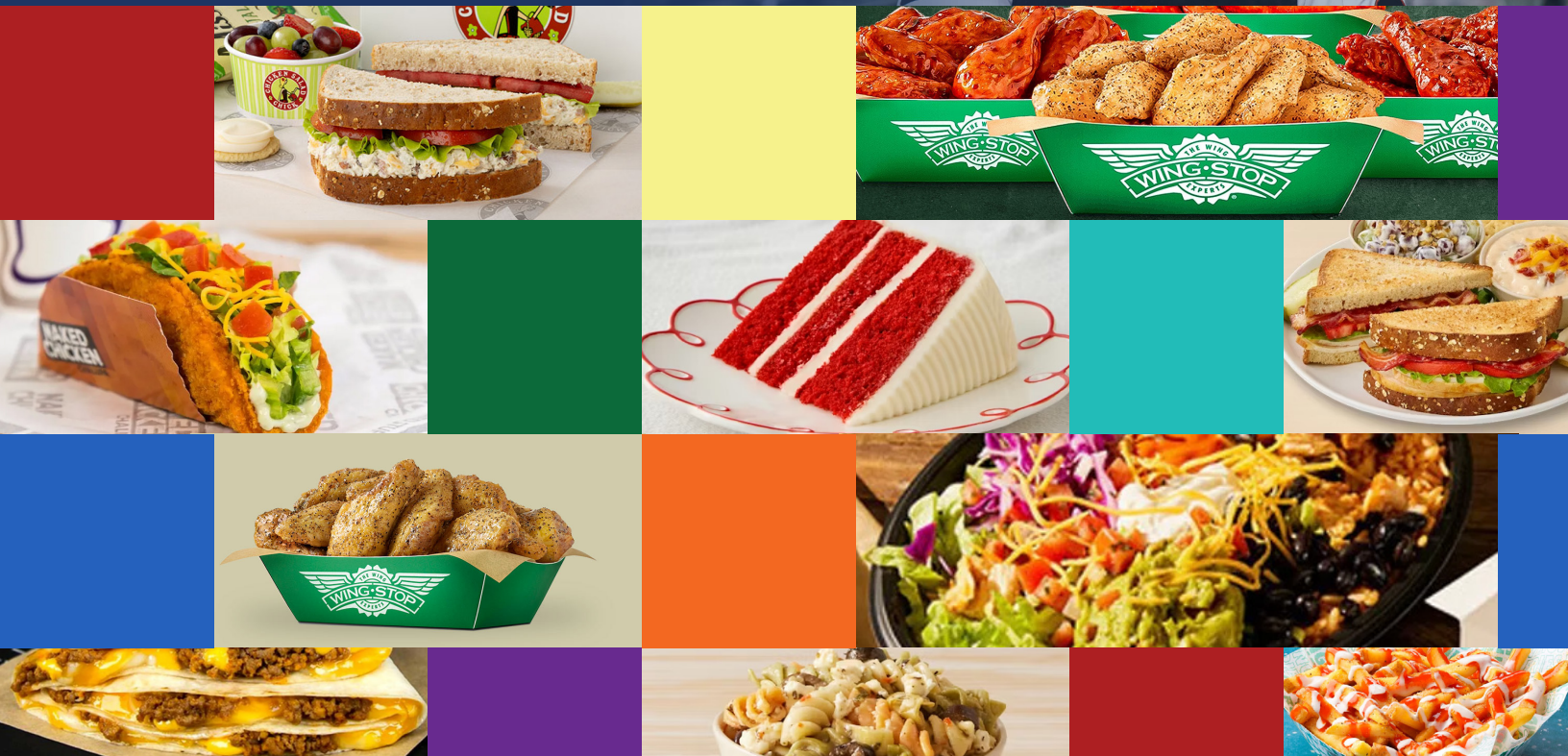




2026

Employee Benefits

Hourly Guide (Out of Texas)



Important Contacts

COVERAGE	CONTACT	PHONE	WEBSITE
Enrollment Site	Employee Navigator		www.employeenavigator.com/benefits/account/login Company Identifier: 200MSI
Enrollment Call Center	Unum	877-700-8136 Schedule enrollment help 	www.calendly.com/unumengageplus/msienglish
MMA Service Center	Marsh McLennan Agency	855-550-9885 Pin: 2360	Meauxmentum@marshmma.com
Medical	Blue Cross Blue Shield	800-521-2227	www.bcbstx.com
Telemedicine and Advocacy			
Pet Insurance, Legal Support, and Identity Theft Protection	freshbenies	855-647-6762	www.freshbenies.com
Health Savings Account	Sterling Administration	800-617-4729	www.sterlingadministration.com
Dental	Blue Cross Blue Shield	800-521-2227	www.bcbstx.com
Vision	Blue Cross Blue Shield	866-939-3633	www.bcbstx.com
Life and AD&D	Unum	800-635-5597	www.unum.com
Disability	Unum	800-635-5597	www.unum.com
Accident, Critical Illness, and Hospital Indemnity Insurance	Unum	866-679-3054	www.unum.com
Employee Assistance Program	Unum	800-854-1446	www.unum.com/lifebalance
Medical Travel Assistance	Unum	800-872-1414 (US) 609-986-1234 (Outside US)	www.assistamerica.com
Be Well	Unum	800-635-5597	www.unum.com

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Welcome

At Meauxmentum Strategies and Investments (MSI) it's our employees who make the difference in our success. That's why, each year, you have the opportunity to choose from a variety of benefits that can make a real difference in your life. We offer a broad range of benefits, including health care, life insurance, disability insurance, and much more. You can customize a benefits program that's exactly right for your personal situation.

