Help Group

2026 | BENEFITS GUIDE

Plan Year January 1, 2026 – December 31, 2026

Contents

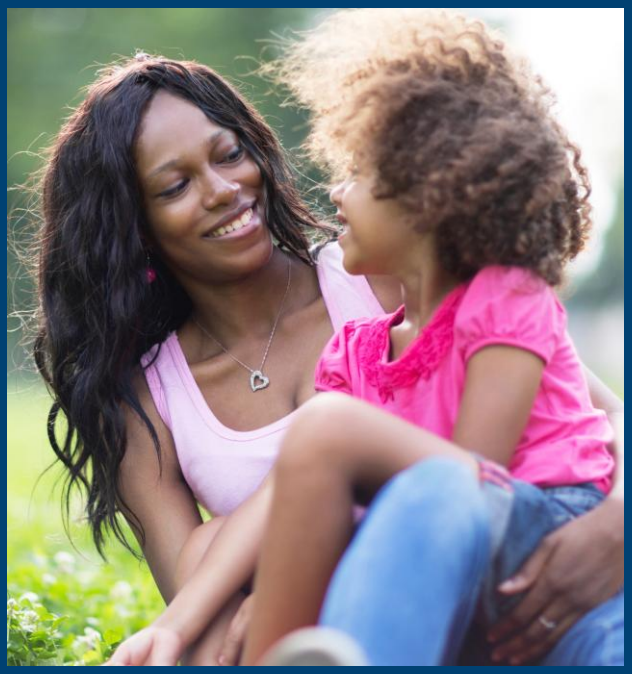
Use this guide as a tool to help you make the best benefits decisions for you and your family. The information inside this guide can help you review your health coverage options, discover tax savings opportunities, and learn about {voluntary benefits}offerings.

Please refer to plan documents for details, including important coverage exclusions and limitations. If there are any discrepancies between this benefits summary and plan documents, the plan documents will govern.

Welcome to Your Benefits

At The Help Group, you are a vital part of our success. We have chosen benefits we believe will support your physical, emotional, and financial wellbeing.

Everyone's needs are different — that's why we give you options to choose the right plan for you at the best price. Take a look at the benefits offered throughout this guide to make the best decisions for you and your family.



EMPLOYEE MONTHLY CONTRIBUTIONS

Premiums for medical, dental and vision are deducted on a pre-tax basis, reducing your taxable income and increasing your take-home pay!.

	Less than 15 Years of Services			15+ Years of Service		
	Employee Only	Employee + 1 Dep	Employee +2 or more Dep	Employee Only	Employee + 1 Dep	Employee + 2 or more Dep
Harmony	$0.00	$298	$578	$0.00	$0.00	$0.00
Alliance	$0.00	$470	$692	$0.00	$0.00	$0.00
Advantage	$50	$560	$850	$27.99	$216.18	$378.22
Signature Value	$275	$925	$1,500	$141.95	$479.11	$748.34
Select Plus PPO HSA	$1,100	$2,850	$3,900	N/A	N/A	N/A
DHMO	$0.00	$9.62	$20.22	$0.00	$0.00	$0.00
Dental PPO	$32.72	$72.39	$122.83	$10.39	$48.17	$96.21
Vision Plan	$0.00	$7.17	$11.96	$0.00	$0.00	$0.00

Monthly Cost	Employee Only	Employee & Spouse	Employee & Children	Full Family
Accident Insurance	$9.26	$14.79	$18.19	$28.15
Hospital Indemnity	$14.85	$26.15	$25.71	$39.43

- ❑ Employee + 1 Dependent = Employee with Spouse, with single child or with Domestic Partner
- ❑ Employee + Family = Employee & Spouse or Domestic Partner, AND one or more children
- ❑ Employee + Spouse = Employee with Spouse or with Domestic Partner
- ❑ Employee + Children = Employee with one or more children
- ❑ Employee + Family = Employee & Spouse or Domestic Partner, AND one or more children

Important Contacts

If you have any questions regarding your benefits or the material contained in this guide, please contact The Help Group human resources or the individual carriers listed below.

Coverage	Carrier	Policy Number	Phone	Website or email
Medical HMO Plans	United Healthcare	▪ Harmony-369419 ▪ Alliance-369413 ▪ Advantage-369416 ▪ Signature Value-369422	800-624-8822	www.myuhc.com
Medical PPO Plan	United Healthcare	(Main UHC #) 936999	866-314-0335	www.myuhc.com
Virtual Care (Telehealth)	United Healthcare	936999	855-615-8335	www.Myuhc.com/virtualvisits
Flexible Spending Accounts (HCFSA/DCFSA)	WEX Health	16808	866-451-3399	www.wexinc.com/contact/health/
Dental (DHMO & PPO)	United Healthcare	936999	877-816-3596	www.myuhc.com
Vision	United Healthcare	936999	800-638-3120	www.myuhc.com/vision
Life/AD&D, Accident Insurance, Hospital Indemnity & Critical Illness	United Healthcare	373601	888-299-2070	www.myuhc.com
Disability Insurance (Short-Term & Long-Term)	Lincoln Financial	▪ Std 100598987 ▪ Ltd 400003002	800-423-2765	www.LincolnFinancial.com Ref ID: HELPGROUP
Employee Assistance Program (EAP)	United Healthcare	N/A	877-660-3806	www.liveandworkwell.com Access Code: FP3EAP
Retirement 403(b)	Fidelity Investments	N/A	800-343-0860	www.netbenefits.com/atwork
Section 529 College Savings Plan	Schwab	Advise employee of The Help Group!	888-903-3863	www.schwab.com/529
Pet Insurance	Nationwide	Advise employee of The Help Group!	877-738-78-74	https://benefits.petinsurance.com/the-help-group
Credit Union	Premier America Credit Union	Ask for Hailee Zacariaz or Martin Solorio	818-260-9300	www.premier.org
Human Resources	Marilou Varias or Sergio Zepeda		818-779-5214	mvarias@thehelpgroup.org szepeda@thehelpgroup.org

Eligibility

Employee Eligibility

- You are eligible to enroll in benefits if you are a regular, full-time employee working a minimum of 30 hours per week.
- If you are a new hire, you have 30 days from your date of hire to enroll in benefits. Benefits begin on the first of the month following 30 days of continuous employment.

You may be required to provide supporting documentation, such as a marriage certificate or birth certificate to verify dependent eligibility.

Dependent Eligibility

Your eligible dependents can also be enrolled in certain benefits. Eligible dependents include:

- Legal spouse or registered domestic partner (with signed Affidavit), who is not eligible for coverage under their employer's medical plan.
- Children up to age 26, including natural children, stepchildren, legally adopted children, children for whom you are the legal guardian, foster children, and children for whom you are legally responsible to provide health coverage under a Qualified Medical Child Support Order (QMCSO).
- Disabled children over age 26 if unmarried, incapable of self-support, dependent on you for primary support, and the disability occurred before the age of 26.

Note: Children may only be covered as a dependent of one parent, if both you and your spouse or domestic partner are employed by The Help Group.

Enrollment

The choices you make during this plan year will remain in place through December 31, 2026.
To enroll you will need to make your benefit elections using ADP. Access the Employee Self-Service website or mobile app; and use your existing ADP username and password to complete your enrollment. If you do not sign up for benefits during your initial eligibility period, you be insured for the employer paid Life/AD&D only; and you will not be able to elect coverage until the next open enrollment period unless you experience a qualifying life event and submit a timely election change. Click the QR code to access a pre-recorded benefits presentation.

You can only sign up for benefits or change your benefits at the following times:

- Within 30 days of date of hire.
- During the annual benefits open enrollment period.
- Within 30 days of a qualifying life event.

Changing Your Benefits

If you experience a qualifying life event, you can make mid-year changes to your benefit elections (in line with the type of life event you experience).

Changes must be made within 30 days of the event date. Examples include, but are not limited to, the following:

- Change in marital status (marriage, divorce)
- Death of spouse or dependent
- Add a dependent child through birth, adoption, placement for adoption, foster child placement, court order, stepchildren
- Spouse terminating/obtaining new employment
- Spouse switching employment status (full-time to part-time or vice versa)
- Involuntary loss of other group benefit coverage
- Gain of other qualified coverage (i.e., coverage with spouse or parent's employer health plan)
- Eligible dependent child ages off the plan (no longer eligible due to age requirement).
- Receipt of a judgment, decree or order to provide coverage

You must notify Human Resources within 30 days of the qualifying event to make changes to your coverage. You will need to provide documentation of the event, such as a marriage license, divorce decree, or birth certificate. Benefit changes must be consistent with the qualifying event.

