2027 Benefits Guide

Well-being: Your life. Your way.

Esta guía está disponible en español en www.usvbenefits.com.

Your Benefits Guide

At U.S. Venture, we offer benefits that support your health, well-being, and financial future. This guide explains the benefits available to you and your eligible family members.

Whether you're enrolling in benefits, new to the company, or looking for information during the year, this guide can help you understand your options and get the most from your benefits. Use the table of contents to find the information you need.

Hired in November or December 2026?

You will need to enroll twice:

- For benefits through December 31, 2026
- For 2027 benefits starting January 1, 2027

Hired in 2027?

You only need to enroll once, within 30 days of your hire date.

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What's new for 2027

Here are the updates to know before you choose. Be sure to visit **www.usvbenefits.com** for more details on these plans and other benefits that are available to you.

Dental

Porcelain crowns will be covered under both plans. The orthodontia lifetime maximum will increase from $1,500 to $2,000 in the Comprehensive Plan. If you have special health care needs, you may qualify for up to four cleanings per year and other support.

Health Savings Account (HSA) limits

The 2027 HSA contribution limit is $4,500 for employee-only coverage and $9,000 for family coverage. If you are age 55 or older, you may contribute an additional $1,000 catch-up contribution. These limits include the Company contribution.
To receive the Company contribution, you must enroll in an HSA account in Workday.

Vision

Both vision plans will offer a $150 allowance for frames and contact lenses in-network. The Materials Only Plan will have a small increase in the amount deducted from your paycheck.

NOTE: *Your Anthem medical plan covers routine eye exams. Choose Materials Only if you just need help paying for glasses or contacts.*

Legal

You can choose between a Low and High Plan. The High Plan offers coverage for parents, parents-in-law and grandparents. It also includes up to 20 hours of divorce services.

NOTE: *Legal coverage will not carry over, so you must enroll again for 2027.*

New well-being support

Nutritional support

Starting in 2027, we will offer nutrition-based support for diabetes care and healthy weight loss through **Virta Health**. It is available to you and your dependents, age 18 and over, who are enrolled in an Anthem medical plan and meet the program's health requirements. Virta includes online tools, personal coaching and support from health professionals.

Well-being hub

Starting January 1, 2027, you'll have one place to find your well-being programs and tools. This includes your Personal Health Assessment (PHA), health coaching, well-being challenges, and tools to help you build healthy habits and reach your goals.

Navigate brings these programs and tools together, making it easier to find and use your well-being benefits. It replaces Walkingspree, which ended September 30, 2026, as well as Noom and Marquee Health, which will end December 31, 2026.

Eligibility & Enrollment

Your Action Is Needed

Complete your Open Enrollment task in Workday to review your benefits and make your 2027 elections.

- Medical, dental and vision coverage will continue if you don't make a change.
- HSA, FSA, Legal and ID Theft require a new election.
- Review all your benefits and make any changes you want for 2027.

New hire? You must complete your New Hire Enrollment task in Workday within 30 days of your hire date to enroll in benefits.

After the enrollment period ends, you generally cannot enroll or make changes to your benefits until the next enrollment period unless you have a qualifying life event (QLE).

Who is eligible?

Eligible team members

You can enroll in U.S. Venture benefits if you:

- Work full time, or
- Work part-time and average 30 or more hours each week during the October-to-October measurement period.

If you work part-time and are scheduled to work 20 to 29 hours each week, you may be eligible for some benefits.

Most benefits begin on your hire date. Check the chart to see which benefits are available to you. For more details, see the Benefits Waiting Period table on page 52.

Benefits available to part-time team members (20 to 29 Hours per Week)

Benefit	Details
Medical	Can enroll only in the HDHP — HSA Eligible medical plan without receiving a company contribution
Dental	Can enroll in the Basic Plan
Vision	Available
Life Insurance	Available
Short-Term Disability	Available
Sick-Safe Time Off	Prorated based on full-time equivalent schedule and state laws
Caregiver Benefit	Prorated based on full-time equivalent (FTE) schedule
Holidays	Eligible only if the holiday falls on your scheduled workday
Vacation/Personal Time Off	Prorated based on full-time equivalent (FTE) schedule
Interactive Well-being Program	Available
Tuition Reimbursement	Up to $2,500 per year
Well-being Reimbursement	Available

Eligible dependents

You can enroll eligible family members in medical, dental, vision, dependent life insurance and some voluntary benefits. Eligible dependents include:

- Your legal spouse
- Your eligible domestic partner*
- Your children up to age 26

Important: A dependent can only be covered by one team member.