EMPLOYEE NAVIGATOR PORTAL

You will be enrolling through an updated version of the Employee Navigator portal. All employees will need to create a new account to access the enrollment system.

HOW TO ACCESS YOUR BENEFITS ENROLLMENT:

- **Enrollment Site:** Employee Navigator
- **Website:** www.employeenavigator.com/benefits/account/login
- **Company Identifier:** 200MSI

On your first time logging in, you'll need to create a new account with a unique username and password. You should have received an email invitation with instructions to set up your account.

This guide provides a summary of your benefit options. Please review it carefully and make your elections before the deadline. All elections you make during the Open Enrollment period will be effective on March 1, 2026. No changes will be allowed at any other time unless you have a Qualified Life Event (such as a birth, death, divorce, marriage, etc.).

If you have any questions about your benefits options or about how to enroll, please reach out to get the answers you need.



Scan the QR code to learn more about your benefits.



MSI VALUES

VISION

Lead multiple brands at premier levels while engaging, empowering, and elevating our teams and the communities we serve.

PURPOSE

To spread joy, create opportunities, and enrich lives.

MISSION

Be Consistently Best on the Block in everything we do.

CORE VALUES

- Positive Energy
- Accountability
- Recognition
- Servant Leadership



Letter to Employees

Being *Consistently Best on the Block* in everything we do starts with how we care for our people. Our employees are the foundation of our success, and our commitment to you goes beyond the work you do each day.

This Benefits Guide represents our commitment to offering affordable, high-quality options that support your health, financial well-being, and life beyond work. Our benefits are not simply programs; they are an extension of our culture and one of the ways we actively demonstrate our values.

Each year, we thoughtfully review our total rewards to ensure they are meaningful, accessible, and aligned with the needs of our teams. Our approach to benefits is grounded in our values.

POSITIVE ENERGY: We believe benefits should reduce stress—not add to it. That's why we focus on options that support your health, peace of mind, and overall well-being, so you can bring your best self to work and to life.

ACCOUNTABILITY: We take seriously our responsibility to balance affordability with quality. Every benefit decision is made with care, transparency, and a commitment to doing what's right for our employees and the long-term health of our organization.

RECOGNITION: Your hard work matters. Our benefits are one of the ways we say “thank you” for the impact you make every day—recognizing your contributions not just as employees, but as people.

SERVANT LEADERSHIP: We listen, learn, and evolve. Your feedback helps shape our benefits strategy, and we remain committed to continuously improving how we serve and support you.

Inside this guide, you'll find details about the benefits available to you, along with tools & resources to help you make informed decisions for yourself and your family. I encourage you to take time to review your options carefully and choose what best aligns with your needs.

It is a privilege to support you, and we remain deeply committed to investing in a total rewards experience that helps you thrive at work and in life.

With appreciation,

Tammy Pettigrew
Chief People Officer



Eligibility

You are eligible for benefits if you averaged over 30 hours per week over a 12-month lookback period. You may also enroll your eligible dependents for coverage.

This includes the following:

- Your legal spouse or qualified domestic partner
- Children under the age of 26, regardless of student, dependency or marital status
- Children who are past the age of 26 and are fully dependent on you for support due to a mental or physical disability, and who are indicated as such on your federal tax return

QUALIFIED LIFE EVENTS

Generally, you may only change your benefit elections during the Open Enrollment period. However, since life happens, you also may change your benefit elections during the year if you experience a Qualified Life Event.

QUALIFIED LIFE EVENT		DOCUMENTATION NEEDED
Change in marital status	• Marriage • Divorce/Legal Separation • Death	• Copy of marriage certificate • Copy of divorce decree • Copy of death certificate
	• Birth or adoption • Stepchild • Death	• Copy of birth certificate or copy of legal adoption papers • Copy of birth certificate plus a copy of the marriage certificate between employee and spouse • Copy of death certificate
Change in employment	• Change in your eligibility status (i.e., full-time to part-time) • Change in spouse's benefits or employment status	• Notification of increase or reduction of hours that changes coverage status • Notification of spouse's employment status that results in a loss or gain of coverage

CHANGING BENEFITS AFTER ENROLLMENT

During the year, you cannot make changes to your medical, dental, vision or Health Savings Account unless you have a Qualified Life Event. If you do not contact Human Resources within 30 days of the Qualified Life Event, you will have to wait until the next annual Open Enrollment period to make changes (unless you experience another Qualified Life Event).



Scan the QR code
to learn more about
Qualified Life Events.



Our medical coverage provides you and your family the protection you need for everyday health issues or when the unexpected happens.

You can choose from either of the medical plans. Each medical plan offers:

- Comprehensive health care benefits
- In-network preventive care covered at 100%
- Coverage for eligible children up to age 26
- Prescription drug coverage



Scan the QR code to learn more about your medical plan options.

CHOOSE THE PLAN THAT'S RIGHT FOR YOU

The key difference between the plans is the amount of money you'll pay each pay period and when you need care. The plans have different:

- **Annual deductible amount** – the amount you pay each year for eligible in-network and out-of-network charges before the plan begins to pay
- **Out-of-pocket maximums** – the most you will pay each year for eligible network services including prescriptions
- **Copay and coinsurance** – money you pay toward the cost of covered services

SAVE WHEN YOU USE IN-NETWORK PROVIDERS

In-network providers offer the highest level of benefits and lower out-of-pocket costs. Network providers charge you reduced fees but providers outside the plan's network set their own rates, which means you may have to pay the difference if a provider's fees are above the Reasonable and Customary (R&C) limits.