Self-enroll in your benefits.
Review the available plan options and log into ADP at **https://workforcenow.adp.com** . Navigate to Myself > Benefits > Enrollments and click "Enroll Now" next to the appropriate event.

Have important documentation ready.
You will be asked questions regarding you and your dependents, including birth dates, Social Security numbers, and phone numbers.

Compare your plan options and choose the best plans for you and your family.
Once you have finalized your selections, print your confirmation statement or send it to yourself via email and keep for your records.

United Healthcare Medical

The Help Group offers 5 comprehensive medical plan options.

1. Signature Value **HARMONY** HMO: **https://www.whyuhc.com/svharmonysocal**
2. Signature Value **ALLIANCE** HMO: **https://www.whyuhc.com/casvalliance**
3. Signature Value **ADVANTAGE** HMO: **https://www.whyuhc.com/casvadvantage**
4. **Signature Value** (full network) HMO: **https://www.whyuhc.com/casignaturevalue**
5. Select Plus PPO: **www.whyuhc.com/selectplushsa**

- Family members must be covered on the same plan you select, however, not required to select the same PCP.
- Contact members services for PCP changes within your plan's network.

Overview of Benefits	*HMO Options	Select Plus PPO – (HSA-HDHP)
Network Access	Signature Value HARMONY Signature Value ADVANTAGE Signature Value ALLIANCE Signature Value (Full HMO Network)	Select Plus
In- and Out of Network Benefits	In-network benefits only	In- and out-of-network benefits
Plan Description	You must select a primary care physician (PCP) within your plan's Network Access. PCP selection includes Medical Group selection, and Medical Groups determine your access to urgent care, specialists (including OBGYN), and hospitals. All non-emergency care must be within the HMO Medical Group — and under your PCP's direction — for the plan to pay (including referrals required for specialist access).	This plan has a highest annual deductible; however, you can fund a health savings account to help you save money on your health care expenses and use it for future investments/savings opportunities. You will make the most of your benefits when using an in-network provider.
How You Pay for Care	You pay copays for common covered services such as primary/specialist office visits, urgent care and prescription. You pay coinsurance or cost share for more complex covered services such as inpatient hospitalization; all not to exceed the calendar year out-of-pocket max.	You pay the full discounted rate for all in-network services, including office visits, hospital services, and prescription drugs until you meet your annual deductible. Thereafter, you pay coinsurance or cost share, but not to exceed the calendar year out-of-pocket max.
Pay for Health Care with Pre-Tax Dollars	You may use pre-tax dollars if you participate in the Health Care FSA.	You can fund a health savings account or set aside pre-tax dollars in the Health Care FSA.
Coinsurance		
In-network	20% or 30%, depending on which HMO Plan is selected.	20%
Out-of-Network	N/A	50%

*All four of the HMO options are part of the Signature Value HMO family and each plan has different levels of coverage. The smaller the network, the lower the cost of the plan. Two options are available at "no cost" for employee only coverage (Harmony & Alliance). Especially if you are unfamiliar with the Signature Value Network options, it's highly recommended to start your PCP search beginning from the smallest network to the largest. The larger the network options do not necessarily mean all the providers in the smaller networks are included.

United HealthCare – How to Find a Provider

Using network providers may help lower your health care costs and save you money. In fact, United Healthcare HMO medical plans require a Primary Care Provider (PCP) selection.

Signature Value HMO Search

Access the four Signature Value HMO networks using your computer or smartphone without having to register.

- Go to **www.myuhc.com** and click on "Find a Provider" and follow the prompts (including the need to sometimes pressing "Continue" after reading posted important notices).
- Click "Medical Directory"
- Click "Employer & Individual Plans"
- At ~ What type of plan are you looking for? Scroll down and select "Signature Value Plans"
- Click on CA as your State
- Select one of the network/plan options (listed above)
- Enter your 5-digit ZIP Code or City and click the system city/zip combination
- You will be able to search for specific People Places Services & Treatments or Care by Condition; select People followed by selecting Primary Care to search for a PCP in your area.

Important: Not all doctors can be a PCP.

You can select "All Primary Care Providers" to avoid confusion. It is recommended to search all of the network options beginning with the smallest to the largest.

Select Plus PPO Search

IF YOU ARE NOT YET REGISTERED AS A MEMBER AND LOOKING FOR PROVIDERS IN THE UHC SELECT NETWORK:

1. Log in to **www.whyuhc.com/selectplushsa**
2. Select Find a Doctor or Facility under the Benefits tab and use "Select Plus" plan/network
3. On the next screen, enter a doctor name, facility name, specialty or condition; you can even search by distance, gender, language and more

IF YOU ARE A REGISTERED PLAN MEMBER LOOKING FOR PROVIDERS IN THE UHC SELECT PLUS NETWORK:

1. Log in to **www.myuhc.com**
2. Select Find a Doctor
3. Select Find a Provider
4. On the next screen, enter a doctor name, facility name, specialty or condition; you can even search by distance, gender, language and more

Important:

PPO members are responsible for confirming network status for ALL "non-emergency" access to care, including when you have a referral.

SIGNATURE VALUE HMO OPTIONS in order of network size and cost to elect (smallest to largest); network names appear online as follows:

- Signature Value HARMONY HMO: https://www.whyuhc.com/svharmonysocal
- Signature Value ALLIANCE HMO: https://www.whyuhc.com/casvalliance
- Signature Value ADVANTAGE HMO: https://www.whyuhc.com/casvadvantage
- Signature Value HMO: https://www.whyuhc.com/casignaturevalue

United Healthcare HMO

HMO plans offer in-network benefits only. Services from out-of-network providers, except for emergencies, are not covered. **These two options are available at "no cost" for employee only coverage.**

HMO Network Name:	Signature Value HARMONY	Signature Value ALLIANCE
	In Network Only	In Network Only
Calendar Year Deductible		
Individual / Family	None	None
Calendar Year Out-of-Pocket Maximum (includes Copays, Deductible & Coinsurance)		
Individual	$3,000	$4,000
Family	$6,000	$8,000
Covered Services	**You Pay**	**You Pay**
Preventive Care (based on age & gender)	No charge	No charge
Primary Care Physician	$20 copay	$25 copay
Specialist (referral required)	$40 copay	$50 copay
Virtual Care	No cost	No cost
Diagnostic Lab/X-Ray	$20 copay / test	$25 copay / test
Complex Diagnostic (MRI, CT, PET)	$150 copay / test	$150 copay / test
Inpatient Hospital	*20% coinsurance	*30% coinsurance
Outpatient Surgery	*20% coinsurance	*30% coinsurance
Urgent Care (local Medical Group / Out-of-area)	$20 copay / $50 copay	$25 copay / $50 copay
Emergency Room	$250 copay / visit	$300 copay / visit
Prescription Drugs — Retail (up to 30-day supply)		
Prescription Deductible	N/A	$100 Individual / $200 Family
Tier 1	$10 copay	$10 copay
Tier 2	$35 copay	$35 copay
Tier 3	$70 copay	$70 copay
Tier 4 (Specialty Drugs)	Included in Tiers 1-3	$250 copay
Mail Order (up to 90-day supply)	2.5x retail copay	2.5x retail copay

*After Deductible

How much does this plan cost?

MONTHLY COST	SV HARMONY Less than 15 Yrs	SV HARMONY 15+ Years of Service	SV ALLIANCE Less than 15 Yrs	SV ALLIANCE 15+ Years of Service
Employee Only	$0.00	$0.00	$0.00	$0.00
Employee + 1 Dependent (Spouse, Domestic Partner or 1 Child)	$298	$0.00	$470	$0.00
Employee + 2 or more Dependents (Spouse, Domestic Partner AND Children)	$578	$0.00	$692	$0.00

United Healthcare HMO

HMO plans offer in-network benefits only. Services from out-of-network providers, except for emergencies, are not covered. **These two HMO options have larger networks and will cost more when elected.**

HMO Network Name:	Signature Value ADVANTAGE	Signature Value HMO (Full)
	In Network Only	In Network Only
Calendar Year Deductible		
Individual / Family	None	None
Calendar Year Out-of-Pocket Maximum (includes Copays, Deductible & Coinsurance)		
Individual	$4,000	$3,500
Family	$8,000	$7,000
Covered Services	**You Pay**	**You Pay**
Preventive Care (based on age & gender)	No charge	No charge
Primary Care Physician	$30 copay	$30 copay
Specialist (referral required)	$60 copay	$60 copay
Virtual Care	No cost	No cost
Diagnostic Lab/X-Ray	$25 copay / test	$25 copay / test
Complex Diagnostic (MRI, CT, PET)	$150 copay / test	$150 copay / test
Inpatient Hospital	*30% coinsurance	$750 copay / day (x3 max)
Outpatient Surgery	*30% coinsurance	$375 copay/ admit
Urgent Care (local Medical Group / Out-of-area)	$30 copay / $50 copay	$30 copay / $50 copay
Emergency Room	*30% coinsurance	$300 copay / visit
Prescription Drugs — Retail (up to 30-day supply)		
Prescription Deductible	$100 Individual / $200 Family	$100 Individual / $200 Family
Tier 1	$10 copay	$10 copay
Tier 2	$35 copay	$35 copay
Tier 3	$70 copay	$70 copay
Tier 4 (Specialty Drugs)	$250 copay	$250 copay
Mail Order (up to 90-day supply)	2.5x retail copay	2.5x retail copay

*After Deductible

How much does this plan cost?

