

2026

Plan Year



EMPLOYEE BENEFITS GUIDE

Effective Date:

January 1, 2026 through
December 31, 2026





ELIGIBILITY REQUIREMENTS & COVERAGE EFFECTIVE DATES

You are eligible for health benefits if you are a full-time active employee unless otherwise stated. Full-time active employees must be regularly scheduled to work 30 hours or more per week to be eligible for medical and prescription drug coverage.

As a participant of the Employee Benefits Plan, you may choose coverage for **yourself only, yourself and one dependent, or yourself and two or more dependents.**

Eligible dependents are defined as your **legal spouse, natural child(ren), legally adopted child(ren), child(ren) placed in your home for legal adoption, stepchild(ren), or child(ren) over whom you have legal guardianship.**

If you elect coverage for eligible dependents, additional documentation will be required. Christman requires employees to provide a marriage certificate for your legal spouse, and birth certificates or any other legal documentation conferring guardianship for eligible child dependents.

Dependent children include children of the employee or spouse by birth, legal adoption, legal guardianship or children from a former marriage of whom the subscriber has custody.

Dependent children are covered on medical, dental and vision until the end of the year in which they reach age 26. They may remain covered to any age if they are "totally and permanently disabled" by either a physical or mental condition.

TELL US WHEN YOU ARE MEDICARE ELIGIBLE

Please notify us when you or your dependent become eligible for Medicare. You can become eligible for Medicare based on age, declaration of total disability, or diagnosis of ESRD.

We are required to contact the insurer to inform them of your Medicare status. Federal law determines whether Medicare or the health plan pay primary.

WHEN COVERAGE BEGINS

Office Staff: you are eligible for all benefits on the first day of the month following 30 days of employment.

Field / Service Staff: you are eligible for benefits, except for Life/AD&D, Short Term Disability, and Long Term Disability, on the first day of the month following 60 days of employment. Life/AD&D, Short Term Disability, and Long Term Disability will begin on the first day of the month following one year of employment.

MAKING CHANGES MID-YEAR

The choices you make during open enrollment or when you first become eligible remain in effect for the remainder of the plan year. Once you are enrolled, you must wait until the next open enrollment period to change your benefits or add/remove coverage for dependents, unless you have a qualified change in family status as defined by the IRS. Changes to your coverage must be made within 30 days of the life event.

Examples include, but are not limited to, the following:

- Marriage or divorce (**must submit marriage license to HR**)
- Birth or adoption of a child (**must submit birth certificate to HR**)
- Loss of other health coverage
- New eligibility for other health coverage
- Change in your dependent's eligibility status

Any change you make to your coverage must be consistent with the change in status. Changes to coverage made within 30-days of the life event will become effective on the date of the event.

SPOUSAL SURCHARGE

Any working spouse that has access to health insurance through their employer, but chooses to enroll in Christman's plan instead, will incur a spousal surcharge. All employees with spouses enrolled in one of Christman's medical plans will be required to verify the spouse's employment status prior to the 2026 benefit year. If this verification is not complete, the non-refundable spousal surcharge will be applied.

Surcharge amount: \$50 per pay for bi-weekly payroll or \$25.00 per pay for weekly payroll

HEALTH & DENTAL BENEFITS GLOSSARY OF TERMS

The following is a glossary of commonly used health and dental benefit terms.

HEALTH

Please refer to your SBC for more details.

- **COINSURANCE:** A percentage of healthcare cost, such as 20%, that the covered employee pays after meeting the deductible.
- **COPAY:** The fixed dollar amount, such as \$25 for each doctor visit, that the covered employee pays for medical services.
- **DEDUCTIBLE:** A fixed dollar amount that the covered employee must pay out-of-pocket each calendar year before the plan will begin reimbursing for non-preventive health expenses. Plans usually require separate limits per person and per family.
 - ◇ **Aggregate Deductible:** Each covered family member's deductible amounts are applied toward the family deductible accumulation. Once the family deductible has been met, the entire family's deductible is considered met regardless of the individual amounts applied to the deductible. Individual deductible does not apply unless single coverage was elected.
 - ◇ **Embedded Deductible:** Each covered family member only needs to satisfy his or her individual deductible prior to receiving plan benefits. Benefits are payable for the entire family once family deductible has been reached.
- **FORMULARY:** A list of prescription drugs covered by the health plan, often structured in tiers that subsidize low cost generics at a higher percentage than more expensive brand name or specialty drugs.
- **HEALTH SAVINGS ACCOUNT (HSA):** HSAs may be opened by employees who enroll in a high deductible health plan (HDHP). Employees can put money in an HSA up to an annual limit set by the government using pre-tax dollars. Employers may also contribute funds to these accounts within the prescribed limit. HSA funds may be used to pay for medical expenses whether or not the deductible has been met, and no tax is owed on funds withdrawn from an HSA to pay for medical expenses. HSAs are individually owned and the account remains with an employee after employment ends.
- **HIGH DEDUCTIBLE HEALTH PLAN (HDHP):** A HDHP features higher annual deductibles than traditional health plans, such as a preferred provider organization (PPO) or health maintenance organization (HMO) plan. With the exception of preventive care, covered employees must meet the annual deductible before the plan pays benefits. HDHPs, however, may have significantly lower premiums than a PPO, HMO or other traditional plans.
- **IN-NETWORK:** Doctors, clinics, hospitals and other providers with whom the health plan has an agreement to care for its members. Health plans cover a greater share of the cost for in-network health providers than for providers who are out-of-network.
- **OUT-OF-NETWORK:** A health plan will cover treatment for doctors, clinics, hospitals and other providers who are out-of-network, but covered employees will pay more out-of-pocket to use out-of-network providers than for in-network.
- **OUT-OF-POCKET LIMITS:** The most an employee could pay during a coverage period (usually one year) for his or her share of the costs of covered services, including copayments and coinsurance.
- **PREMIUM:** The amount that must be paid for a health insurance plan by covered employees, by their employer, or shared by both. A covered employee's share of the annual premium is generally paid periodically, such as monthly, and deducted from his or her paycheck.

