan is a Personal Choice product, it gives you greater freedom of choice in choosing your doctors and hospitals.

In line with federal regulations, the individual annual maximum contribution to the HSA increased to \$4,400, and for families it is \$8,750.

Under the HDHP HSA plan you:

- have a \$3,000 in-network individual and \$6,000 in-network family deductible¹
- will be responsible for 10 percent coinsurance on most covered expenses up to the out-of-pocket limit
- have a \$8,500 individual and \$17,000 in-network family out-of-pocket limit (out-of-pocket maximum includes deductible, copays, and coinsurance)²

Health Savings Account

Contributions can be made to your HSA on a pre-tax basis, with an annual minimum contribution of \$260 and a maximum contribution of \$4,400 for self-only coverage or \$8,750 for family coverage. Unused HSA balances may accumulate from year to year without limit and earn interest. The full amount in the account may be carried over indefinitely. HSAs are owned by you, and you keep this account even if you are no longer enrolled in an HSA-eligible health plan. The earnings in your account continue to grow on a tax-free basis, and if used for medical expenses, may also be withdrawn on a tax-free basis. You can use your HSA account to pay for qualified medical expenses along with reimbursement for qualified dental and vision expenses.

Limited Purpose Flexible Spending Account (LPFSA).

In addition to the Health Savings Account (HSA), you may enroll in a Limited Purpose Flexible Spending Account (LPFSA). This pre-tax benefit can be used to pay for eligible dental and vision expenses only if you are enrolled in the High Deductible Health Plan (HDHP). The LPFSA would allow for additional pre-tax savings up to 3,400 IRS limit. Since you can use the LPFSA for certain expenses, it may also allow for greater savings to build up in your HSA.

Save money with high deductible health plans

High deductible health plans paired with a health savings account help you control out-of-pocket costs. You pay lower premiums, and you can use the pre-tax dollars in your savings account to pay for qualified health expenses.

¹ Individual Out-of-Pocket (OOP) maximum amounts apply for self-only coverage. For family coverage (an individual enrolled with one or more dependents), in-network benefits are subject to the family deductible amount which can be met by any combination of family members. Benefits are then covered at the indicated percentage for that service until the total maximum OOP amount is met.

The family OOP amount can be met by any combination of family members. However, no family member will be subject to more than the individual amount within a family OOP maximum amount shown.

² In-network, out-of-pocket maximum includes deductible, copays, and coinsurance. Out-of-network, out-of-pocket maximum includes deductible and coinsurance.

Keystone Health Plan East Health Maintenance Organization (HMO)

The HMO plan allows you to access a complete range of medical benefits through a network of doctors and hospitals (preferred providers).

Details of this plan include:

- one doctor, a primary care physician (PCP), coordinates your overall medical care needs
- referrals must be obtained from your PCP for all specialty care needs
- no deductible
- a wide network of participating physicians and hospitals in Pennsylvania, New Jersey, and Delaware makes it convenient and easy to use

To comply with Blue Cross and Blue Shield Association regulations, Keystone Health Plan East cannot market its product to associates who live outside of the service counties which are contiguous or border the licensed counties in which Keystone Health Plan East operates. Therefore, for those associates who work in New Jersey or live in a non-contiguous county, benefits are provided under AmeriHealth HMO PA. The benefit details are the same as those for the Keystone Health Plan East products. However, the Guest Advantage program is not available for services outside of the service area under the AmeriHealth HMO PA plan.

Personal Choice Preferred Provider Organization (PPO)

The PPO plan gives you the flexibility to choose your own providers. You may receive care from any provider who is within the network of preferred providers or from out-of-network, non-preferred providers. You do not have to choose a primary care physician (PCP), and you never need a referral. Be aware that if you choose an out-of-network provider, you will pay more for eligible medical services and you will have to submit a claim form for reimbursement for the portion of the cost that the plan will cover.

Details of this plan include:

- no need to enroll with a primary care physician
- no referrals required for specialty care needs

If you seek services from an in-network provider, you will not pay more than the outlined copays for eligible medical services. A wide network of participating in-network providers and hospitals in Pennsylvania, New Jersey, and Delaware makes it convenient and easy to use.

Coupe Health (PPO)

Coupe Health is a new medical plan option available to associates for 2026. The new plan is designed to connect you with high quality care and help you save money. Coupe Health operates within the IBX PPO network and emphasizes simplified navigation and price certainty. This plan may be a fit for associates who prefer a structured approach to provider selection and value digital tools for managing their benefits.

Through the Coupe digital portal, you can research providers in your network and see pre-determined costs for all services, eliminating surprise add-on billing. Providers are categorized into three tiers (green, yellow, and red) based on quality, appropriateness of care, and efficiency, which may influence copay amounts.