MEDICAL PLAN COMPARISON

	BLUE CHOICE PPO HSA HIGH		BLUE CHOICE PPO HSA LOW	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
CALENDAR YEAR DEDUCTIBLE				
Individual	\$4,000	\$8,000	\$7,500	\$15,000
Family	\$8,000	\$16,000	\$15,000	\$30,000
CALENDAR YEAR OUT-OF-POCKET MAXIMUM (INCLUDES DEDUCTIBLE)				
Individual	\$4,000	Unlimited	\$7,500	Unlimited
Family	\$8000	Unlimited	\$15,000	Unlimited
	YOU PAY		YOU PAY	
COINSURANCE				
Preventive Care	\$0	30%	\$0*	30%
Primary Care Physician	\$0	30%	\$0*	30%
Specialist	\$0	30%	\$0*	30%
Urgent Care	\$0	30%	\$0*	30%
Emergency Room	\$0		\$0*	
PHARMACY				
RETAIL RX (UP TO 30-DAY SUPPLY)				
Tier 1	\$0	50%	\$0*	\$0* plus 50% coinsurance
Tier 2	\$0	50%	\$0*	\$0* plus 50% coinsurance
Tier 3	\$0	50%	\$0*	\$0* plus 50% coinsurance
Tier 4	\$0	50%	\$0*	\$0* plus 50% coinsurance
MAIL ORDER RX (UP TO 90-DAY SUPPLY)				
Tier 1	\$0	Not covered	\$0*	Not covered
Tier 2	\$0	Not covered	\$0*	Not covered
Tier 3	\$0	Not covered	\$0*	Not covered
Tier 4	\$0	Not covered	\$0*	Not covered
SPECIALTY RX (UP TO 30-DAY SUPPLY)				
Tier 5	\$0	50%	\$0*	\$0* plus 50% coinsurance
Tier 6	\$0	50%	\$0*	\$0* plus 50% coinsurance

* After deductible

Health Savings Account (HSA)

An HSA is a personal savings account you can use to pay for qualified out-of-pocket medical expenses with pretax dollars — now or in the future. Once you're enrolled in the HSA, you'll receive a debit card to help manage your HSA reimbursements. Your HSA can also be used for your expenses and those of your spouse and dependents, even if they are not covered by the HDHP medical plan.

HOW A HEALTH SAVINGS ACCOUNT (HSA) WORKS



Eligibility

You must be enrolled in a High Deductible Health Plan.



Your Contributions

You contribute on a pretax basis and can change how much you contribute from each paycheck up to the IRS maximum of \$4,400 if you enroll only yourself or \$8,750 if you enroll in family coverage. You can make an additional catch-up contribution if you are age 55.



The Company's Contribution

You will receive a one-time payment of \$100 at the beginning of the plan year.



Eligible Expenses

Medical, dental, vision and prescription drug expenses incurred by you and your eligible family members.



Using Your Account

Use the debit card linked to your HSA to cover eligible expenses or pay for expenses out of your own pocket and save your HSA money for future health care expenses.



Remaining Funds

Money left in your HSA at the end of the year will roll over to the next year — you'll never lose your HSA dollars. If you leave the Company or retire, you can take your HSA with you and continue to pay and save for future eligible health care expenses.

YOUR HSA IS ALWAYS YOURS – NO MATTER WHAT!

One of the best features of an HSA is that any money left in your HSA account at the end of the year rolls over so you can use it next year or sometime in the future. And if you leave the company or retire, your HSA goes with you!

THE TRIPLE TAX ADVANTAGE

1

You can use your HSA funds to cover qualified medical expenses, plus dental and vision expenses too — tax-free.

2

Unused funds grow and can earn interest over time — tax free.

3

You can save your HSA funds to use for your health care during retirement — tax free.



Scan the QR code to learn more about the HSA.

THE HDHP AND HSA: HOW THEY WORK TOGETHER

Together, your and the Company's contributions can cover a portion of your deductible and coinsurance.



Free In-Network Preventive Care

To emphasize the importance of wellness, preventive care is covered at 100% if you receive this care from in-network providers.



Deductible

You pay for your initial medical costs until you meet your annual deductible. This deductible is higher compared to the other medical plan, but offset by HSA contributions you and the Company may make.



Coinsurance

Once the deductible is met, you and the plan share any further health care costs until you meet the out-of-pocket maximum.

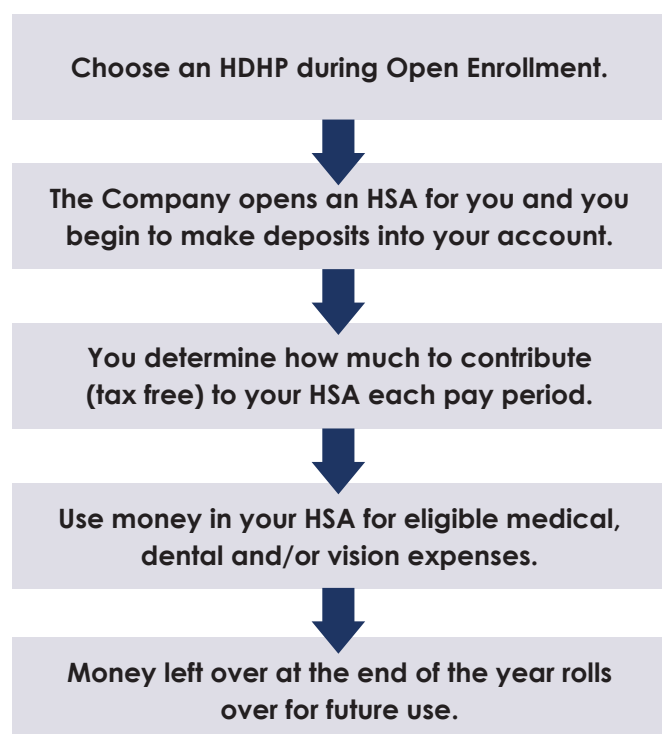


Out-of-Pocket Maximum

The plan limits the total amount you'll pay each year. Once you meet your out-of-pocket maximum, the plan pays 100% of your eligible, in-network expenses for the remainder of the year.