DENTAL

Please refer to your benefit summary for more details.

- **ANNUAL MAXIMUM:** The total amount that a plan will pay for dental care incurred by an individual enrollee or family (under a family plan) in a specified benefit period, typically a calendar year.
- **LIFETIME MAXIMUM:** The cumulative dollar amount that a plan will pay for dental care incurred by an individual enrollee or family (under a family plan) for the life of the enrollee or the plan. Lifetime maximums usually apply to specific services such as orthodontic treatment.

Source: SHRM.



MEDICAL PLAN

IN-NETWORK COVERAGE OPTIONS

Please refer to your benefit summaries and SBCs for out-of-network coverage and additional plan details.

*Represents a change from the previous benefit year.

BENEFITS	Blue Cross Blue Shield of Michigan	
	Simply Blue HSA *1700 PPO - HDHP/HSA Compatible Member's Responsibility	Simply Blue HSA 3250 PPO - HDHP/HSA Compatible Member's Responsibility
Deductibles (individual/family)	*\$1,700/\$3,400	\$3,250/\$6,450
Coinsurance	10%	None
Out-of-Pocket Maximum (individual/family)	\$2,500/\$5,000	\$3,675/\$7,350
Preventive Care	Covered 100%	Covered 100%
Office Visit	10% after deductible	Covered 100% after deductible
Medical Online Visit	10% after deductible (\$59 max)	Covered 100% after deductible
Specialist Visit	10% after deductible	Covered 100% after deductible
Chiropractic Services	10% after deductible (24 visits per year)	Covered 100% after deductible (24 visits per year)
Emergency Room	10% after deductible	Covered 100% after deductible
Urgent Care	10% after deductible	Covered 100% after deductible
Hospitalization (in-patient)	10% after deductible	Covered 100% after deductible
Prescription Drug Coverage (30-day supply)	(after deductible) \$10 generic \$40 preferred brand \$80 non-preferred brand 2x copay for mail order 15% (\$150 max) preferred specialty 25% (\$300 max) non-preferred specialty	(after deductible) \$10 generic \$40 preferred brand \$80 non-preferred brand 2x copay for mail order 15% (\$150 max) preferred specialty 25% (\$300 max) non-preferred specialty
ANNUAL EMPLOYER HSA CONTRIBUTION	N/A	\$1,100 for employee only \$2,200 for two-person/family



2026 MEDICAL CONTRIBUTIONS

	Coverage Tier	*Deductible	Out-of-Pocket Maximum		2026 Annual Employee Premium Contributions	2026 Annual Employer HSA Contributions	**Maximum Employee Exposure
SIMPLY BLUE HSA 1700	<u>Single</u>	\$1,700	\$2,500	Employee	\$2,366.00	N/A	\$4,866.00
	<u>Family</u>	\$3,400	\$5,000	EE + Spouse	\$5,226.00	N/A	\$10,226.00
				EE + Child	\$5,226.00	N/A	\$10,226.00
				Family	\$6,604.00	N/A	\$11,604.00
SIMPLY BLUE HSA 3250	<u>Single</u>	\$3,250	\$3,675	Employee	\$988.00	\$1,100	\$3,563.00
	<u>Family</u>	\$6,450	\$7,350	EE + Spouse	\$2,678.00	\$2,200	\$7,828.00
				EE + Child	\$2,678.00	\$2,200	\$7,828.00
				Family	\$3,406.00	\$2,200	\$8,556.00

*Aggregate deductible - one overall deductible applies to you and all of your dependents combined.

**Includes deductible, out-of-pocket maximum, employee contributions & employer HSA contribution.

If you select **Simply Blue HSA 3250**, Christman will contribute the following amounts to your Health Savings Account (HSA) based on your pay schedule:

Bi-Weekly Pay Period

Single: \$1,100 annually (\$42.31 per pay for 26 pay periods)
 2-person/Family: \$2,200 annually (\$84.62 per pay for 26 pay periods)

Weekly Pay Period

Single: \$1,100 annually (\$21.15 per pay for 52 pay periods)
 2-person/Family: \$2,200 annually (\$42.31 per pay for 52 pay periods)

For specific plan details, see the benefit summaries.

If a new hire fails to enroll by their benefit enrollment deadline, they will be automatically enrolled into the BCBS SB HSA 1700 medical plan with single coverage. The employee contribution will be the responsibility of the employee and deducted from the employee's paycheck. No other changes will be allowed until the following open enrollment period.