MONTHLY COST	SV ADVANTAGE Less than 15 Yrs	SV ADVANTAGE 15+ years of Service	SV HMO-Full HMO Less than 15 Yrs	SV HMO-Full HMO 15+ years of Service
Employee Only	$50	$27.99	$275	$141.95
Employee + 1 Dependent (Spouse, Domestic Partner or 1 Child)	$560	$216.18	$925	$479.11
Employee + 2 or more Dependents (Spouse, Domestic Partner AND Children)	$850	$378.22	$1,500	$748.34

United Healthcare High-Deductible Health Plan

The high-deductible health plan (HDHP) gives you the option to fund a health savings account (HSA) which allows you to save and pay for qualified health care expenses. If you have any questions regarding Health Savings Account access, please contact Human Resources.

	Select Plus PPO (HSA-HDHP)	
	In Network	Out of Network
Calendar Year Deductible		
Individual / Family	$4,000 / $8,000	$8,000 / $16,000
Calendar Year Out-of-Pocket Maximum (includes Deductible, Coinsurance and Copays)		
Individual	$6,000 / $12,000	$12,000 / $24,000
***Covered Services**	**You Pay**	**You Pay**
Preventive Care (based on age & gender)	No Charge	NOT COVERED
Primary Care Physician	*20% coinsurance	*50% coinsurance
Specialist	*20% coinsurance	*50% coinsurance
Virtual Care	*20% coinsurance	*50% coinsurance
Diagnostic Lab	*20% coinsurance	NOT COVERED
Diagnostic X-Ray	*20% coinsurance	*50% coinsurance
Complex Diagnostic (MRI, CT, PET)	*20% coinsurance	*50% coinsurance
Inpatient Hospital	*20% coinsurance	*50% coinsurance
Outpatient Surgery	*20% coinsurance	*50% coinsurance
Urgent Care	*20% coinsurance	*50% coinsurance
Emergency Room	*20% coinsurance	
***Prescription Drugs — Retail (up to 30-day supply)**		
Prescription Deductible	Medical Plan Deductible applies before copays are available	Medical Plan Deductible applies before copays are available
Tier 1	$5 copay	$5 copay
Tier 2	$35 copay	$35 copay
Tier 3	$75 copay	$75 copay
Tier 4 (Specialty Drugs)	$250 copay	$250 copay
Mail Order (up to 90-day supply)	2.5 x retail copay	NOT COVERED

*After Deductible, unless otherwise noted in the list of covered services.

How much does this plan cost?

MONTHLY COST	HSA Select Plus / PPO - HDHP Less than 15 Yrs	HSA Select Plus / PPO - HDHP 15+ years of Service
Employee Only	$1,100	N/A
Employee + 1 Dependent (Spouse, Domestic Partner or 1 Child)	$2,850	N/A
Employee + 2 or more Dependents (Spouse, Domestic Partner AND Children)	$3,900	N/A

Know Where to Go For Care

Where you go for medical services can make a big difference in how much you pay and how long you wait to see a health care provider.

Is your medical situation minor or urgent.

It's minor.

Is your primary care doctor available?

No

Virtual Care

24/7/365 via video or phone

- Allergies
- Earaches
- Minor health issues (headaches,
- nausea, cold and flu symptoms)
- Sinus pain
- Skin rashes
- UTIs and pinkeye

$

Yes

Primary Care Doctor

Weekdays

- Changes to medications
- Minor health issues (migraines, cold and flu treatment, etc.)
- Ongoing care for chronic conditions
- Treatment for depression/anxiety

$$

It's urgent.

Do you have a life-or limb threatening condition?

No

Urgent Care

Usually open every day, evenings, and holidays

- Changes to medications
- Minor health issues (migraines, cold and flu treatment, etc.)
- Ongoing care for chronic conditions
- Treatment for depression/anxiety

$$$

Yes

Emergency Room

24/7/365

- Chest pain
- Life-threatening allergic reactions
- Loss of consciousness
- Major injury
- Severe asthma
- Significant blood loss
- **Most expensive** place to access care

$$$$

Find a Network Provider - Finding an in-network provider near you is easy. Visit **www.myuhc.com** or call HMO Member Services - 800-624-8822 / or Select Plus PPO HSA/HDHP Member Services – 866-314-0335.

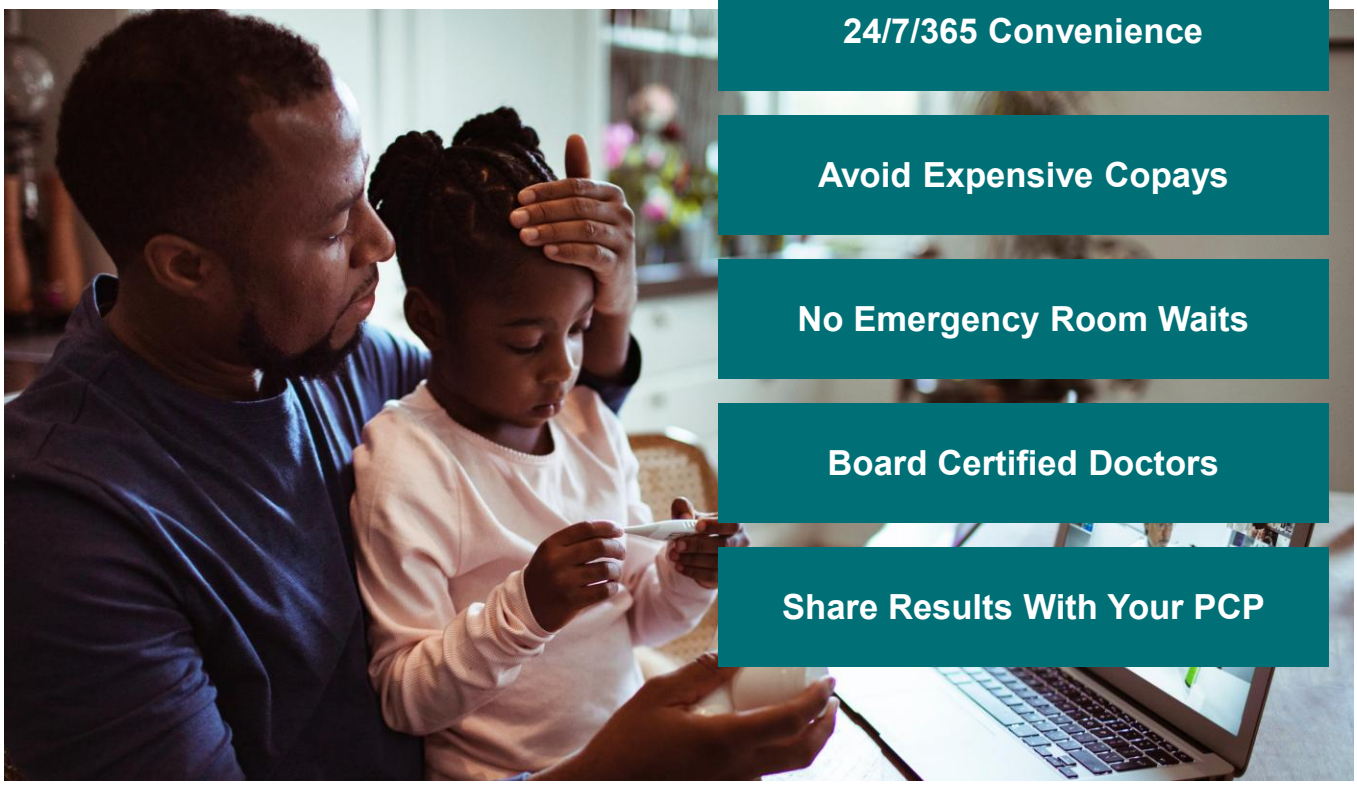
- You can also scan the code to download the app and register.