HOW THE HSA WORKS

Please note: Funds available for reimbursement are limited to the balance in your HSA.



Yolanda enrolls herself only in the HDHP with HSA. She chooses to use her HSA to pay for covered services — this reduces her out-of-pocket amount needed to meet her deductible before her health plan begins to pay.

YEAR 1 EXAMPLE	YEAR 2 EXAMPLE
The Company deposits \$200 in Yolanda's HSA	The Company deposits \$200 in Yolanda's HSA
She contributes \$3,000 for a total of \$3,200	She contributes \$3,000 for a total of \$3,200
	\$2,500 rolls over from last year for a total of \$5,700
She uses her HSA to pay \$700 of eligible expenses.	She uses her HSA to pay \$1,300 of eligible expenses.
She has \$2,500 in her HSA to roll over to next year!	She has \$4,400 in her HSA to roll over to next year!



Telemedicine and Advocacy

With freshbenies, you and your household have access to virtual care and personalized healthcare support through one easy-to-use membership. This benefit is available whether or not you enroll in a medical plan, giving you support when you need it without having to worry about plan enrollment or network restrictions.

Freshbenies is designed to make healthcare simpler and more affordable. From \$0 cost telemedicine visits to one-on-one help with medical bills and finding providers, freshbenies gives you tools to manage everyday healthcare needs with confidence. Services are available 24/7, so you can get support nights, weekends, and holidays when traditional offices may be closed.

Virtual care is ideal for common non-emergency conditions and can help you avoid unnecessary trips to urgent care or the emergency room. In many cases, you can receive care and have a prescription sent to your pharmacy if appropriate, all without leaving home.

WHY USE FRESHBENIES TELEMEDICINE

Freshbenies telemedicine gives you convenient access to licensed providers anytime you need care. You can use virtual urgent care for common issues such as cold and flu symptoms, sinus infections, pink eye, rashes, allergies, and other everyday health concerns.

This service allows you to:

- Access \$0 cost virtual urgent care visits
- Connect with licensed providers 24/7
- Receive prescriptions when clinically appropriate
- Get care for your entire household
- Save time and avoid waiting rooms
- Reduce out-of-pocket costs for basic care

Because virtual visits are available on demand, freshbenies can be especially helpful when symptoms come up outside regular office hours or when scheduling an in-person appointment would take days or weeks.

USING FRESHBENIES IS AS EASY AS ONE, TWO, THREE

Using freshbenies is simple and designed to fit into your routine. Once your membership is active, support is always within reach.

STEP 1 ACTIVATE YOUR MEMBERSHIP	STEP 2 REQUEST CARE OR SUPPORT	STEP 3 GET HELP
Start by creating your account so your services are ready when you need them. Visit freshbenies.com and click the "I'm new" banner at the top of the page to set up your login.	You can access services in the way that works best for you. Use the freshbenies app for on-the-go access, log in through the online portal, or call the number on your membership card to speak with a representative.	Receive care from a licensed provider or personalized assistance from the freshbenies advocacy team. Whether you need medical care, help understanding a bill, or support finding a provider, guidance is available.

MORE THAN TELEMEDICINE

Your freshbenies membership includes more than just virtual urgent care. It offers a broad range of services designed to support your health and help manage healthcare costs throughout the year.

HEALTHCARE ADVOCACY PLUS

Freshbenies advocates are available to help you navigate complex healthcare situations. You can ask for help finding highly rated doctors, comparing procedure pricing, understanding medical bills, resolving billing issues, coordinating care, and identifying cost-saving options.

BEHAVIORAL TELEHEALTH

You can access virtual mental health support with the freedom to choose your provider. This includes ongoing video visits with licensed professionals at significantly reduced costs compared to traditional in-person care. Initial psychiatrist intake visits are available at a \$0 or \$5 cost depending on services, even though typical intake visits can cost hundreds of dollars.

PRESCRIPTION SAVINGS

With freshbenies prescription savings tools, you can quickly compare prices and find lower-cost options for many brand-name and generic medications. The program helps you locate competitive pricing at more than 60,000 pharmacies nationwide.

DENTAL AND VISION SAVINGS

Freshbenies offers access to dental and vision savings programs that help reduce costs on routine and specialty care. You can save an average of 20–40% on dental services such as cleanings, root canals, braces, and whitening. Vision savings include discounts on exams, contacts, brand-name eyewear, and procedures like LASIK at thousands of providers nationwide.

BENIEWALLET

BenieWALLET gives you secure digital access to important cards and documents in one place. You can store and retrieve items such as insurance cards, pharmacy information, fitness memberships, and other essential documents anytime you need them.

Freshbenies is built to support you through everyday healthcare decisions, reduce confusion, and help control costs for you and your household. Whether you need care for a sudden illness, help understanding a medical bill, or support finding affordable services for your family, freshbenies is there to help you make informed decisions and feel more confident managing your health throughout the year.

Dental Plans

Your dental health is an important part of your overall wellness. Dental insurance gives you a reason to smile — it's affordable and covers preventive care (including regular checkups) as well as fillings, bridges, crowns, and other dental services.



Scan the QR code to learn more about your dental plan options.

When you enroll in the Dental plan, you may visit any dentist you choose, but in-network providers offer larger discounts and can file your claims for you. If you prefer to see an out-of-network provider, keep in mind, since they are not under a contract, they may charge you for any amount billed in excess of the negotiated discounted rate. The amount you pay for your coverage is based on who you cover and which plan you choose.