	Bi-Weekly		Weekly	
	With Wellness	Without Wellness	With Wellness	Without Wellness
Coverage Status	Simply Blue HSA 1700			
Employee	\$71.00	\$91.00	\$35.50	\$45.50
EE + Spouse	\$181.00	\$201.00	\$90.50	\$100.50
EE + Child	\$181.00	\$201.00	\$90.50	\$100.50
Family	\$234.00	\$254.00	\$117.00	\$127.00
Coverage Status	Simply Blue HSA 3250			
Employee	\$18.00	\$38.00	\$9.00	\$19.00
EE + Spouse	\$83.00	\$103.00	\$41.50	\$51.50
EE + Child	\$83.00	\$103.00	\$41.50	\$51.50
Family	\$111.00	\$131.00	\$55.50	\$65.50

SPOUSAL SURCHARGE

Any working spouse that has access to health insurance through their employer, but chooses to enroll in Christman's plan instead, will incur a spousal surcharge. All employees with spouses enrolled in one of Christman's medical plans will be required to verify the spouse's employment status prior to the 2026 benefit year. If this verification is not complete, the non-refundable spousal surcharge will be applied.

Surcharge amount: \$50 per pay for bi-weekly payroll or \$25.00 per pay for weekly payroll



MEDICAL SOLUTIONS

Additional detailed information is available at bcbsm.com.

Click on or scan the below QR codes to learn more about the BCBSM programs available to you at no additional cost.

ACCESS TO CARE

Network options, benefits and cost management innovations that save.



Virtual Care by Teladoc Health

Convenient, high quality virtual options for non-emergency care that's always there - minor illnesses and mental health.

Choices for Care

Helps you avoid costly ER visits and get the care you need quickly and conveniently.



IMPROVED CARE

Solutions to better manage care and address specific health and well-being needs.



Maternity and Menopause through Maven

Virtual programs to fully support family building (pregnancy/postpartum) and woman's health.

Chronic Conditions Management - care for diabetes, hypertension, weight management through Teladoc Health

Personalized support centered around your day-to-day needs of living with chronic or complex conditions.



Behavioral Health Care through Teladoc Health, AbleTo, Quartet, and more

Helps you manage everyday stress to substance abuse and provides several convenient ways to get confidential help.

Health and Well-Being through Personify Health

Gives you access to various online tools and resources to help you build healthy habits and improve your overall well-being journey.



Virtual Muscle and Joint Health

Personalized access to virtual care through the **Hinge Health app** for pain prevention and management, short-term and long-term pain, pelvic floor strength, and surgery preparation and recovery.

- **Virtual Care** is included with your BCBSM medical plan. A virtual medical visit usually costs the same as an office visit copay and the cost for a virtual mental health visit varies. You will see the total amount before you start your visit.

VIRTUAL CARE THAT'S ALWAYS THERE

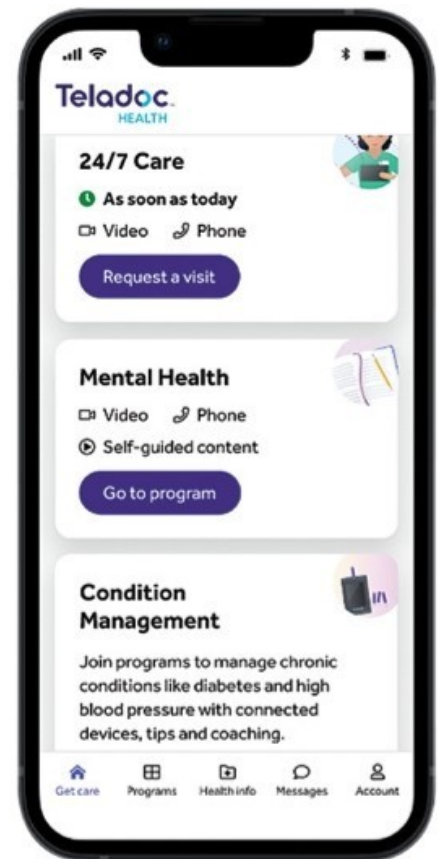
With **Virtual Care** by Teladoc Health, you and everyone on your health plan can get virtual medical and mental health care from a smartphone, tablet, or computer.

24/7 ACCESS TO CARE TEAM

Have a virtual visit with a U.S. board-certified doctor for minor illnesses such as colds, sore throats, urinary tract infections, and pink eye. Visits are available for adults and children and you don't need an appointment. Prescriptions, if needed, can be sent to your preferred pharmacy.

PRIVATE AND CONFIDENTIAL VIRTUAL MENTAL HEALTH CARE

With **Virtual Care** by Teladoc Health, you can have virtual visits with licensed therapists, psychologists, social workers, and counselors, and U.S. board-certified psychiatrists from the comfort of home at a convenient time. This option requires an appointment and provides ongoing support for stressful situations or issues such as grief, anxiety, and depression.



Scan the QR code for additional information about Virtual Care and how to sign up on the Teladoc Health app.





MATERNITY & MENOPAUSE PROGRAMS

Additional detailed information is available at bcbsm.com

No cost digital health support for pregnancy and menopause journeys.



Maternity Program - This 24/7 virtual program provides full support during pregnancy and postpartum including:

- Comprehensive prenatal and postpartum care navigation
- High-risk pregnancy management
- Early detection for risk factors
- Support for parents with an infant in the NICU and for parents who have experienced a loss
- Help preparing for returning to work
- Content and support tools specific to each week of pregnancy

Menopause Program - Gives instant access to expert advice and resources for:

- Early identification of menopausal symptoms and treatment guidance
- 24/7 virtual access to coaching care team specializing in perimenopause, menopause, and post-menopause
- Guided education and in-app communities to connect with others in the same stage of life
- One-on-one mental health support

Key features

Through the Maven app, you will receive full access to:

- A dedicated care advocate to answer your questions
- Personalized, interactive resources and on-demand classes
- Unlimited virtual appointments and messaging with various types of doctors, specialists, and coaches



Use the QR Code for more details and how to sign up on the Maven app.