For more detailed information refer to the medical plan comparison chart located on the Options Iway site. Details of this plan include:

- no need to enroll with a primary care physician
- no referrals required for specialty care needs
- the ability to seek services from an in-network provider without paying more than the outlined copays for eligible medical services
- a wide network of participating in-network providers and hospitals in Pennsylvania, New Jersey, and Delaware

Prescription drug, vision, and dental

Prescription drug coverage

There is one prescription plan across all medical plan offerings. The prescription copays continue to be \$15/generic, \$45/brand name, and \$75/non-formulary. The prescription drug plan also has a mail-order feature that allows you to order a 90-day supply (the equivalent of a three-copay supply) at the cost of only two copays.

Vision coverage

There is one vision plan across all medical plan offerings. Regardless of the plan you choose, all associates are eligible for an exam and annual allowance for frames, lenses, or contact lenses, not subject to copay, once every year.

Dental plans

IBX Dental, our dental insurance provider, offers two dental plans are offered. You may choose either of these plans regardless of your medical plan selection.

Both dental options are preferred provider organization (PPO) plans offering flexibility to select any licensed dentist or specialist either in or out of the plan's network of participating providers.



Company-paid benefits

The following benefits are provided at no cost to all full-time associates and part-time associates scheduled to work 15 or more hours per week.

Benefit	Coverage
Basic Life Insurance	<ul style="list-style-type: none"> • Effective first day of the month following or coinciding with 30 calendar days from date of hire • Benefit equal to two times salary (salary is defined as base salary plus past 12 months' commissions) • The New Hire Guarantee Issue: All amounts of Life Insurance (Basic and Supplemental combined) of the lesser of 5.5 times annual earnings or \$2,000,000.
Accidental Death & Dismemberment (AD&D)	<ul style="list-style-type: none"> • Effective first day of the month following or coinciding with 30 calendar days from date of hire • Benefit is doubled in event of accidental death • Benefit equal to two times salary (salary is defined as base salary plus past 12 months' commissions)
Basic Long-Term Disability (LTD) Insurance	<ul style="list-style-type: none"> • Benefit equals 60% of salary (salary is defined as base salary plus past 12 months' commissions) • Benefits begin following six months of continuous disability
Business Travel Accident Insurance	<ul style="list-style-type: none"> • Effective the date of hire • \$100,000 benefit
Tuition Programs	<ul style="list-style-type: none"> • Effective after 12 months of service • Eligible associates may receive up to \$5,250 annually towards an undergraduate or graduate degree program. • Tuition Assistance is a reimbursement program which the Company provides eligible associates reimbursement of expenses associated with courses taken for a matriculated degree at any accredited college or university. • University Partnership Program is a deferral program in which the Company provides direct payment to sponsoring academic institutions.
Adoption Assistance Program	<ul style="list-style-type: none"> • Effective after 12 months of service • Reimburses associates up to \$3,500 for eligible expenses incurred for the adoption of a child not related to the associate • Eligible expenses include agency fees, placement fees, and legal fees

Additional benefits associates may purchase

Our full-time associates and part-time associates scheduled to work a minimum of 15 hours per week may purchase the benefits listed below.

Contributions are made on a pre-tax basis, so associates do not have to pay Social Security tax, federal income tax, and, in certain areas, state and local tax on the deducted amount.

Benefit	Coverage
Long-Term Disability (LTD) Insurance Enhancement	<ul style="list-style-type: none"> • Effective first day of the month following or coinciding with 30 calendar days from date of hire • Benefit supplies an additional 6²/₃% of LTD benefit added to the company-provided LTD benefit of 60%
Health Care Flexible Spending Account and Limited Purpose Flexible Spending Account (only if the HDHP is elected)	<ul style="list-style-type: none"> • Effective first day of the month following date of hire • Used to fund eligible medical/dental/prescription and vision expenses not covered by insurance for the associate and eligible dependents • \$260* annual minimum; \$3,400 annual maximum • Funds not used by the end of the calendar year will be forfeited in accordance with IRS regulations
Dependent Care Flexible Spending Account	<ul style="list-style-type: none"> • Effective first day of the month following date of hire • Used to fund eligible dependent child(ren) up to age 13 or elder care expenses • \$260* annual minimum; \$7,500* annual maximum (highly compensated associates may be subject to additional limitations) • Funds not used by the end of the calendar year will be forfeited in accordance with IRS regulations
Transportation Spending Accounts	<ul style="list-style-type: none"> • Effective first day of the month following date of hire • Used to pay for transit and/or parking expenses • Transit monthly maximum is \$340 parking monthly maximum is \$340 • Funds not used by the end of the calendar year may be forfeited in accordance with IRS regulations if continued enrollment does not occur
Flex Vacation	<ul style="list-style-type: none"> • Purchase 1 to 5 flex vacation days • Cost determined by base salary • Must use all company-paid vacation before using flex vacation • No carryover; however, cost of unused flex vacation may be reimbursed at year-end • Associates hired on or after October 1 are not eligible to participate until the following calendar year

*The IRS limits are published annually. The limits provided here are the approved limits at the time this brochure was published and may have changed.