*Virtual Care

United Healthcare | www.myuhc.com/virtualcare | 855-615-8335

Get cost-effective, convenient care when you don't feel well and are unable to see your primary care provider (PCP).

Virtual care brings the doctor to you — including on nights, weekends and holidays. One-time registration required (same information you share each time to visit your doctor, urgent care or hospital)!



- **24/7/365 Convenience**
- **Avoid Expensive Copays**
- **No Emergency Room Waits**
- **Board Certified Doctors**
- **Share Results With Your PCP**

Common Health Issues Virtual Care Can Treat

Doctors can diagnose many health issues like cold and flu symptoms, allergies, rash, skin problems and much more! Prescriptions and follow-up care can be ordered, if necessary.

Pain Management

- Abdominal pain/cramps
- Animal/insect bites
- Backache
- Dizziness
- Headaches/migraines
- Rash (poison ivy/oak)
- Sprains/muscle strains

Common Illnesses

- Bronchitis
- Cold and flu symptoms
- Eye infection
- Laryngitis
- Respiratory infection
- Sore throat
- Strep

Pain Management

- Allergies
- Asthma
- Blood pressure issues
- Sinusitis

*Preventive Care

Getting a regular preventive exam can help you stay healthy, catch issues early, and even save your life.

Best of all, in-network preventive care is covered at no cost to you when you enroll in a medical plan.

Identify health issues before they become a problem.

Catching issues early can mean care is more manageable, cost-efficient, and potentially more effective.

Improve your long-term health.

A preventive exam can help your doctor manage any chronic conditions and pinpoint ways to improve your overall wellbeing.

Keep your health on track.

Check with your doctor about specific exams, vaccinations, and screenings that are right for your age and gender.

Examples of Covered Preventive Services

Health Screenings	Routine Vaccines	Well Exams (Baby, child, person, and woman)
• Blood glucose and type 2 diabetes • Cardiovascular or colorectal cancer • Mammogram • Cervical cancer and HPV • Cholesterol and lipid disorders • Colon, prostate, and lung cancer • STI and STDs • Hepatitis B and C	• DTaP, Tdap, Td • Haemophilus influenzae type b conjugate (Hib) • Hepatitis A and B • Human papillomavirus (HPV) • Influenza vaccine • Measles, mumps, and rubella (MMR) • Meningococcal (meningitis) and pneumococcal (pneumonia) • Poliovirus (IPV), Rotavirus (RV), Varicella (chickenpox), and shingles	• Height, weight, and head circumference • Psychosocial and behavioral assessment • BMI and blood pressure • History and risk reduction

*UHC REWARDS PROGRAM

United Healthcare | www.myuhc.com | Customer Service: 866-230-2505

Good news — your health plan comes with a way to earn up to $300. United Healthcare Rewards is included in your health plan at no additional cost.

There's so much good to get

With UHC Rewards, a variety of actions — including things you may already be doing, like tracking your steps or sleep — lead to rewards. The activities you go for are up to you, and the same goes for ways to spend your earnings. ***Here are just a few of the ways you can earn:***

Earn up to

$300

Visit UHC Rewards for the full list of rewardable activities that are available to you — and look for new ways of earning rewards to be added throughout the year.

- **$25 for connecting a tracker**
- **$15 for taking a health survey**
- **$25 for getting an annual checkup**
- **$50 for getting a biometric screening**

Your health

Get in on an experience that's designed to help inspire healthier habits

Your goals

Personalize how you earn by choosing the activities that are right for you

Your rewards

Earn up to $300 for completing rewardable activities

There are 2 ways to get started

On the UnitedHealthcare® app

- Scan this code to download the app
- Sign in or register
- Select UHC Rewards
- Activate UHC Rewards and start earning
- Though not required, connect a tracker and get access to even more reward activities

On myuhc.com®

- Sign in or register
- Select UHC Rewards
- Activate UHC Rewards
- Choose reward activities that inspire you — and start earning

*UHC One-pass

United Healthcare | www.myuhc.com | Customer Service: 866-230-2505

Rediscover your passion for health

With One Pass Select®, we're on a mission to make fitness engaging for everyone. One Pass Select can help you reach your fitness goals while finding new passions along the way. Find a routine that's right for you whether you work out at home or at the gym. Choose a membership tier that fits your lifestyle and provides everything you need for whole body health in one easy, affordable plan You and your eligible family members (18+) can get started with One Pass Select when you activate United Healthcare Rewards. Plus, you can use your earnings to help pay for your One Pass Select.

Multiple fitness location access.

- NO waiting period
- Simply select the option that works best for your needs and begin accessing the fitness locations included in your network (Digital Only, Classic, Standard, Premium or Elite).
- Membership is instant, and you will be charged for the full current calendar month on the day you sign up (One Pass Select does not offer proration).

Select between 5 categories below:

Category	Digital	Classic	Standard	Premium	Elite
Monthly fee	$10	$29	$64	$99	$144
One-time enrollment fee	$10	$29	$29	$29	$29
Gym network size		11,000+	13,000+	16,000+	18,000+
Premium network			✓	✓	✓
Multi-location access		✓	✓	✓	✓
Digital classes	23,000+	23,000+	23,000+	23,000+	23,000+
On-demand	✓	✓	✓	✓	✓
Livestreaming	✓	✓	✓	✓	✓
Workout builder	✓	✓	✓	✓	✓
Family memberships*	✓	✓	✓	✓	✓
Upgrade/downgrade	✓	✓	✓	✓	✓
Cancel within 30 days	✓	✓	✓	✓	✓

To get started:

1. Scan this code to download the UnitedHealthcare® app
2. Sign in or register
3. Select UHC Rewards
4. Select Redeem rewards to access One Pass Select

*Reward yourself with an Apple Watch

United Healthcare | www.myuhc.com | Customer Service: 866-230-2505

With UnitedHealthcare Rewards, you can earn rewards for a variety of actions. And with the Earn It Off payment option, you can get an Apple Watch for a low — or $0 — upfront cost and pay the remaining cost with the rewards you earn over 12 months.

How Earn It Off works

To get in on Earn It Off, go to UHC Rewards in the UnitedHealthcare® app and select Redeem rewards. Then you'll be ready to:

1. **Get an Apple Watch -** Choose your Apple Watch and pay a low — or $0 — upfront cost today.
2. **Earn rewards -** Every dollar you earn with UHC Rewards, including any already in your account, is put toward your Earn It Off total.
3. **Pay it off -** Pay off the cost of your Apple Watch over 12 months

Answers to frequently asked questions

What is the maximum amount I can pay off through Earn It Off? The maximum amount you can pay off through Earn It Off is equal to the maximum amount you can earn with UHC Rewards. If the Apple Watch you choose costs more than this amount, you may need to pay the difference at checkout.

How is my monthly payment calculated? Your Earn It Off monthly payment is calculated by dividing your Earn It Off total by 12. Your Earn It Off total is the sum of the Apple Watch, taxes and shipping, minus any current available rewards and any credit card payment you make at checkout.

When are my Earn It Off monthly payments due? Your payments are due monthly, starting 1 month after your purchase date. For example, if you purchase an Apple Watch on the first of the month, you'll be charged on the first of every month for 12 months. If your purchase is made on the 31st of a month, your monthly payment will always be due on the last day of the month.

When will my credit card be charged? If your monthly earned rewards do not meet your monthly Earn It Off payment, the difference will be charged to your credit card. For example, if your monthly payment is $10 and you only earn $6 in rewards, your card will be charged $4. Additionally, if you are no longer eligible for UHC Rewards or no longer have a UnitedHealthcare health plan, your credit card will be charged your monthly payment each month until you've finished paying off your Apple Watch. You will not be charged the entire balance in 1 payment.

How do I earn rewards? You can earn rewards by completing a variety of reward activities. To start earning dollars, view all available activities on the UHC Rewards homepage.

*UHC Real Appeal (weight loss program)

United Healthcare | www.enroll.realappeal.com | Customer Service: 866-230-2505

Join today at enroll.realappeal.com or scan this code:

Get healthier, at no additional cost to you

Real Appeal on Rally Coach™ is a proven weight management program designed to help you get healthier and stay healthier. It's available to you and eligible family members at no additional cost as part of your benefits.

Take small steps toward healthier habits

Set achievable nutrition, exercise and weight management goals that keep you motivated to create lasting change. Track your progress from your daily dashboard, too.