PARENTING & PEDIATRICS AND FAMILY BUILDING

No cost digital health support for parenthood and family building.

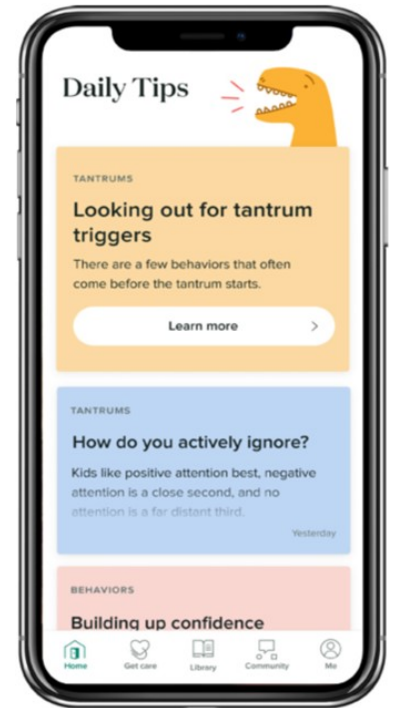
The digital family building and maternity programs through Maven provide full support through the multiple paths to parenthood, pregnancy, and postpartum. They also include access to 24/7 video appointments with clinical coaches and personalized, interactive content. You or anyone on your health plan can enroll and participate at **no cost**.

Family Building Program: *This program helps guide and inform you of the many paths to parenthood that you can choose to expand your family. It provides support (not benefits) for:*

- Pre-pregnancy care
- Egg freezing
- Intrauterine insemination (IUI) & in vitro fertilization (IVF)
- Adoption and surrogacy

Parenting & Pediatrics Program - *This program supports parents raising children ages 1 to 10:*

- 24/7 access to pediatric providers, including developmental psychologists, occupational therapists, and special needs advocates
- Expert navigation to childcare and education partners, including nanny shares, live tutors, and virtual sitters
- Mental health support and career coaching to ease the anxieties of parenting
- A daily curriculum specific to each stage of childhood development to build stronger parent-child relationships



Key features

Through the Maven app, you will receive full access to:

- A dedicated care advocate to answer your questions
- Personalized, interactive resources and on-demand classes
- Unlimited virtual appointments and messaging with various types of



Scan the QR code to learn more about these programs and how to sign up on the Maven app.



DIABETES, HYPERTENSION & WEIGHT MANAGEMENT PROGRAMS



Teladoc[®]
HEALTH

An advanced blood glucose meter and blood pressure monitor, plus the support you need.

Available to you as part of your medical plan at no extra cost, and you can stay on track with your care in one place through the Teladoc Health app (formerly Livongo).

Diabetes Management

- Advanced blood glucose meter
- Unlimited strips and lancets

Hypertension Management

- Connected blood pressure monitor
- Digital reports

Healthy Living & Diabetes Prevention

- Smart scale
- Expert guidance

Weight Management

- One-on-one coaching
- Personalized plans

Get Started

Call **800.835.2362** to learn more and join.

Use code: **BCBSM**

Or use the QR code to enroll online.





CANCER EXPERT NOW



SCAN TO VISIT
OUR WEBSITE

CANCER EXPERT NOW

WELCOME TO CANCER EXPERT NOW

If you or your family member have been diagnosed with cancer, we are here for you. Contact us to connect with one of the world's top cancer doctors — all from the comfort of your home.

CANCER EXPERT NOW

CANCER EDUCATION JUST GOT PERSONAL™

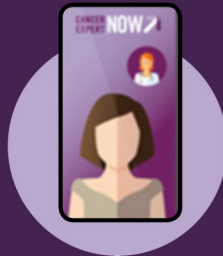
Learn more: email carenavigator@onviv.com
or call 1-855-946-5735
or visit cancerexpertnow.com/access/welcome

**All eligible employees receive coverage at no cost to them.
Coverage extends to your family: spouse, partner, dependents, parents, & in-laws.**

A leading cancer expert at your side—we work with leading Centers of Excellence (COE)s to connect our members with leading experts who specialize in the member's cancer type.

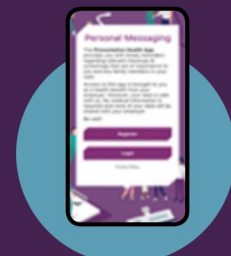
A premier benefit

White glove cancer concierge and expert opinions supports members, families, employers globally



Clinical Advocacy, Coordination and Navigation

Understand options for appropriate sites of care, local clinicians and resources



Oncology Expert Opinions

Thought leaders curated from the leading COEs to provide authoritative insights into the complexity surrounding treatment decisions



Education for All and Early Intervention

Cancer Awareness Program featuring Oncology Experts to answer member questions and promote wellbeing



HEALTH SAVINGS ACCOUNTS

We are pleased to offer you a Health Savings Account (HSA) option. This program is designated to give you greater control in managing your health and funding your health care services. Keep in mind, you can only contribute to an HSA if you enroll in a HSA Qualifying Plan. Both Christman plans qualify.

An HSA combines a high-deductible health plan (HDHP) with a tax-free individually owned savings account. Money in the savings account can help pay for your qualified medical expenses, or you can save and use it for qualified medical expenses when you retire. The balance in your HSA rolls over from year to year and the account earns interest and is yours to keep, even if you leave the company.