Carryover options for Healthcare and Limited Purpose Flexible Spending Accounts

If you're enrolled in a Healthcare or Limited Purpose Flexible Spending Account (FSA), you'll be able to carry over part of your unused funds into 2027. For 2026, the IRS has set the annual FSA limit at \$3,400. If you don't use all your funds by December 31, 2026, you can carry over up to 20 percent of that amount — \$680 — into the 2027 year.

Associates in the Personal Choice PPO, HMO (Keystone/AmeriHealth), or Coupe Health plans can enroll in the Healthcare FSA. If you're in the High Deductible Health Plan (HDHP) with a Health Savings Account (HSA), you can enroll in the Limited Purpose FSA, which covers vision and dental expenses only. A health care flexible spending account (FSA) allows you to use pre-tax dollars to pay for eligible medical, Rx, vision, and dental care expenses. Expenses must be incurred during the 2026 calendar year while you are actively employed and contributing to your FSA. If your employment ends, you may be able to continue your participation in the FSA as permitted under federal COBRA regulations.

Associates may also purchase the following benefits on an after-tax basis through payroll deduction.

Benefit	Coverage
Supplemental Life Insurance	<ul style="list-style-type: none"> • Effective first day of the month following or coinciding with 30 calendar days from date of hire. • Purchase additional coverage initially up to 3.5 times salary (1, 1.5, 2, 2.5, 3, and 3.5). Salary is defined as base salary plus past 12 months' commissions. Additional levels of coverage up to 6 times salary will be available in future open enrollment windows. • Supplemental Life Insurance amounts include an equal amount of AD&D Insurance. • The New Hire Guarantee Issue: All amounts of Life Insurance (Basic and Supplemental combined) of the lesser of 5.5 times annual earnings or \$2,000,000.
Dependent Life Insurance	<p>Effective first day of the month following or coinciding with 30 calendar days from date of hire:</p> <p>Spouse/Domestic Partner Life can be elected in increments of \$10,000 through \$100,000. The highest level you can elect for spouse/domestic partner life insurance at new hire is \$50,000 without Evidence of Insurability (EOI) required.</p> <p>Child(ren)/Domestic Partner Children(ren) can be elected in three levels:</p> <ul style="list-style-type: none"> • Level 1: \$5,000* • Level 2: \$10,000* • Level 3: \$15,000* <p>The highest level of child(ren)/domestic partner child(ren) you can elect at new hire is \$15,000.</p> <p>*Children are covered at 50 percent of stated amounts until they reach age 3.</p>
Voluntary Benefits	<p>Effective first day of the month following or coinciding with 30 calendar days from date of hire:</p> <p>Through Guardian, we offer three voluntary benefits that can help protect you and your families from unexpected out-of-pocket expenses as follows.</p> <p>Associates do not have to be enrolled in one of our medical plans to purchase one or all three of the benefits.</p> <ul style="list-style-type: none"> • critical illness* insurance provides a lump sum payment to members upon diagnosis of an illness such as cancer, heart attack or stroke. Members can use this money for unexpected medical and non-medical expenses of a covered illness. <ul style="list-style-type: none"> • Associate levels are \$10,000 - \$30,000 and the cost is based upon age • Associate + Spouse levels are \$5,000 - \$10,000 and the cost is based upon the spouse's age • accident insurance provides a benefit payment to members to be used for any purpose while they recover from an unexpected event such as a fall or car accident. • hospital indemnity provides a benefit to offset out-of-pockets costs for hospital admissions. <ul style="list-style-type: none"> • accident and hospital are purchased by tiers; associate, associate + spouse, associate + child(ren) and associate + family <p>*To elect coverage for your spouse, you must also elect Critical Illness coverage for yourself.</p> <p>**Critical Illness is not subject to Evidence of Insurability (EOI) rules, therefore you can elect any level during Open Enrollment, or a qualified life event.</p>

Nationwide Pet Insurance

Enjoy the peace of mind of knowing that you can get care for your beloved animal at an affordable price. Independence has partnered with Nationwide — the first and largest provider of pet insurance in the country — to bring you a reasonably priced comprehensive coverage plan.

My Pet Protection® Wellness500

My Pet Protection® Wellness500 is a coverage option offering benefits for preventive care, including eligible exams, vaccinations, flea prevention, spay or neuter, teeth cleaning, and more. Existing pets may be enrolled in this plan during their annual renewal period only.

Regardless of which plan you choose, there is a \$250 deductible for services.