Support and community along the way

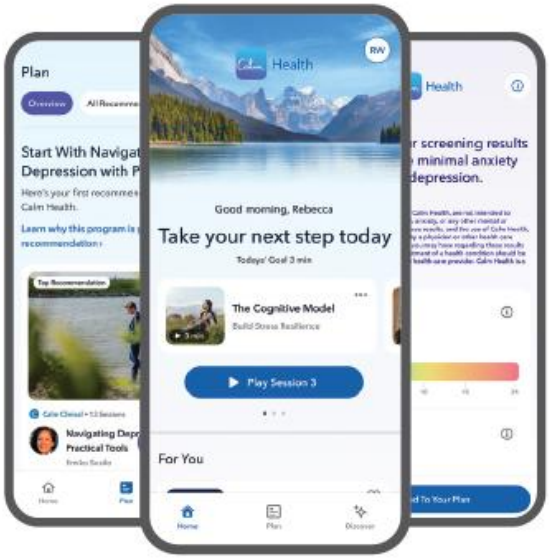
Feel supported with personalized messages, online group sessions led by coaches and a caring community of members.

*Calm Health (mental health support)

United Healthcare | www.enroll.realappeal.com | Customer Service: 866-230-2505

The Calm Health app provides programs and tools to help support your mental health and well-being — all at your own pace.

As a UnitedHealthcare member, Calm Health is included in your health plan and available at no additional cost.



Scan this code to get started or visit www.uhc.app/calm
You'll be prompted to sign in on the UnitedHealthcare® app or at myuhc.com® first. If you don't have an account, select Register to create one.

Resources to help support your mental health

To help tailor your Calm Health experience, you'll begin with a short mental health screening. Then, Calm Health will suggest certain programs for you to consider based on where you are in your well-being journey.

Tap into tools and support The Calm Health app brings you a library of support — including mindfulness content and programs created by psychologists — for a variety of health experiences and life stages. This information is designed to help you:

- Learn techniques to improve well-being – Find tools, music and sounds to help you meditate, improve focus, move mindfully and feel calm
- Work toward goals – Join self-guided self-care programs, and track your progress along the way
- Support your mind and body – Access mental health information and support to help you strengthen the mind-body connection

Cafeteria Plan

The Help Group has a cafeteria plan, also known as a Section 125 plan. This is an additional automatic benefit that applies while you are an active benefit eligible employee with eligible pre-tax payroll deductions such as medical, dental and/or vision premiums. ***Taking payroll deductions pre-tax reduces your taxable income, increasing your take-home pay!***

HOW PRE-TAXING YOUR ELIGIBLE CONTRIBUTIONS SAVES YOU MONEY:

You pay your share of premiums for your company-sponsored health insurance plans with pre-tax dollars. **Pre-tax premium contributions allow you to keep the same benefits while lowering your taxable income and increasing your take-home pay**. With the Pre-tax Plan your costs for Medical, Dental, Vision and Flexible Spending Accounts will be deducted before your taxes are calculated; all other health and welfare benefits are payroll deducted on a post-tax basis. When your premium contribution is subtracted first, you pay less Federal Income, State Income and Social Security taxes.

WHAT YOU HAVE TO DO:

Nothing. You are automatically enrolled to receive this benefit, unless you contact Human Resources and request in writing to be excluded from the plan.

ANNUAL OPEN ENROLLMENT & QUALIFIED STATUS CHANGE

You will be given the opportunity to make new elections or modify your elections during the annual open enrollment for each plan year. Once you have made your elections for the plan year, IRS rules allow you to change your election during the plan year only if you have a change in family status. Only qualified status changes such as marriage, divorce, birth/adoption, an unpaid leave of absence, or a spouse's employment termination permits you to change your election during a plan year. If you experience a qualifying life event, you will have a 30-days (from the date of the event) to make enrollment changes in line with the type of life even you experienced.

EMPLOYEE SAVINGS ILLUSTRATION*

Sample based on $2,000 earnings

	Before Pre-Tax Plan	After Pre-Tax Plan
Employee earning	**$2,000**	**$2,000**
Tax Free Benefit Expenses	**0**	**(300)**
Taxable Income	**2,000**	**1,700**
Taxes (Average 28%)	**(560)**	**(476)**
FICA @ 7.65%	**(153)**	**(130)**
Take Home Pay	**1,287**	**1,094**
After-Tax Benefit Expenses	**(300)**	**0**
Spendable Income	**$987**	**$1,094**
Employee Increased Take Home Pay		**$107**

* The above example is intended for illustration purposes only. Your exact savings will vary depending on your particular circumstances.

Flexible Spending Accounts

WEX Health | Benefitslogin.wexhealth.com | 866-451-3399

Plan ahead! Keep more of your paycheck by using pre-tax FSA dollars to pay for eligible Health Care and/or Dependent Day Care expenses you expect in 2026.

Health Care FSA (Not Allowed if You Fund an HSA)

Pay for eligible out-of-pocket medical, dental, vision, and prescription drug expenses with pre-tax dollars. For a full list of health care expenses, see **IRS Publication 502**.

- **2026 Annual contribution limit:** $3,400
- **Eligible expenses:** Copays, coinsurance, deductibles, prescription expenses and more!

Example Tax Savings of Using FSAs		
	WITHOUT FSA	**WITH** FSA
Employee's annual pay	$30,000	$30,000
Pre-tax FSA Contribution	$0	**$2,000**
Taxable pay	$30,000	$28,000
Estimated Taxes	$4,200	$3,920
After-tax cost of Health / Dependent care	**$2,000**	$0
Take home pay	$23,800	$24,080
Estimated savings in this example is $280		

Dependent Care FSA

Pay for eligible day care expenses with pre-tax dollars. For a full list of dependent care expenses, see **IRS Publication 503**.

- **Annual contribution limit:** $7,500 married and filing a joint return or if filing a single or head of household return ($3,750 if married and filing separate tax returns)
- **Eligible expenses:** Day care, after-school care, babysitting (work-related), nanny
- **Eligible dependents:** A spouse, or children under 13 years of age, a child over 13, or an elderly parent residing in your home who is physically or mentally unable to care for him or herself

If you terminate your employment, you have until the end of the calendar year to submit qualified FSA reimbursement (Health Care and / or Dependent Care); for dates of service prior to your last day worked. You also have the option to elect COBRA for Health Care FSA (only if you have been reimbursed less than what you have contributed to date).

Contribute	Pay	Use It or Lose It
Decide how much to contribute to one of both Flexible Spending Accounts on an annual basis up to the allowable limits. This amount will be evenly divided by the number of pay periods and deducted from your paycheck on a pre-tax basis, reducing your taxable income and increasing your take home pay; saving you money on eligible expenses you expect in 2026.	Use your FSA debit card to pay for eligible health care expenses at time of service or submit a claim for reimbursement online. Failure to submit detailed receipts to substantiate submitted claim(s) by the end of the calendar year will result in taxable income. Submit your Dependent Care reimbursement request online; with the option to set up reoccurring reimbursements and direct deposit!	**Health Care FSA** ~ You have until December 31, 2026, to use your funds. *You may carry over up to $680 into the next FSA plan year.* **Dependent care FSA** ~ • March 15, 2027: Last day to incur claims • March 31, 2027: Last day to submit receipts for reimbursements If you do not meet the March 31st deadline, you will lose the remaining contributions left in the account.

Supplemental Medical Benefits

United Healthcare | www.myuhc.com

This is a good option if you lead an active lifestyle. When an unexpected accident happens, make sure you're covered with supplemental medical benefits.

Accident Insurance (24 Hour Coverage)

Accident insurance can help with expenses incurred due to an accidental injury. Claims payments are paid based on the covered injury you sustain, and the various covered treatments or services received; regardless of what is covered by your health insurance.

Covered benefit examples include:

- Common accidental injuries from cuts to broken bones and fractures.
- Ambulance rides, Urgent Care, ER, follow-up Dr. visits, Hospital Admission & Rehab
- MRI, CT scans, or other necessary X-rays
- $50 Annual Wellness Benefit. Employees & Spouses, for covered wellness exams.
- Portability Included; ported coverage terms at age 75.

How much does this plan cost?

Level of Coverage	Monthly Costs
Employee Only	$9.26
Employee + Spouse	$14.79
Employee + Child(ren)	$18.19
Family	$28.15

Example Accident Insurance Claim

Molly experienced serious injuries when she fell during a school soccer game. Molly was knocked unconscious, taken to the local emergency room and diagnosed with a concussion and a broken tooth.