HSAs are designated to provide participants with triple tax benefits. The following are tax-free:

- HSA contributions
- Interest and other earnings on HSA contributions
- Amounts distributed from an HSA for qualified medical expenses

You are eligible for an HSA if you are:

- Covered by a HDHP
- Not enrolled under another medical plan that is not a HDHP
- Not entitled to (eligible for AND enrolled in) Medicare benefits
- Not eligible to be claimed on another persons tax return
- Not covered by a Health FSA funded by your spouse

Wex Investment options

You can invest your HSA funds in an interest-bearing account or our standard mutual fund lineup. Savvy investors may opt for a Health Savings Brokerage Account powered by Charles Schwab, giving you access to more than 8,500 mutual funds, stocks and bonds.

You can make pre-tax contributions to your HSA through regular payroll deductions. You may increase or decrease your payroll contributions throughout the year. It's the employees responsibility to maintain receipts for qualified expenses. HSA funds used for non-qualified IRS expenses will incur a 20% penalty and be considered taxable income.

The Christman Company will continue to partner with Wex. All new HSA bank account owners may open an account with Wex. For all Wex account holders there will be a \$1.75 per month administrative fee. Wex has an array of resources and investment options at your fingertips to help you manage your HSA account. We also have information on how to transfer HSA funds to Wex located on CuConnect or Christman Connections.

HOW MUCH CAN I CONTRIBUTE TO MY HSA?

	2025	2026
Single Coverage	\$4,300	\$4,400
Family Coverage	\$8,550	\$8,750
Catch up Contributions*	\$1,000	\$1,000

*If you are age 55 or older, you can make an additional catch-up contribution. The maximum IRS contribution for the year includes the sum of all employee and employer contributions. For more information, visit www.irs.gov/publications/p969.

Access your benefits anytime, anywhere

Access your benefits on the go 24/7 with the Benefits Mobile App by Wex. Our free app gives you convenient, real-time access to all your benefit accounts in one spot. This makes it easy to use your hard-earned dollars and view recent account activity without ever needing to call in.

The Benefits Mobile App keeps your benefits always within reach. Want to know the status of a recent claim or easily check the balance of your accounts? Log in to our secure app to get answers to those questions and so many more - wherever and whenever you want.

EMPLOYER CONTRIBUTIONS

See Page 5



DENTAL & VISION

IN-NETWORK COVERAGE OPTIONS

Please refer to your benefit summaries for out-of-network coverage and additional plan details.

BENEFITS	DELTA DENTAL In-Network Member's Responsibility	
	Deductible	None
Diagnostic & Preventive	Covered 100%	
Basic Services	50%	
Major Services	50%	
Maximum Payment	\$1,500 per person total per calendar year	
Orthodontics (children under age 19)	50%; \$1,500 lifetime maximum	
<u>EMPLOYEE CONTRIBUTIONS</u>	<u>BI-WEEKLY</u>	<u>WEEKLY</u>
Employee Only	\$5.00	\$2.50
Employee + Spouse	\$10.00	\$5.00
Employee + Child	\$10.00	\$5.00
Family	\$19.00	\$9.50

BENEFITS	VSP VISION VSP Preferred Provider Member's Responsibility	
	Eye Exam (once every 12 months)	\$5 copay
Standard Lenses (one pair every 12 months)	\$10 copay (one copay applies to both lenses and frames)	
Standard Frames (one frame every 12 months)	\$130 allowance	
Medically Necessary Contact Lenses (once every 12 months)	\$10 copay (requires prior authorization approval from VSP and must meet criteria of medically necessary)	
Elective Contact Lenses (once every 12 months)	\$130 allowance	
<u>EMPLOYEE CONTRIBUTIONS</u>	<u>BI-WEEKLY</u>	<u>WEEKLY</u>
Employee Only	\$2.00	\$1.00
Employee + Spouse	\$3.00	\$1.50
Employee + Child	\$3.00	\$1.50
Family	\$5.00	\$2.50



LIFE & DISABILITY

EMPLOYER PAID COVERAGES

UNUM

EMPLOYER PAID LIFE/AD&D INSURANCE

- **Benefit Amount:** 1x annual salary up to \$300,000

UNUM

EMPLOYER PAID SHORT-TERM DISABILITY

- **Weekly Benefit Amount:** 70% of weekly salary up to \$2,000 per week
- **Elimination Period:** Benefits begin on the 8th day of injury/illness
- **Maximum Benefit Period:** 12 weeks

UNUM

EMPLOYER PAID LONG-TERM DISABILITY

- **Monthly Benefit Amount:** 60% of monthly salary up to \$8,000 per month
- **Elimination Period:** 90 days
- **Maximum Benefit Period:** To age 65 or Social Security Normal Retirement Age

UNUM

TRAVEL ASSIST

Worldwide Emergency Travel Assistance services are available to you with just one phone call. When traveling for business or pleasure, in a foreign country or just 100 miles or more away from home, you and your family can count on getting help in the event of a medical emergency.

Within in the U.S.: 800.872.1414 | Outside the U.S.: +1 609.986.1234 | medservices@assistamerica.com

HOSPITAL INDEMNITY DISCLOSURE

PLEASE REVIEW

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](https://www.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](https://www.naic.org)) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.

VOLUNTARY COVERAGES

COVERAGE OPTIONS

Please refer to your benefit summaries for additional plan details.

EMPLOYEE PAID COVERAGES

Monthly Voluntary Life and Accidental Death & Dismemberment rates per \$1,000

UNUM EMPLOYEE PAID VOLUNTARY LIFE & AD&D

EMPLOYEE
Benefit amount: Additional 1x, 2x, or 3x annual earnings up to \$600,000 combined Basic and Voluntary

Employee Coverage Amount		Increment		Rate		Monthly Cost	
Life	\$	÷	\$1,000	X	\$	=	\$
AD&D	\$	÷	\$1,000	X	\$0.01	=	\$
TOTAL						=	\$

To determine your per paycheck cost, multiply monthly cost x 12 then divide by your number of annual paychecks. Your rate is based on your age on January 1st each year.