For more information and a no-obligation quote, visit [PetsNationwide.com](https://www.petsnationwide.com) or call 877-738-7874.



Retirement plan

Blue Chip 401(k) retirement savings plans

To assist associates with saving for their retirement, the company will contribute to their 401(k) Blue Chip Retirement Savings Plan, administered by Empower, through an automatic contribution and company match*:

- Employer-funded retirement account – the company will deposit three percent of your eligible earnings into a 401(k) plan. This contribution will be invested directly into the company's default fund (Empower Target Fund). You do not need to participate in the Blue Chip Retirement Savings Plan to receive this contribution.
- Company match – the company will match 50 percent up to the first eight percent of your contributions.

In addition, a program called One-Step is offered. This voluntary program will automatically:

- Enroll you in the plan after 30 days of employment with a four percent pre-tax deduction.
- Increase your contributions one percent each year until it reaches a cap of eight percent.
- You may opt out of this program or contribute more (or less) than the four percent.

Associates may make both pre-tax and Roth after-tax salary contributions of up to 50 percent of covered pay (combined totals not to exceed IRS limits).

- Associates are always 100 percent vested in their contributions to the plan.
- If you are turning age 50 or older this year, you may contribute up to an additional \$8,000 in catch-up contributions.

*90-day waiting period for matching contribution, and employer three percent contribution.

Paid time off (PTO) and leave-of-absence policies

Benefit	Coverage
Company holidays	<ul style="list-style-type: none"> • Eight designated paid holidays
PTO Bank	<ul style="list-style-type: none"> • 20 to 35 days per year based on length of service • Prorated first calendar year based on hire date • Used for any “time away from work” reason including vacation, associate’s own or family member’s illness, personal emergency, bereavement of non-immediate family member
Short-Term Disability	<ul style="list-style-type: none"> • Eligible 90 days from date of hire • Benefit is paid at 100% or 60% based on years of service • Medical documentation and claim approval required • Benefits begin on the sixth business day of absence
Family and Medical Leave Act	<ul style="list-style-type: none"> • Eligible 12 months from date of hire • Associates must have worked 1,250 hours in the previous 12-month period • Unpaid leave for up to 12 work weeks for birth, adoption, or foster care, or a serious medical condition of an associate’s spouse, child, parent, or self • 30 days’ notice to manager/supervisor is required when need for leave is foreseeable
Domestic Partner Leave	<ul style="list-style-type: none"> • Eligible after 12 months of service • Associates must have worked 1,250 hours in the previous 12-month period • Unpaid leave for up to six weeks to care for a domestic partner with a serious health condition • 30 days’ notice to manager/supervisor is required when need for leave is foreseeable
Parental Leave	<ul style="list-style-type: none"> • Eligible after 12 months of service • Associates must have worked 1,250 hours in the previous 12-month period • Leave runs concurrently with FMLA and used after Short Term Disability (where applicable) • Up to four weeks of paid bonding leave to be taken in one week increments within six months of the birth or adoption of a child • 30 days’ notice to manager/supervisor is required when need for leave is foreseeable
Caregiver Leave	<ul style="list-style-type: none"> • Eligible after 12 months of service • Associates must have worked 1,250 hours in the previous 12-month period • Leave runs concurrently with FMLA • Up to four weeks of paid leave to be taken in full day increments to care for a parent, spouse, domestic partner or child with a serious health condition • 30 days’ notice to manager/supervisor is required when need for leave is foreseeable
Bereavement Leave	<ul style="list-style-type: none"> • Up to three paid days of leave due to the death of an immediate family member
Court Appearance	<ul style="list-style-type: none"> • Benefit covers jury duty service and court appearances for which associates are not personally involved • Associate receives regular pay reduced by juror pay
Military Leave	<ul style="list-style-type: none"> • For Active Reservist and civil emergency leave • Provisions of leave are based on federal and state law in effect at the time of leave • Service credited for benefits during absence • Reemployment and reinstatement provisions apply

This Benefits Profile describes highlights of the Company's benefits program. Details are contained in the official plan documents and corporate policies that legally govern the operation of the plans. If there is any conflict between this Benefits Profile and the plan documents or policies, the plan documents and policies will always govern. We reserve the right to change, amend, or terminate these plans and policies at anytime. This Benefits Profile does not constitute a contract of employment or contract of any other nature between Independence and any other sponsoring company and any associates.



The summaries in this brochure represent only a partial listing of benefits and exclusions of the Keystone Health Plan East and Personal Choice programs. These managed care programs may not cover all of your health care expenses. Read your contract, member handbook, and/or benefit booklet carefully to determine which health care services are covered. For more information, please call 1-888-745-3189.

Independence Blue Cross offers products through its subsidiaries Independence Hospital Indemnity Plan, Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield — independent licensees of the Blue Cross and Blue Shield Association.

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