	BLUECARE DENTAL LOW		BLUECARE DENTAL HIGH	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
CALENDAR YEAR DEDUCTIBLE				
Individual	\$50	\$50	\$50	\$50
Family	\$150	\$150	\$150	\$150
CALENDAR YEAR OUT-OF-POCKET MAXIMUM				
Per Individual	\$1,000 per individual (Basic and Major Services combined)		\$1,500 per individual (Basic and Major Services combined)	
	YOU PAY		YOU PAY	
PREVENTIVE CARE				
Exams, Cleanings, X-rays, Fluoride Treatments, Space Maintainers, Sealants	\$0	\$0	\$0	\$0
BASIC SERVICES				
Fillings, Extractions, Oral Surgery, Endodontics, Periodontics, Emergency Exams	20%	20%	20%	20%
MAJOR PROCEDURES				
Crowns, Inlays/Onlays, Dentures and Bridgework, Repairs	50%	50%	50%	50%
ORTHODONTIA				
Adults and Children (up to 19th birthday)	Not covered		50% up to a lifetime maximum benefit of \$1,500 per individual; deductible waived	

Vision Plan

You may elect vision care from Blue Cross Blue Shield through the EyeMed Network, which provides affordable, quality vision care nationwide.



Scan the QR code
to learn more about
vision insurance.

Although vision care services and supplies are covered in-network and out-of-network, your benefits are generally greater when you use in-network providers. Your costs are based on the family members you choose to cover.

	PARTICIPATING PROVIDER	NON-PARTICIPATING PROVIDER
	YOU PAY	REIMBURSEMENT
COST		
Exam	\$10	Up to \$30
Materials (single, bifocal, trifocal, lenticular lenses)	\$25	Up to \$25
COVERED SERVICES – LENSES		
Single Lenses	\$25	Up to \$25
Bifocals	\$25	Up to \$40
Trifocals	\$25	Up to \$55
Lenticular	\$25	Up to \$55
Standard Progressive	\$90	Up to \$40
Premium Progressive Tiers 1–4	\$110 / \$120 / \$135 / \$90 + 20% off balance over \$120 allowance	Up to \$40
Frames	20% off balance over \$130 allowance	Up to \$65
LENS OPTIONS		
Tint (solid and gradient)	\$15	N/A
Scratch Resistant Coating	\$0	Up to \$5
Polycarbonate Lenses	\$0 kids; \$40 adults	Up to \$5 kids
Ultraviolet Coating	\$15	N/A
Standard Anti-reflective Coating	\$45	N/A
Premium Anti-reflective Coating Tiers 1–3	\$57 / \$68 / 20% discount on charge	N/A
High Index Lenses	20% off retail	N/A
Polarized Lenses	20% off retail	N/A
Photochromic / Transitions Plastic	\$75	N/A
COVERED SERVICES – CONTACTS IN LIEU OF LENSES*		
Contacts – Medically Necessary	\$0	Up to \$210
Contacts – Elective	Balance over \$130 allowance (15% off for conventional lenses)	Up to \$104
BENEFIT FREQUENCY		
Exams	Once every 12 months	Once every 12 months
Lenses	Once every 12 months	Once every 12 months
Frames	Once every 24 months	Once every 24 months
Contacts	Once every 12 months	Once every 12 months

* You can use both the Frame allowance and the Contact Lens allowance in the same plan year. To receive both benefits, purchase contact lenses first. After that, you can purchase glasses using the Frame allowance with the discounted price applied to spectacle lenses.



Voluntary Life and Accidental Death & Dismemberment (AD&D) Insurance

It's important to give some serious thought to what expenses and income needs your dependents would have if something happened to you. That is why the Company offers you Voluntary Life insurance.

Voluntary Life insurance for you, your spouse, and children can help protect your family during difficult times. Eligible employees may purchase Voluntary Life and AD&D for themselves and their family.

COVERAGE FOR	COVERAGE AVAILABLE
Employee	Increments of \$10,000 up to 5 times your salary to a maximum of \$500,000.
Spouse	Increments of \$5,000 up to \$150,000.
Child(ren)	Increments of \$1,000 to a maximum of \$10,000. \$1,000 for children from live birth to 6 months.

GUARANTEED ISSUE AND EVIDENCE OF INSURABILITY

You may purchase additional Voluntary Life and AD&D insurance for you and your spouse. Employees and spouses who elect coverage when first eligible can elect up to the \$180,000 Guaranteed Issue (GI) amount without Evidence of Insurability (EOI). If the amount requested is more than GI, you will need to provide EOI before the amount over GI becomes effective.



Scan the QR code to learn more about Life and AD&D coverages.