Age	Monthly Rate Per \$1,000
<25	\$0.048
25-29	\$0.054
30-34	\$0.076
35-39	\$0.117
40-44	\$0.184
45-49	\$0.291
50-54	\$0.434
55-59	\$0.626
60-64	\$0.807
65-69	\$1.153
70-74	\$2.190
75-99	\$6.788
AD&D	\$0.01

LIFE BENEFIT—SPOUSE/DEPENDENT

BENEFIT OPTIONS	SPOUSE	DEPENDENT	RATE
OPTION A	\$50,000	\$10,000	\$12.50
OPTION B	\$40,000	\$10,000	\$10.00
OPTION C	\$30,000	\$10,000	\$7.50
OPTION D	\$20,000	\$10,000	\$5.00
OPTION E	\$10,000	\$5,000	\$2.50

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

UNUM EMPLOYEE PAID HOSPITAL INDEMNITY

Hospital Indemnity Insurance is designed to help covered employees meet the out-of-pocket expenses and extra bills that come with a hospital stay. These benefits are available for you, your spouse, and eligible dependent children.

Some covered conditions include: Admission to hospital and confinement

Please see the Unum Hospital Indemnity benefit summary for rates and a full list of covered benefits.

UNUM EMPLOYEE PAID VOLUNTARY ACCIDENT INSURANCE

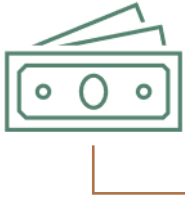
Group Accident Insurance from Unum offers benefits that can pay a set benefit amount based on the type of injury you have and the type of treatment you need. It covers accidents that occur on and off the job. **More than 50 benefits including:** Hospital Admission/Confinement, Ambulance, Emergency Room Treatment, Physical Therapy, Fractures and Dislocations, Transportation, Accidental Death & Dismemberment, and Wellness.

Please see the Unum Accident Insurance benefit summary for rates and a full list of covered benefits.

UNUM EMPLOYEE PAID VOLUNTARY CRITICAL ILLNESS INSURANCE

Group Critical Illness Insurance from Unum offers benefits that pays a lump sum payment if you're diagnosed with an illness that is covered by this insurance. **Benefits Include Lump-Sum Benefit For:** Internal/Invasive Cancer, Heart Attack, Stroke, Paralysis, Burns, Kidney Failure, Loss of Speech, Loss of Sight or Hearing, Bone Marrow Transplant, Coma, Sudden Cardiac Arrest, and Wellness.

Please see the Unum Critical Insurance benefit summary for rates and a full list of covered benefits.



DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT



A Dependent Care Flexible Spending Account (DC-FSA or DCAP) allows you to set aside a portion of your pay pre-tax to use for eligible dependent care expenses, such as child care or day care. *Remember: the expense must be primarily for the care of a qualifying individual; and the expense must be incurred in order to enable the employee (and the employee's spouse) to be gainfully employed.*

You can save up to 30% on your dollar (depending on your tax bracket) by estimating how much you usually spend on these types of expenses in a year and setting aside that dollar amount into your DC-FSA.

DEPENDENT CARE FSA

Maximum annual election amount: \$7,500

The example below is based on an annual salary of \$50,000 and an annual FSA election of \$1,200. Payroll taxes calculated to assume federal and state taxes, Social Security and Medicare.

WITHOUT THE FSA	
Monthly gross earnings	\$4,167
Taxable income	\$4,167
Payroll taxes	-\$1,292
Net Income	\$2,875
Dependent Care expenses	-\$100
Total home pay	\$2,775
WITH THE FSA	
Monthly gross earnings	\$4,167
Dependent Care expenses	-\$100
Taxable income	\$4,067
Payroll taxes	-\$1,260
Net Income	\$2,807
Total home pay	\$2,807
Estimated monthly savings: \$32	
Estimated annual savings: \$384	

If you received and used a Debit card in 2025, you will simply keep and use the same card in 2026.

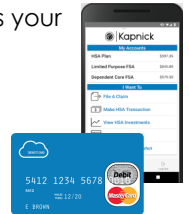
HOW TO ACCESS YOUR FUNDS

Paper Claim: Fax or email Kapnick

Debit Card: When you enroll in the FSA, Kapnick will provide you with two Benny Cards, a MasterCard with the value of your account contribution stored on it (there is a \$10 replacement fee for lost or stolen cards).

Kapnick FSA Mobile App: The Kapnick FSA Mobile App allows you to easily and securely access your healthcare accounts to:

- View account balance and detail
- Submit healthcare account claims
- Capture and upload pictures of your receipts anytime



The Kapnick FSA Mobile App can be located by searching Kapnick FSA in the app store or browser on your mobile device.

FSA RULES TO REMEMBER

RUN-OUT PERIOD (PROOF OF LOSS): Active participants have until March 31, 2027 to submit expenses incurred during the plan year. If you terminate employment during the plan year, you have 90-days from your separation date to submit eligible expenses for reimbursement.

MY BENNY Debit Card

For your convenience, you can view your account balance as well as monitor your card activity from the MyBenny card site. You can access MyBenny card anytime 24 hours a day, 7 days a week once you have activated your account. It's as easy as 1, 2, 3.