Your domestic partner must be at least age 18, have lived with you for at least six months, not married or legally separated from anyone else, share financial responsibilities with you and meet all plan requirements. Note: If adding a domestic partner, benefits may be taxable as applicable by law.

Dependent verification — ACTION REQUIRED

If you add a **new** spouse, domestic partner or child to your benefits, you must provide documentation to verify their eligibility. You don't need to provide these documents before coverage begins, but you must submit them **within 45 days of your coverage start date** or coverage may end.

If you add	You'll need to provide
Spouse	Marriage certificate
Domestic partner	Domestic Partner Affidavit and Agreement
Child	Birth certificate

If you enroll a domestic partner, you must complete a **Domestic Partner Affidavit and Agreement** each year. Send your completed affidavit to totalrewards@usventure.com.

When can you change your benefits?

After you enroll, you can only change your benefits if you have a qualifying life event (QLE). QLEs include:

- Marriage or divorce
- Birth or adoption of a child
- A child losing eligibility (such as turning 26)
- Gain or loss of other insurance coverage
- Ending a domestic partnership
- Death of a spouse, partner or dependent

Important: You must request your benefit change in Workday within 30 days of the event.

How to enroll

You can enroll in benefits through Workday when you become eligible and during Annual Open Enrollment.

To enroll in Workday:

1. Log in to Workday at www.myworkday.com/usventure
2. In the upper-right corner, select **My Tasks**. Then, open the benefit event that applies to you (i.e., Open Enrollment Change or Benefits Change - New Hire)
3. Click **Let's Get Started**
4. Make your elections
5. Click **Review and Sign** by selecting the electronic signature checkbox and **submit** your changes

Use the Choose Your 2027 Benefits guide at **www.usvbenefits.com** to help you decide what to consider as you complete your enrollment through Workday.

Have a Qualifying Life Event (QLE)?

Update your benefits in Workday

- Log in to Workday at www.myworkday.com/usventure
- Go to your profile (click picture in top right corner)
- Click **View Profile** and then click **Benefits**
- Select **Change Benefits**
- **Choose the reason** for your change
- **Enter the date of the qualifying event** (date coverage should start)
- Go to **My Tasks** to locate your Benefit Change and select **Let's Get Started**
- Update your benefit elections in the **benefit enrollment form**
- Click **Review and Sign** by selecting the electronic signature checkbox and submit your changes
- Send any required documents to totalrewards@usventure.com

What to Know Before You Choose a Medical Plan

Anthem

Choosing a medical plan can feel confusing. Before you review your options, see if you may qualify for other coverage and learn about the terms and costs that affect what you pay for care.

When comparing plans, ask yourself:

- What you'll pay from your paycheck
- Whether you prefer lower paycheck costs or lower costs when you need care
- If you want to save for healthcare expenses through a Health Savings Account or a Flexible Spending Account (FSA)

Do you qualify for other coverage?

Are you or your family members Medicare eligible? Living with a disability? Nearing retirement?

If so, before you enroll, call FEDlogic.

U.S. Venture has partnered with FEDlogic to provide a free and confidential service to help you find out if you qualify for other coverage or assistance programs like Medicare, Medicaid, disability and Veterans benefits.

A FEDlogic specialist can explain your options and help you understand whether these programs could lower your healthcare costs.

You can contact FEDlogic by calling **877-837-4196** or via email at **services@fedlogicgroup.com**.

Contact FEDlogic if you:

- Are turning 65
- Have a disability or have a family member with a disability
- Are caring for an aging parent or dependent
- Are planning for retirement
- Have a serious illness or medical condition
- Need help with high healthcare costs

Important key terms

Here are some key terms to know when comparing medical plans:

- **Annual Deductible:** The amount you pay out of your pocket before the plan begins paying benefits. Does not include copays
- **Coinsurance:** The share of the cost you pay after meeting the deductible
- **Copay:** A fixed dollar amount you pay for certain health services
- **Embedded Deductible:** Each family member must meet their own deductible before the plan begins to cover costs
- **In-Network Providers:** Doctors, hospitals and other healthcare providers that are part of your health plan's network
- **Out-of-Pocket Maximum:** The most you will pay for covered services during the year. This includes your deductible, coinsurance and copays
- **Premiums:** The amount you pay for coverage, deducted from your paycheck
- **Primary Care Physician (PCP):** A doctor you see for most of your basic healthcare needs

Medical / Prescription Drug Coverage

U.S. Venture offers three medical plan options through Anthem Blue Cross Blue Shield (BCBS). Each plan has different paycheck costs, deductibles and costs when you receive care. All three plans are available nationwide.