Her accident insurance benefit will help cover:

- **$300 for an Ambulance ride**
- **$150 for Emergency room treatment**
- **$250 for Medical Testing (MRI / CT Scan)**
- **$300 for Broken Tooth (crown repair)**
- **$75 each for Physician Follow-up Visit (x2)**

Molly's accident insurance coverage paid out flat amounts for covered expenses for a total of:

$1,150

PLUS, Organized Sporting Activity Injury coverage increases Follow Up Care and Common Injuries benefits by 25%

Supplemental Medical Benefits

Critical Illness Insurance, administered through United Healthcare

If you are diagnosed with a critical illness, you may need additional financial support to help offset treatment costs and cover day-to-day expenses. Great option if you are concerned with family health history!

This plan pays a lump sum benefit that you can use as you see fit — to pay your mortgage, seek experimental treatment, or handle unexpected expenses.

- **Employee & Spouse benefit options:** $10,000, $20,000, or $30,000; **Guarantee issue:** $30,000
- **Dependent children benefit options:** $5,000, $10,000, or $15,000; **Guarantee issue:** $30,000
- **$100 Annual Wellness Benefit:** payable upon completion of a covered exam or health screening. One covered test *per calendar year per covered employee, spouse and child*.
- **Pre-Existing Conditions Exclusion** is *waived for timely elections.*
- Portability Included; ported coverage terms at age 75.
- Additional Occurrence & Reoccurrence Benefits Included

How Critical Illness Insurance Works
Manny suffers a heart attack while mowing the lawn. Thankfully, he had enrolled in critical illness insurance coverage.
Manny receives a lump sum payment so, he can pay for:
• Medical expenses incurred during and after his heart attack • Groceries and his mortgage while he takes time off work to recover
Manny's critical illness coverage gives him peace of mind with a total payout of:
Amount elected

How much does this plan cost?

Please see the schedule of benefits for a full list of covered illnesses and coverage costs.

Supplemental Medical Benefits

Hospital Indemnity Insurance, administered by United Healthcare

This plan provides a lump-sum benefit due to a hospitalization. Benefits Include:

- **$1,000 Hospital admission** (injury or sickness)
- **$100 per day Hospital Confinement:** Payable beginning on day 2 (up to 364 Days per plan year).
- **$1,000 ICU Admission:** Payable in addition to Hospital Admission
- **$100 per day ICU Confinement:** Payable beginning on day 2 (up to 364 Days per plan year). Payable in addition to Hospital Confinement.
- **Baby delivery covered:** included without a waiting period.
- **Portability Included:** must be ported before age 70 and ported coverage terms at age 75.
- **$50 Annual Wellness benefit** for Employees & Spouses, when you complete an eligible health screening (ex. cancer screening, Blood test for triglycerides, Colonoscopy, Mammography & Pap smear).

How much does this plan cost?

Level of Coverage	Monthly Costs
Employee Only	$14.85
Employee + Spouse or DP	$26.15
Employee + Child(ren)	$25.71
Family	$39.43

IMPORTANT: This is a fixed indemnity policy, NOT health insurance.

- This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.
- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- Visit healthcare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- For questions or complaints about this policy, contact your state Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.

Dental

United Healthcare| www.myuhc.com | Select Dental plans and search the Network based on your plan selection.

DHMO Plan (In-Network Coverage Only)

Primary Care Dentist (PCD) required. Members are responsible for copays based on the service. Review the provider treatment plan against the copay schedule for any services before you agree to any treatment; and if one is not provided, request one! Contact member services for PCD change during the plan (within the network). ***Exclusive Network Dental Plan Network.***

VS

Dental PPO Plan (In & Out-of-Network)

It is the member's responsibility to confirm network status, even for referrals. Avoid surprises bills by requesting a carrier pre-determination prior to treatment of any Basic, Major and/or Orthodontic treatment. Experience less out of pocket cost and avoid balance billing when using a contracted network provider. ***National Options PPO 30 Network***

	DHMO	PPO Dental	
	In Network Only	In Network	Out of Network
Calendar Year Deductible			
Individual/Family	None	$50/$150	$50/$150
Calendar Year Plan Maximum			
Per Individual	None	$2,000	$1,500
Covered Services	**You Pay**	**You Pay**	
Preventive Care: Prophylaxis Cleanings, Fluoride Treatment, Sealants, and Space Maintainers	Most Covered at $0 copay	Plan pays 100%	Plan pays 60%
Basic Services: Simple Extractions, Oral Surgery (including surgical extractions), Endodontics (Root Canals and Periodontics	Based on copay Scheduled	10% after ded.	50% after ded.
Major Services: Inlays/Onlays/Crowns, Dentures & Removable Prosthetics, Fixed Partial Dentures (Bridges) and Implants	Based on copay Scheduled	40% after ded.	50% after ded.
Orthodontia Services: (Adults and Children)	$1,850 Child copay $1980 Adult copay	50%	50%
Orthodontia Lifetime Plan Maximum: (Per Individual)	N/A	$1,500	

How much does this plan cost?

Monthly Costs	Less than 15 years of service		15+ years of service	
	DHMO	DHMO	PPO Dental	PPO Dental
Employee Only	$0.00	$0.00	$32.72	$10.39
Employee + 1 Dependent (Spouse, Domestic Partner or 1 Child)	$9.62	$0.00	$72.39	$48.17
Employee + 2 or more Dependents (Spouse, Domestic Partner AND Children)	$20.22	$0.00	$122.83	$96.21

Vision

United Healthcare| www.myuhc.com/vision | 800-638-3120

Vision care is essential to your overall health — completing a regular eye exam can help your eye doctor detect more than 200 major diseases.

- The Help Group will pay 100% for Employee-Only coverage, and you also have the option to cover eligible dependents.
- Where you go to get glasses matters. Maximize your vision benefit when you use an In-Network provider. Submit detailed receipts to the carrier for reimbursement, when using Out-of-Network providers.
- The purpose of vision insurance is to purchase glasses or contacts (in lieu of glasses), based on your prescription! Use your medical insurance for health conditions such as cataracts & glaucoma.

	In Network	Out of Network Reimbursement
Exam (Once every 12 months)		
Eye Exam	$0 copay	Reimbursement up to $40
Lenses (Once very 12 months)		
Single Lenses	$10 Copay	Reimbursement up to $40
Bifocals	$10 Copay	Reimbursement up to $60
Trifocals or Lenticular	$10 Copay	Reimbursement up to $80
Frames (Once very 12 months)		
Standard Plastic Frames	$130 allowance + 30% off balance	Reimbursement up to $45
Contact Lenses — in lieu of frames & lenses (Once every 12 months)		
Covered Formulary Contacts	Up to 4 boxes	Reimbursement up to $130
Non-Formulary Elective Contacts	Up to $130 allowance	Reimbursement up to $130
Medically Necessary Contacts	Plan pays 100%	Reimbursement up to $210

Lens coverage includes Polycarbonate Lenses for Children up to Age 19 with Standard Scratch Coating. Discounts available for extra bells & whistles when using your vision plan In-Network.

How much does this plan cost?

Monthly Costs	Vision (Less than 15 years of service)	Vision (15+ years of service)
Employee Only	$0.00	$0.00
Employee + 1 Dependent (Spouse, Domestic Partner or 1 Child)	$7.17	$0.00
Employee + 2 or more Dependents (Spouse, Domestic Partner AND Children)	$11.96	$0.00

Life and AD&D Insurance

United Healthcare | www.myuhc.com

Life and accidental death and dismemberment (AD&D) insurance protects you and your family in the event of an accident or death.

Life and AD&D Insurance

The Help Group provides basic life and AD&D insurance to all eligible employees at no cost. For both basic life and AD&D insurance, you are covered in an amount equal based on years of service with The Help Group.

- **$20,000** ~ For employees with less than 10 years of services with The Help Group
- **$50,000** ~ For employees with 10 or more years of services with The Help Group
- AD&D insurance pays specific benefit amounts for a covered accidental bodily injury that causes dismemberment. If death occurs from an accident, 100% of both the life and AD&D benefits would be payable to your beneficiary.
- **Benefits are paid to the beneficiary you designate.** Please keep your beneficiary information up to date, in ADP.

Guaranteed Issue (GI)

If you do not purchase voluntary life insurance when first eligible you are a late entrant, or if you request an amount exceeding the guaranteed issue limits listed, you will be subject to medical underwriting and approval before your coverage begins.