Accident Insurance



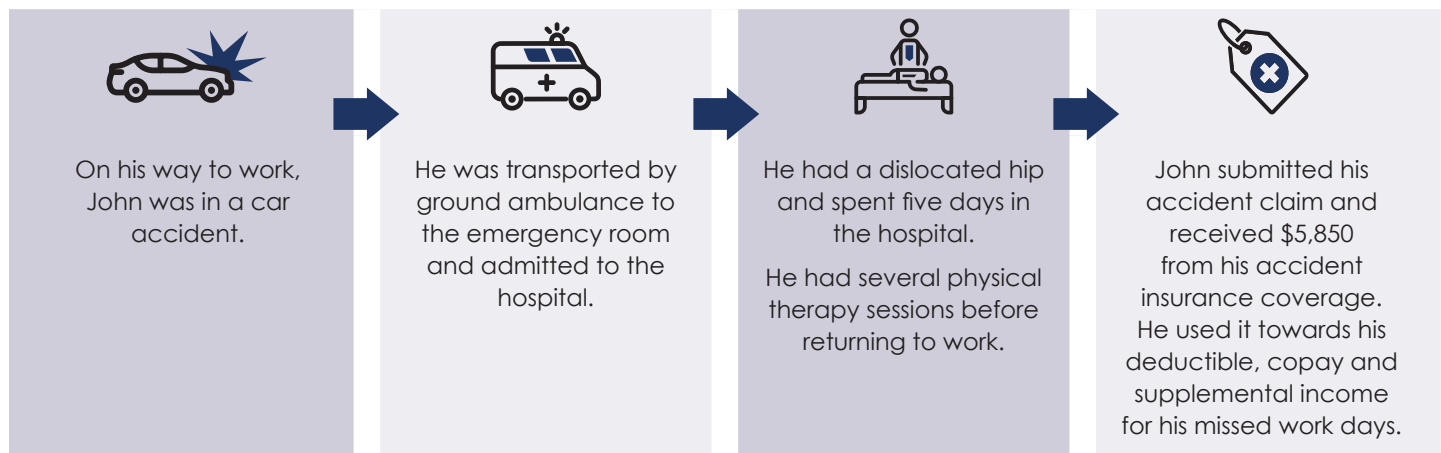
Scan the QR code to learn more about Accident Insurance.

Just as it sounds, Accident insurance can help you pay for costs you may incur after an accidental injury. This type of injury includes things such as a car accident, a fall while skiing or even a fall down the stairs at home. This benefit is paid regardless of any other insurance coverage you might have (including your medical coverage).

 Emergency Room Visits	 Medical Exams – including major diagnostic exams
 Hospital Stays	 Physical Therapy
 Fractures and Dislocations	 Transportation and Lodging – if you are away from home when the accident happens

HOW THE PLAN WORKS

Again, these benefits are in addition to any health insurance benefits you may receive. The benefit amount is paid directly to you. You can use this money in any way you like, including deductibles, child care, housecleaning, groceries, utilities, or any purpose that can help you meet your personal, financial or household needs. Below is an example.



JOHN'S ACCIDENT INSURANCE BENEFITS PAID A TOTAL OF : \$5,850

Ground Ambulance	\$300	MRI	\$150	Dislocated Hip	\$3,000
Emergency Room	\$150	Hospital Stay – Admission	\$1,000	Appliances	\$100
X-ray	\$50	Hospital Stay – Daily (5 days)	\$1,000	Physical Therapy (4 sessions)	\$100

Please refer to the benefit summary for details of this coverage.



Scan the QR code
to learn more about
Critical Illness Insurance.

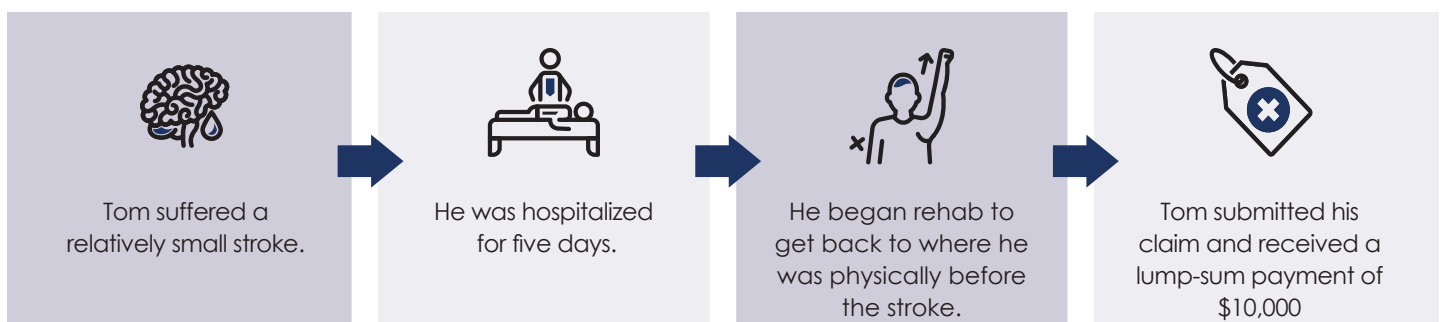
Critical Illness Insurance

Critical illnesses can have a huge impact on your life. A critical illness can keep you from working and can make it difficult to do simple, everyday things. Critical Illness insurance can help reduce your stress — financially and mentally — while you recover from your illness. These illnesses can include, but are not limited to, the following:

	Heart Attack		Alzheimer's Disease
	Multiple Sclerosis		Parkinson's Disease
	Stroke		Major Organ Failure

HOW THE PLAN WORKS

Critical Illness insurance pays a fixed one-time benefit amount if you are diagnosed with a covered disease or illness after your coverage effective date. You can use this money for any purpose you like. It can help pay for expenses not covered by your health care plan (such as your deductible or copays), lost income, child care, travel to and from treatment, home health care costs or any of your regular household expenses. Below is an example.



TOTAL CRITICAL ILLNESS BENEFIT PAID: \$10,000

Benefit Amount		Guaranteed Issue Amount
Employee	\$5,000, \$10,000, \$20,000	Up to \$20,000
Spouse	50% of employee amount	Up to \$10,000
Children	25% of employee amount	All Guaranteed Issue

Please refer to the benefit summary for details of this coverage.



Scan the QR code to learn more about Hospital Indemnity Insurance.