1. Go to KIGFlex.lh1ondemand.com
2. Enter your **login ID and password**
 - Your initial login ID and password are auto generated and consists of the following (use member's information for login and password set up)
 - **Login ID:** First Name Initial, Last Name (lower-case), Last 4 Digits of Social Security Number
 - **Password:** First Name (lower-case), Last 5 Digits of Social Security Number
3. Click Login

2026 CHRISTMAN BUILD WELLNESS PROGRAM



WHAT IS KAPNICK STRIVE?

Kapnick Strive supports The Christman Company's commitment to a culture of health and wellness. Our goal is to help you achieve your better health today by providing education, support, resources, and rewards. Kapnick Strive is also a way to proactively manage healthcare costs by helping participants maintain and improve their health. By participating in the Kapnick Strive Worksite Well-Being program, you may be eligible to earn a financial incentive. Kapnick Strives' comprehensive program includes the following benefits:

KAPNICK STRIVE BENEFITS:	ALL EMPLOYEES
Online health risk assessment	√
Access to a comprehensive wellness	√
Reward points program	√
Online challenges and tracking tools	√
Discounts with the wellness outlet	√
Strive Wellness Presentations	√
Monthly Wellness Webinars	√
Online Health coaching	√

STRIVE REWARD POINTS PROGRAM DETAILS:

Employees are eligible to earn Strive Reward Points to win quarterly and annual prizes. These points can be earned by completing and submitting various healthy activities inside and outside of work.

HOW TO ACCESS YOUR WELLNESS PORTAL:

- 1) Visit your wellness portal:
 - Go to kapnickstrive.com/ChristmanCo
 - Click log in (if this is your first time on the portal, you will need to click "sign-up")
 - It will prompt you to complete the HRA upon logging in (you must complete your HRA after 1/1/2026)

REWARD POINT STRUCTURE:

2026 QUARTERLY PRIZES	2026 ANNUAL PRIZE
\$25 Gift Card	Prize valued at \$500
How to qualify: Earn 600 points on your portal per quarter	How to enter: Earn 2,400 points on your portal by 12/18/2026



USE THE MYWELL APP:

You can access your Strive Wellness Portal from your phone:

- 1) Visit your portal on a computer (www.kapnickstrive.com) to get your mobile access code:
 - Click on your avatar
 - Select mobile access
 - Select NEW
 - Save your code
- 2) Visit your phone's app store and download MyWellApp by CoreHealth. Enter your mobile access code after waiting 1 to 2 minutes.

THE CHRISTMAN COMPANY PROFIT SHARING RETIREMENT PLAN (“PLAN”)

RETIREMENT

All full-time, benefit eligible employees* over the age of 21, are eligible for the Plan. The Plan is administered by The Christman Company, with all monies being placed in trust with a securities brokerage firm.

401(k): On the first of the month following 30 days of employment, you are eligible for the 401(k) portion of the plan and may make pre-tax contributions through convenient payroll deductions. You are 100% vested in the 401(k) portion of the Plan. The 401(k) includes any contributions that you make as well as any discretionary Safe-Harbor contributions (up to 3%) made by the company.

Profit Sharing: All full-time, benefit eligible* employees over the age of 21 enter the Plan on the first of the month following 30 days of employment.

You are on a five year, graded vesting schedule for the profit sharing portion of the Plan. At two years of service, and at least 1,000 hours worked each year, you are 40% vested with an increase of 20% each year (with at least 1,000 hours worked) until you reach 100% vesting (5 years of service). If you have less than two years of service, you have 0% vesting.

Visit the Christman site for plan materials and more details.

**Part-time, temporary, and seasonal employees, including interns, are eligible to make 401(k) contributions. They may be eligible for Christman contributions as outlined in the SPD.*

Taking steps today can help brighten your future!

There's no better time than the present to start taking advantage of your organization's retirement plan. It's a good move. And it helps you get on the path to save for your future. Here's how simple it is to save:

- Have your regular contribution automatically withdrawn from your paycheck. You'll be saving without even thinking about it.
- Increase your immediate tax savings by simply boosting your pre-tax contributions.
- Review your options during the enrollment process to choose the investment allocation that matches your goals. And it's easy to revisit and update your elections anytime.

Account Access

Website: www.principal.com

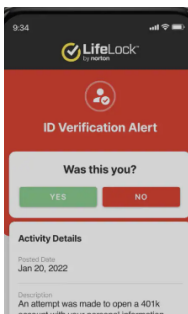
1. Click “Log In”
2. Enter your username and password (click Forgot Username or Forgot Password if you need to reset)
3. If you're logging in from a new device, resetting your username or password, or you've opted to use verification codes every time you log in, you'll receive a security code via text message, voice call, or authentication app
4. Enter the security code and click “Verify”

If logging in for the first time, go to www.principal.com/Welcome and select “Get Started”



Enroll in LifeLock for identity theft protection that protects you when you need it most.

You have a home security system that alerts you if someone tries to burglarize your house. To help protect you and your family, you need an alert system for your identity. When LifeLock detects suspicious activity within their network, they notify members. LifeLock detection is different than traditional credit monitoring and offers a set of features to help protect against identity theft. As an industry leader, LifeLock provides identity theft protection.



- See your personal data
- Manage it with real time alerts
- Protect your identity and finances from fraud

Sign up during open enrollment

lifelock.norton.com

Questions? 1.844.530.9892

Plans and Pricing
LifeLock Benefit Essential

\$8.49 per person/per month

\$14.86 per family/per month

*Please see your plan summary for details on this voluntary coverage.