All Anthem BCBS medical plans:

- Cover in-network preventive care at 100% before you meet your deductible
- Allow you to see any provider you like (costs are lower if you use in-network providers)
- Cover the same types of medical services and prescription drugs
- Include prescription drug coverage and access to nationwide pharmacy network
- Have an out-of-pocket maximum to help protect you from high healthcare costs
- Offer virtual care through LiveHealth Online
- Include access to Total Health Connections and a dedicated Family Advocate

Tip

When choosing a plan, think about what works best for your budget and your healthcare needs. Plans with lower paycheck costs may require you to pay more when you receive care. Consider how you would pay for an unexpected medical expense.

Your medical options

The chart below provides a quick overview of each option. Additional details for each plan are provided in the following pages.

Anthem BCBS Copay Plan — Low Deductible	Anthem BCBS Copay Plan — High Deductible	Anthem BCBS High Deductible Health Plan (HDHP — HSA Eligible)
With this plan, you pay more from your paycheck, but your costs are easier to predict. You'll pay a set copay for doctor visits and prescription drugs.	This plan has the lowest paycheck cost of the three plans. It includes copays for some services, but you'll have a higher deductible and out-of-pocket maximum.	This plan has a higher deductible, but it lets you save pre-tax money for current and future healthcare expenses in a Health Savings Account (HSA). U.S. Venture also contributes money to your HSA.

Medical & Prescription Drug Coverage

Anthem BCBS Copay Plan — Low Deductible

The **Copay Plan — Low Deductible** offers the most predictable healthcare costs. You pay more in paycheck costs, but you generally pay less when you receive care.

This plan may be best if you...

- Expect to use medical services often
- Want lower costs when you receive care
- Would rather pay more out of your paycheck and less when you need care
- Like knowing what you'll pay for many doctor visits and prescriptions
- Do not want to pay a large amount before the plan helps cover costs

What makes this plan different...

- Highest paycheck costs of the three plans
- Lowest deductible
- Copays apply to many services, such as doctor visits and prescription drugs

Anthem BCBS Copay Plan — High Deductible

The **Copay Plan — High Deductible** can help you lower your paycheck costs. However, you'll generally pay more out-of-pocket when you receive care.

This plan may be best if you...

- Prefer to have lower paycheck costs than the Copay Plan — Low Deductible
- Are comfortable paying more when you receive care
- Do not expect to need much medical care during the year
- Like knowing your cost before you visit the doctor or fill a prescription
- Have savings set aside to cover the deductible

What makes this plan different...

- Higher deductible and out-of-pocket than under the Copay Plan — Low Deductible
- Copays apply to many services, such as doctor visits and prescription drugs
- You will pay the full cost of most covered services that don't have a copay until you meet your deductible

Anthem BCBS High Deductible Health Plan (HDHP — HSA Eligible)

The **HDHP — HSA Eligible medical plan** has lower paycheck costs, and gives you access to a Health Savings Account (HSA). U.S. Venture also contributes to your HSA if you enroll in the account. You will generally pay more upfront when you receive care under this plan.

This plan may be best if you...

- Want lower paycheck costs
- Want to save money in an HSA for healthcare expenses
- Are comfortable paying more when you receive care
- Want to use pre-tax dollars to pay for eligible healthcare expenses

What makes this plan different...

- Higher deductible
- You pay for doctors visits until you have met your deductible (no copays)
- You will pay the full cost of most covered services until you meet your deductible