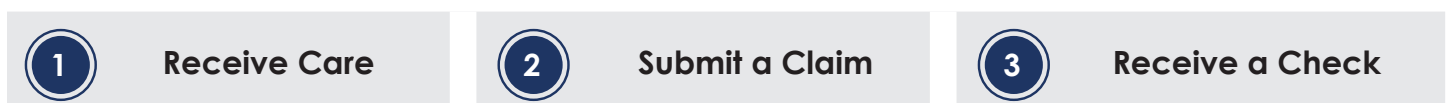
Hospital Indemnity Insurance

Hospital Indemnity insurance pays cash benefits directly to you if you are admitted to the hospital for a covered inpatient stay — no matter the reason.

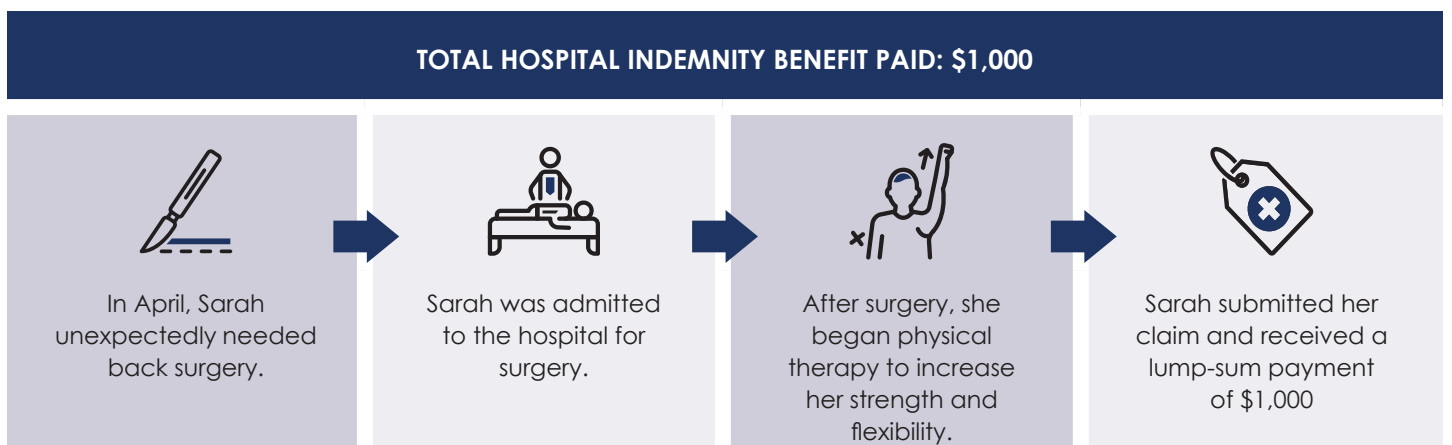
 Hospital Admission	 Surgical Care
 Hospital Confinement	 Medical Diagnostic and Imaging
 Hospital Intensive Care	 Transportation and Lodging

HOW THE PLAN WORKS

Simply complete a claim form and submit it with attached copies of your receipts for any covered items (see the plan you choose for details). You are then issued a check that you can use as you see fit. Benefits are paid in a lump sum directly to you, and amounts are fixed and determined by your policy, regardless of the amount of expenses incurred.



You can use the money to pay for everyday expenses or for health care expenses that aren't covered by your medical plan (for example, your deductible, copays and/or coinsurance). You can also use this payment to help with other expenses like transportation and meals for family members, help with child care, and other expenses you may have. For example:



This example is for illustrative purposes and does not reflect events experienced by an actual participant.



Additional Benefits

EMPLOYEE ASSISTANCE PROGRAM

Everyone needs a little help from time to time. That's why we offer you and your eligible family members access to licensed counselors through our Employee Assistance Program (EAP).

You can contact the EAP for help with the following:

- Stress
- Marital or family problems
- Anxiety and depression
- Substance abuse (alcohol and/or drugs)
- Financial issues
- Child care issues – including identifying schools, daycare, tutors, and more
- Aging parents
- Identity theft
- Anger, grief and loss
- Job stress, work conflicts

Through the EAP, you and your family can receive immediate support and guidance, as well as assessments and referrals for further services.

It's important to note that all EAP conversations are voluntary and strictly confidential. In addition, there's never a cost to you when you contact an EAP counselor; MSI pays the full cost. However, if you and your counselor determine that additional assistance is needed, you'll be referred to the most appropriate and affordable resource available.

MEDICAL TRAVEL ASSISTANCE

Unum travel assistance offers complementary services provided by Assist America where medically-certified personnel are available to help 24 hours a day, 365 days a year.

Whenever you travel 100 miles or more from home — to another country or just another city — be sure to pack your worldwide emergency travel assistance phone number. Travel assistance speaks your language, helping you locate hospitals, embassies and other “unexpected” travel destinations.

Use your travel assistance phone number to access:

- Referrals to Western-trained, English-speaking medical providers
- Passport/prescription replacement assistance
- Care and transport of unattended minor children
- Lost luggage assistance
- Emergency medical evacuation
- Transportation for a friend or family member to join a hospitalized patient traveling alone

Download the Assist America Mobile App for fast, convenient service, anywhere in the world.

Scan the QR codes to learn more about these benefits.



EAP



Medical Travel Assistance

BE WELL BENEFIT

Each year, you can earn a valuable incentive just for taking care of your health. And so can each of your covered family members.

With the Unum Be Well Benefit, you and other covered family members can receive a valuable incentive for important tests and screenings. Many of these tests are routinely performed, so it's easy to take advantage of this benefit.

COVERAGE	BENEFIT AMOUNT
Critical Illness	\$50
Accident Insurance	\$50
Hospital Insurance	\$50

BE WELL SCREENINGS

- Annual exams by a physician including sports physicals and well-child visits, dental and vision exams
- Cancer screenings including pap smear, and colonoscopy
- Cardiovascular function screenings
- Cholesterol and diabetes screenings
- Imaging studies, including chest X-ray, and mammography
- Immunizations including HPV, MMR, tetanus, and influenza



PET INSURANCE

Pets are family too. Through freshbenies, you have access to pet telehealth services and exclusive savings to help care for your dog or cat without unnecessary emergency visits or added stress.