Legal Plans

Provides access to legal expertise for both expected and unexpected events.

Legal experts on your side, whenever you need them.

For **\$22.75 a month**, you get legal assistance for some of the most frequently needed personal legal matters—with no waiting periods, no deductibles and no claim forms, when using a Network Attorney for a covered matter.

- Money Matters
- Home & Real Estate
- Estate Planning
- Family & Personal
- Civil Lawsuits
- Elder-Care Issues
- Vehicle & Driving
- E-Services

To learn more, visit members.legalplans.com or call **800.821.6400**

Monday—Friday
8:00 am—8:00 pm (EST/EDT)

*Please see your plan summary for details on this voluntary coverage.





EMPLOYEE ASSISTANCE PROGRAM (EAP)



Ulliance EAP is a free benefit to you and your family and is totally confidential, beginning with your first phone call. The EAP benefit is available to you, to your spouse or live-in-partner, and any dependent.

Call **1.800.448.8326**, 24/7 with personal concerns, including:

- Personal and work stress
- Alcohol and drug abuse
- Family, child and parenting concerns
- Emotional difficulties—i.e., depression/anxiety
- Grief, loss, and death
- Legal and financial referrals
- Interpersonal relationships at work
- Marital or relationship concerns
- Goal setting and coaching
- Elder/child care referrals

WORK-LIFE RESOURCES

You have access to free brochures, pamphlets, books and CDs on a variety of topics by visiting:

www.lifeadvisor.com

Username: The Christman Company

City: Lansing

- Money & debt
- Stress management
- Getting in shape
- Creative problem solving
- Ergonomics
- Parent & step parenting
- Child care
- Overcoming anger
- Save your relationship
- Elder care

Ulliance is proud to offer you FREE access to the Working Advantage members-only program! This unique program gives you access to exclusive discounts and special offers to theme parks, shopping, movie tickets, hotels, Broadway shows and much more—with savings up to 60% off! www.workingadvantage.com/ulliance.

TOOLS YOU CAN USE

To serve your individual needs, Ulliance can also find information and resources in your area to address your specific questions—including finding referrals outside the EAP to Lawyers and Financial resources. You can also check out Ulliance's website for a wide variety of articles, list of services and links to other websites.





VOLUNTARY PET INSURANCE



To get a quote or enroll go to www.metlife.com/getpetquote or call 1 800 GET-MET8.



What's covered:

- ✓ Accidental injuries
- ✓ Illnesses
- ✓ Exam Fees
- ✓ Surgeries
- ✓ Medications
- ✓ Ultrasounds
- ✓ Hospital Stays
- ✓ X-rays and diagnostic tests

Coverage also includes:

- ✓ Hip Dysplasia
- ✓ Hereditary Conditions
- ✓ Congenital Conditions
- ✓ Chronic Conditions
- ✓ Alternative Therapies
- ✓ Holistic Care
- ✓ And much more!

Why is pet insurance important?

Now more than ever, pets are playing a significant role in our lives, and it is important to keep them safe and healthy. **Help make sure your furry family members are protected against unplanned vet expenses for covered** accidents or illnesses with MetLife Pet Insurance.

- A small monthly payment can help you prepare for unexpected vet expenses down the road
- More than **6 in 10** pet owners said their pet has had an emergency medical expense
- 24% of **pet parents have credit card or personal loan debt** to cover pet health and vet costs
- Average annual cost for a routine vet visit is **\$212 for a dog** and **\$160 for a cat**; and average annual cost for a surgical vet visit is **\$426** for a dog and **\$214** for a cat
- Pet insurance may not cover pre-existing conditions

...so there's no better time than now to protect your furry family members.



WHO SHOULD I CALL FOR ASSISTANCE?

Most of the day to day administration of your employee benefits coverage can be accomplished directly with the insurance providers either through their websites or customer service telephone numbers.

In the event you run into problems that cannot be resolved directly with the insurance companies, please contact benefits@christmanco.com.



BENEFITS DEPARTMENT	MEDICAL/RX	DENTAL	VISION
The Christman Company Email: benefits@christmanco.com Website: https://christmanco.sharepoint.com/sites/Home	Blue Cross Blue Shield of Michigan Phone Number: 877.354.2583 Website: www.bcbsm.com	Delta Dental Phone Number: 800.524.0149 Website: www.deltadentalmi.com	VSP Phone Number: 800.877.7195 Website: www.vsp.com



HEALTH SAVING ACCOUNT	LIFE/AD&D/STD/LTD	HOSPITAL INDEMNITY/CRITICAL ILLNESS/ACCIDENT	EMPLOYEE ASSISTANCE PROGRAM (EAP)
Wex Phone Number: 866.451.3399 Website: www.wexinc.com	Unum Phone Number: 800.421.0344 Website: www.unum.com	Unum Phone Number: 800.635.5597 Website: www.unum.com	Ulliance Phone Number: 800.448.8326 Website: www.lifeadvisorwellness.com



ID THEFT PROTECTION	PET INSURANCE	METLAW LEGAL PLAN	DEPENDENT CARE FSA
LifeLock Phone Number: 800.607.9174 Website: www.my.norton.com	MetLife Phone Number: 855.270.7387 Email: pet_info@metlife.com Website: www.metlifepetinsurance.com	MetLife Phone Number: 800.821.6400 Website: www.info.legalplans.com	Kapnick Phone Number: 800.550.3539 Email: flex@kapnick.com

CHRISTMAN

BUILDING SINCE 1894