Things You Should Know

- **Annual Increase (EE or SP):** *If you elect less than the full Guarantee Issue amount when first eligible*, you may increase one increment during future annual open enrollment periods without health questions (up to the GI limit).
- **Age Reduction:** Benefit amounts reduce as you age.
- **Portability/Conversion:** If you leave the company, you can port or convert your policy to an individual policy and continue your life insurance coverage

Voluntary Life and AD&D Insurance

To better financially protect your dependents, you may want to purchase voluntary life coverage.

- You must purchase coverage for yourself to purchase coverage for your spouse and children.
- Your cost is based on the amount you elect and your age as of December 1st each year.
- Spouse cost is based on employee's age bracket!
- To determine how much coverage you may need, consider costs such as funeral expenses, legal expenses, college tuition, and living expenses for family members.

Coverage	Available Benefit
Employee	• **Increments of $10,000** up to 5 times your salary to a maximum of $500,000 • Guaranteed issue amount: $150,000
Spouse	• **Increments of $5,000** up to $250,000 — not to exceed 50% of employee coverage • Guaranteed issue amount: $30,000
Dependent Child(ren)	• Birth to 15 days — No coverage • **Increments of $2,000** up to $10,000 — not to exceed 50% of employee coverage **ages 15 days to 26 years** • Guaranteed issue amount: $10,000 • Monthly Cost for $10,000 = $1.90

	MONTHLY COST for Employee or Spouse			
Age as of January 1st	Cost per $1,000	Cost for $10,000	Cost for $50,000	Cost for $100,000
Under age 25	$0.06	**$0.63**	$3.15	**$6.30**
25 - 29	$0.07	**$0.72**	$3.60	**$7.20**
30 - 34	$0.09	**$0.89**	$4.45	**$8.90**
35 - 39	$0.10	**$0.98**	$4.90	**$9.80**
40 - 44	$0.11	**$1.07**	$5.35	**$10.70**
45 - 49	$0.15	**$1.50**	$7.50	**$15.00**
50 - 54	$0.22	**$2.20**	$11.00	**$22.00**
55 - 59	$0.39	**$3.94**	$19.70	**$39.40**
60 - 64	$0.59	**$5.93**	$29.65	**$59.30**

Disability Insurance

Lincoln Financial Group | www.LincolnFinancial.com Ref ID: HELPGROUP | 800-423-2765

Disability insurance replaces a portion on your income when you experience a qualifying disability and are unable to work. You may purchase coverage with after-tax dollars, for a tax-free benefit at time of claim.

Important: Disability benefits are reduced by other income you receive, such as Social Security, state disability benefits, pension benefits, and Workers' Compensation. Review the plan summaries for plan details such as portability & waiver of premium, and for plan limitations, exclusions; and how to calculate your cost for coverage.

Voluntary Short-Term Disability

Short-term disability (STD) insurance provides you with a portion of your weekly income for a non-work-related injury or illness.

Your benefits may be reduced if you are eligible to receive benefits from: Sick pay, a state disability plan or similar compulsory benefit act or law, A retirement plan, Social Security or Any form of employment.

If you have a medical condition that begins before your coverage takes effect, and you receive treatment for this condition within the 3 months leading up to your coverage start date, you may not be eligible for benefits for that condition until you have been covered by the plan for 6 months.

To calculate your Monthly Cost: Divide your monthly earnings by 100, and multiple by $1.248.

Coverage	STD Benefit
Weekly Benefit	30% of weekly earning
Weekly Benefit Maximum	$1,500 per week
Elimination Period	6 days (Sickness/Accident)
Benefit Duration	52 weeks

Voluntary Long-Term Disability

Long-term disability (LTD) insurance helps replace a portion of your income for a long period of time (up to retirement age), when you are unable to work due to a covered injury or illness.

Your benefits may be reduced if you are eligible to receive benefits from: A state disability plan or similar compulsory benefit act or law; A retirement plan; Social Security; Any form of employment; Sick leave; Workers' Compensation; or Salary continuance

If you have a medical condition that begins before your coverage takes effect, and you receive treatment for this condition within the 12 months leading up to your coverage start date, you may not be eligible for benefits for that condition until you have been covered by the plan for 24 months.

To calculate your Monthly Cost: Review the carrier benefits summary or ask Human Resources for assistance.

Coverage	LTD Benefit
Monthly Benefit	60% of monthly earnings
Monthly Benefit Maximum	$5,000 per month
Elimination Period	90 days
Benefit Duration	Social Security Normal Retirement Age

Elimination or Waiting Period

The amount of time you must wait before you are eligible to receive benefit payments.

Qualifying Disability

A sickness or injury that causes you to be unable to perform any other work for which you are or could be qualified by education, training, or experience.

Benefit Duration

The maximum amount of time you may receive proceeds for a continuous disability.

Retirement Plan 403b

Fidelity Investments | www.netbenefits.com/atwork

Saving for your future is a vital part of your financial planning.

Eligibility

Full-time and part-time employees ages 18 or older are eligible to participate in the plan

Your Contributions

You may contribute up to 25% of your gross income on a pre-tax basis and/or Roth after-tax basis, up to the annual IRS limit **(for 2026 the IRS General Contribution Limit is $24,500**).

Things you should know about your 403(b) plan:

- If you are **age 50 or older**, you are eligible to contribute an **additional IRS Catch-up Contribution Limit is $8,000**.
- Your contributions are made through convenient payroll deductions.
- You can change or stop your contributions at any time.
- Investments can be changed at any time. To learn more about your investment options, call to speak with a financial planner.

Section 529 Savings Plan

Schwab | www.**schwab.com/529** | 888-903-3863

(Educational Savings Plan)

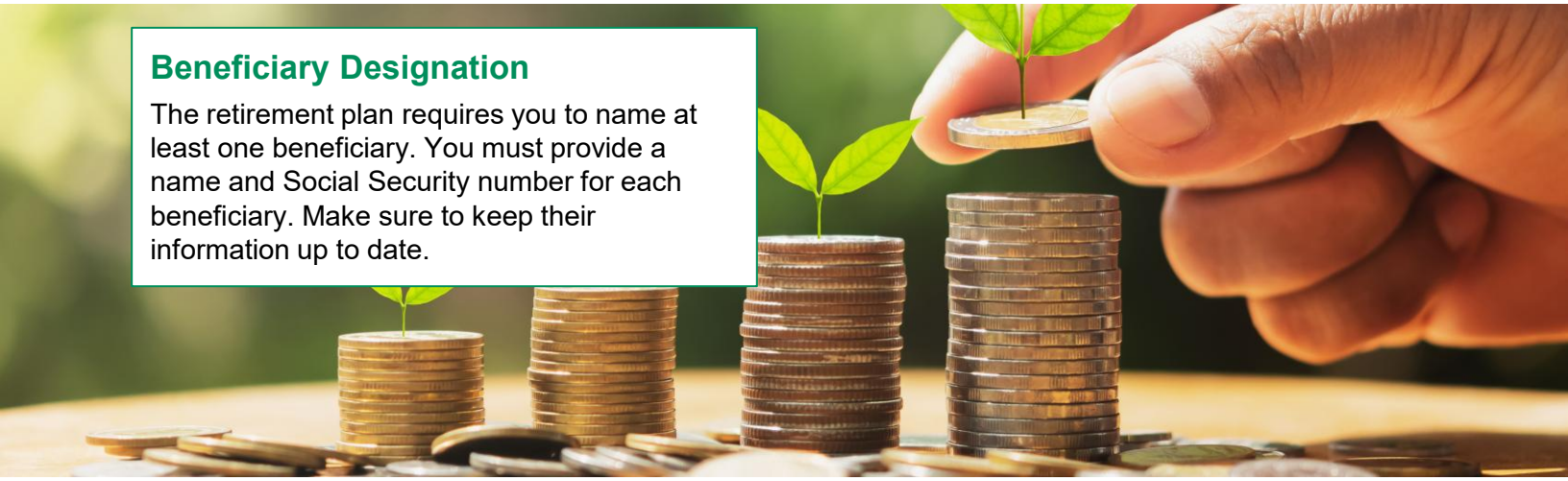
Investing in the Section 529 Savings Plan

A 529 plan is a state-sponsored education savings plan. It offers tax benefits to help parents, relatives, and friends invest for future education expenses

- Residents of any state can contribute to a 529 plan of their choice, for a student of any age
- Convenient payroll deductions available
- Tuition, fees, books, room and board. It all adds up, and quickly. Whether you are saving for your child, yourself, or other loved ones, Schwab will help you get started today. Because the earlier you begin, the longer you'll save, and the more your money can benefit from tax-advantaged growth potential.
- For questions or to enroll call or email Schwab or contact Human Resources.