Pet telehealth provides 24/7 access to veterinary support by phone, email, or chat for everyday questions and urgent concerns. You can get guidance on symptoms, behavior, nutrition, and next steps if in-person care is needed. The program also includes savings on common pet services and products to help reduce everyday costs.

LEGAL INSURANCE

Freshbenies offers legal support designed to help you manage everyday legal needs with confidence and lower costs. You have access to free and discounted legal services through a nationwide network of attorneys.

Services include consultations with attorneys, help with common legal matters, and access to a library of legal forms. When ongoing legal support is needed, discounted rates are available for additional services, helping reduce out-of-pocket legal expenses.

IDENTITY THEFT PROTECTION

Identity theft protection through freshbenies helps reduce the risk of fraud and provides support if your identity is compromised. Monitoring tools and resolution services are available to help protect your personal information and guide you through recovery if needed.

This benefit includes identity monitoring, alerts for suspicious activity, and access to specialists who can assist with credit inquiries, document replacement, and resolution support. Coverage extends to you and eligible dependents, adding an extra layer of protection for your household.

Benefit Costs

MSI pays the full cost of some of your benefits. For others, MSI and you share the cost, or you pay the full cost.

Pretax means the cost comes out of your pay before taxes are deducted. After-tax means the cost comes out of your pay after taxes are deducted. The chart below shows who pays for each benefit and the related tax treatment.

BENEFIT	WHO PAYS	TAX TREATMENT
Medical, Prescription	MSI/You	Pretax
Dental	You	Pretax
Vision	You	Pretax
Voluntary Life and Accidental Death & Dismemberment (AD&D) Insurance	You	After-tax
Voluntary Disability Coverage	You	After-tax
Employee Assistance Plan	MSI	N/A
Additional Voluntary Benefits	You/MSI	After-tax
Health Savings Account (HSA)	You/MSI	Pretax



EMPLOYEE BENEFIT COSTS

Your paycheck is only one part of your total rewards. In addition to your pay, MSI helps cover a significant portion of the cost of your benefits, including medical, dental, and vision coverage. This support reduces what you pay each pay period and adds meaningful value beyond your salary.

MEDICAL		
BI-WEEKLY RATES	BLUE CHOICE PPO HSA HIGH	BLUE CHOICE PPO HSA LOW
Employee Only	\$60.33	\$51.37
Employee + Spouse	\$325.53	\$89.15
Employee + Child(ren)	\$153.61	\$72.80
Employee + Family	\$397.39	\$131.99

DENTAL		
BI-WEEKLY RATES	LOW PLAN	HIGH PLAN
Employee Only	\$9.78	\$15.91
Employee + Spouse	\$19.54	\$31.81
Employee + Child(ren)	\$23.97	\$39.03
Employee + Family	\$36.99	\$60.24

VISION	
BI-WEEKLY RATES	VISION PLAN
Employee Only	\$2.76
Employee + Spouse	\$5.23
Employee + Child(ren)	\$5.51
Employee + Family	\$8.10

VOLUNTARY LIFE		
MONTHLY RATES (PER \$1,000 OF COVERAGE)		
AGE	EMPLOYEE RATE	SPOUSE RATE
<25	\$0.08	\$0.08
25-29	\$0.08	\$0.08
30-34	\$0.10	\$0.10
35-39	\$0.13	\$0.13
40-44	\$0.19	\$0.19
45-49	\$0.29	\$0.29
50-54	\$0.46	\$0.46
55-59	\$0.70	\$0.70
60-64	\$1.09	\$1.09
65-69	\$1.88	\$1.88
70-74	\$3.35	\$3.35
75+	\$3.35	\$3.35
Child Life Rate	\$0.200*	
Employee and Spouse AD&D Rate	\$0.031	
Child AD&D Rate	\$0.031*	

VOLUNTARY DISABILITY
Rates will be auto calculated in Employee Navigator based on your age.

*Note: The premium paid for child coverage is based on the cost of coverage for one child, regardless of how many children you have.



**ACCIDENT INSURANCE****BI-WEEKLY RATES**

Employee Only	\$2.02
Employee + Spouse	\$3.73
Employee + Child(ren)	\$5.48
Employee + Family	\$7.20

HOSPITAL INDEMNITY INSURANCE**BI-WEEKLY RATES**

Employee Only	\$5.36
Employee + Spouse	\$12.14
Employee + Child(ren)	\$10.64
Employee + Family	\$17.42

CRITICAL ILLNESS INSURANCE MONTHLY RATES

AGE	EMPLOYEE + CHILD(REN)	SPOUSE
0-24	\$0.34	\$0.47
25-29	\$0.40	\$0.52
30-34	\$0.48	\$0.60
35-39	\$0.62	\$0.74
40-44	\$0.87	\$1.00
45-49	\$1.26	\$1.40
50-54	\$1.63	\$1.77
55-59	\$2.18	\$2.32
60-64	\$3.28	\$3.42
65-69	\$4.42	\$4.56
70-74	\$6.06	\$6.20
75-79	\$8.56	\$8.70
80-84	\$10.03	\$10.15



This brochure highlights the main features of the MSI Employee Benefits Program. It does not include all plan rules, details, limitations and exclusions. The terms of your benefit plans are governed by legal documents, including insurance contracts. Should there be an inconsistency between this brochure and the legal plan documents, the plan documents are the final authority. MSI reserves the right to change or discontinue its employee benefits plans at any time.