Beneficiary Designation

The retirement plan requires you to name at least one beneficiary. You must provide a name and Social Security number for each beneficiary. Make sure to keep their information up to date.



Benefit Hub

https://thehelpgroup.benefithub.com

Benefit Hub

The Help Group is pleased to present Benefit Hub, our online provider for various discounts including movie tickets, theme parks, travel, dining, shopping and more. If you're planning a vacation, wanting to purchase a vehicle, or planning a night out on the town, feel free to check out the discount offers available online.

- To register, click "Guest" at the top right of the Benefit Hub homepage.
- Next, select "Sign Up" and complete the registration page.
- You must use your work email address and create your own password to use.
- Once you complete the registration process, you can log on and take advantage of all kinds of discounts including theme parks, hotels, dining, etc.

Credit Union

Premier America Credit Union | www.premier.org

Credit Union

As an employee of The Help Group, you are eligible to join Premier America Credit Union. They offer a wide range of financial products and services, including banking, loans and investment services. Please visit the website or call the following representatives for more information (Hablo Español):

Karen Balaguer / Assistant Branch Manager
Hollywood Way Branch - NMLS # 2495951
Direct: (818) 260-9300 Ext. 4858
Fax: (818) 260-9326

Edder Barrios / Personal Banker 4
Hollywood Way Branch - NMLS # 1688415
Direct: 818-260-9300 Ext. 4853
Fax: 818-260-9326
Edder.Barrios@PremierAmerica.com

Credit Union Highlights

- Receive $100 with a New Checking Account
- Free Checking & Free payments with Zelle
- Early Direct Deposit
- 30,000+Free ATMs Nationwide
- Free Money Management Tools
- Wealth Management Guidance & Insurance Services

EMPLOYEE ASSISTANCE PLAN (EAP)

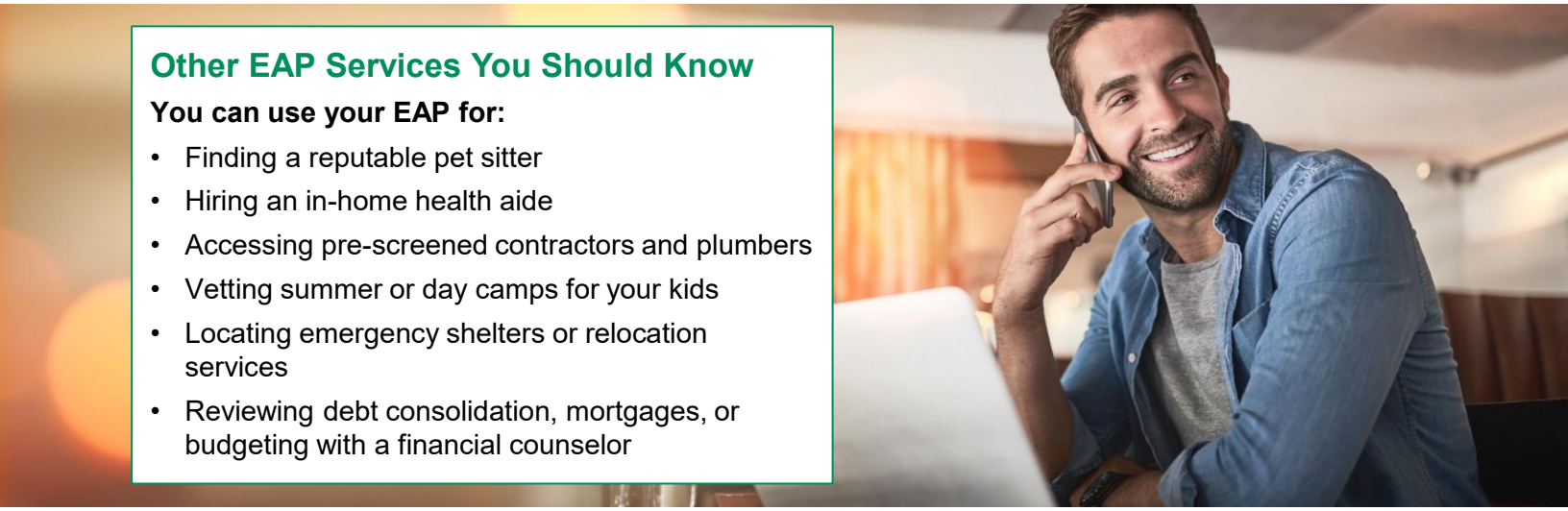
United Healthcare | www.liveandworkwell.com Access Code: FP3EAP | 877-660-3806 TTY 711

UHC's Member Assistance Program (MAP) provides 24/7 confidential support to guide you and your family members through any issue — from the mundane to the more serious.

Experienced representatives can help you in every area of life:

- **Financial solutions**
- **Stress, anxiety, depression, and grief**
- **Stress, anxiety, depression, and grief**
- **Childcare and elder care options**
- **Alcohol and drug issues**
- **Legal questions or concerns**
- **Personal development and life improvement**

Access your EAP 24/7 by calling



Other EAP Services You Should Know

You can use your EAP for:

- Finding a reputable pet sitter
- Hiring an in-home health aide
- Accessing pre-screened contractors and plumbers
- Vetting summer or day camps for your kids
- Locating emergency shelters or relocation services
- Reviewing debt consolidation, mortgages, or budgeting with a financial counselor

PET INSURANCE

Discover the greatest pet insurance plans ever offered. Exclusively for employees. Only from **Nationwide®**. You care about your pets and consider them members of your family. So, whether your family includes kids with two feet or kids with four paws—or both—you know what responsibility looks like. So why not give your pets the best health care available? My Pet Protection is available in two reimbursement options (50% and 70%) with an optional $500 wellness benefit so you can find coverage that fits your budget. Base plans have a $250 annual deductible and $7,500 annual benefit. Get cash back on eligible vet bills: Choose 50% or 70% reimbursement

- Use any vet, anywhere: No network, no pre-approvals
- Claims do NOT increase your premiums
- Pre-existing conditions are NOT covered

Choose from two easy ways to sign up (The rates given will include your preferred pricing):

- Visit: https://benefits.petinsurance.com/the-help-group to enroll online.
- Call 877-738-7874; be sure to tell the pet insurance specialist the company name.

My Pet Protection includes these additional benefits for cats and dogs:

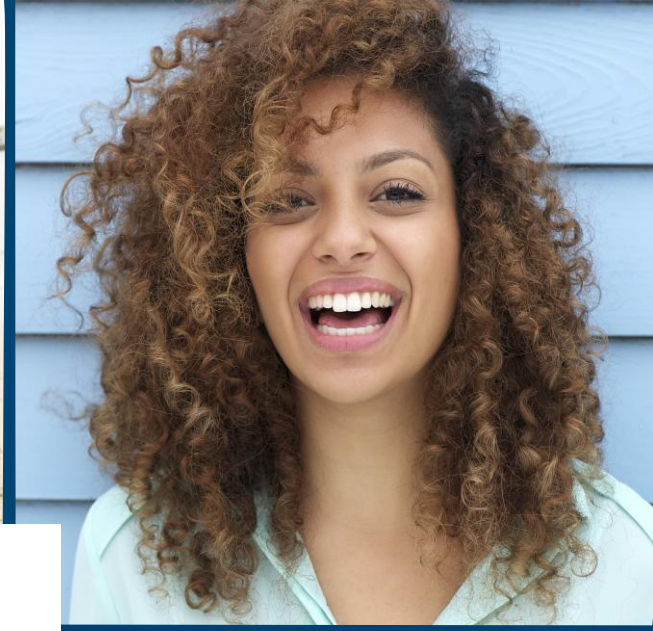
- Lost pet advertising and reward expense
- Emergency boarding
- Loss due to theft
- Mortality benefit

Coverage includes:

- Accidents
- Illnesses
- Hereditary and congenital conditions
- Cancer
- Behavioral treatments
- Rx therapeutic diets and supplements
- Wellness* and more

ADDITIONAL FEATURES:

- Vet Helpline - 24/7 access to veterinary experts (phone, chat and email)
- Pet RX Express—participating in-store pharmacy submits claims to Nationwide



Help Group

This summary of benefits is not intended to be a complete description of the terms and The Help Group insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan. In the event of any conflict between a summary of the plan and the official document, the official document will prevail.

Although The Help Group maintains its benefit plans on an ongoing basis, The Help Group reserves the right to terminate or amend each plan, in its entirety or in any part at any time.