Medical Coverage at a Glance

Plan Feature	Anthem BCBS Copay Plan – Low Deductible	Anthem BCBS Copay Plan – High Deductible	Anthem BCBS High Deductible Health Plan (HDHP – HSA Eligible)
Health Savings Account (HSA) U.S. Venture Annual Contribution (per pay period, prorated for new hires)	N/A	N/A	Employee only: $500 Employee + 1 or more: $1,000
Preventive Care	$0 (no deductible)	$0 (no deductible)	$0 (no deductible)
What You Pay for In-Network Coverage			
Annual Deductible	For medical care only		For medical care and prescription medications
Employee Only	$1,000	$3,000	$2,000
All Other Coverage Levels	$1,000 per person, $3,000 family max	$3,000 per person, $6,000 family max	$3,500 per person, $7,000 family max
What You Pay for Medical Care			
Primary Care Physician Office Visit	$25 copay		10% (after the deductible)
Specialist Office Visit	$50 copay		
Urgent Care Center	$50 copay		
Emergency Room	$300 copay; then 20% after the deductible		
Outpatient Hospital Services	20% (after the deductible)		
Inpatient Hospital Services	20% (after the deductible)		
Annual Out-of-Pocket Maximum for all medical and prescription expenses			
Employee Only	$4,500	$6,000	$6,000
All Other Coverage Levels	$4,500 per person $9,000 family max	$6,000 per person $12,000 family max	$6,000 per person, $12,000 family max

Prescription Coverage at a Glance

Plan Feature	Anthem BCBS Copay Plan – Low Deductible	Anthem BCBS Copay Plan – High Deductible	Anthem BCBS High Deductible Health Plan (HDHP – HSA Eligible)
What You Pay for Prescription Medications			
Preventive Medications on the Preventive Drug List			
Generic and Brands with No Generic	Copays in chart below will apply		$0 (no deductible)
Brands with Generic Available	Copays in chart below will apply		10% (after the deductible)

Plan Feature	Anthem BCBS Copay Plan – Low Deductible	Anthem BCBS Copay Plan – High Deductible	Anthem BCBS High Deductible Health Plan (HDHP – HSA Eligible)
Retail Pharmacy			
Tier 1 – Generics	$10 copay for 30-day supply; $30 copay for 90-day supply		10% (after the deductible)
Tier 2 – Brands/Preferred	$25 copay for 30-day supply; $75 copay for 90-day supply		
Tier 3 – Brands/Non-preferred	$50 copay for 30-day supply; $150 copay for 90-day supply		
Mail Order Pharmacy	**Up to a 90-Day Supply**		
Tier 1 – Generics	$25 copay		10% (after the deductible, unless medication in on the enhanced preventative drug list)
Tier 2 – Brands/Preferred	$62.50 copay		
Tier 3 – Brands/Non-preferred	$125 copay		
Specialty Medications			
Specialty Medications	$150 copay, 30-day supply only		10% (after the deductible, unless medication in on the enhanced preventative drug list)

Prescription medications

- Prescription drug coverage is provided through CarelonRx.
- Specialty medications are provided through BioPlus.
- You can fill prescriptions at network pharmacies nationwide.
- Contact your Anthem BCBS Family Advocate if you have questions at **844-614-3275**

Home delivery service

Save money on medications with a 90-day supply for less than the cost of three 30-day retail supplies. Your medication arrives safely at your door in plain packaging at no extra cost. CarelonRx will also let you know when a shipment is on the way. Make changes or cancel at any time.

Specialty medications

Specialty medications are covered when filled by BioPlus:

BioPlus' Cost Relief program may lower your cost for eligible specialty medications.

- If you're enrolled in the HDHP - HSA Eligible medical plan, you'll pay for eligible specialty medications until you meet your deductible. After that, eligible medications are available at no cost through the program.
- If you're enrolled in either Copay Medical Plan, eligible specialty medications are available at no cost through the program.

Need help?

Call a Cost Relief representative at **877-638-4008**, Monday through Friday, 8 a.m. to 8 p.m. ET. Language assistance is available at no cost (TTY: 711).

Preventive care

Preventive care can help you stay healthy and find potential health issues early. Under the U.S. Venture medical plans, many preventive services are covered at 100% when you use in-network providers.

Examples of preventive care include:

- Annual wellness exams
- Flu shots and other immunizations
- Mammograms and colon cancer screenings
- Routine blood work, including cholesterol and glucose screenings
- Routine eye exams

Preventive medications

If you're enrolled in the **HDHP — HSA Eligible medical plan,** certain generic preventive medications are covered at 100%

Examples include medications used to help prevent or manage high blood pressure, high cholesterol, coronary artery disease, and diabetes.

- Prescription drug coverage is provided through CarelonRx.
- Specialty medications are provided through BioPlus.
- You can fill prescriptions at network pharmacies nationwide.

Visit www.usvbenefits.com, the **Total Rewards SharePoint page**, or your **Anthem account** for a complete list of eligible preventive medications.

Tip

Talk with your doctor about the preventive care and screenings that may be right for you.

Total Health Connections

Total Health Connections gives you access to a dedicated **Family Advocate** who can help you understand your benefits and connect you with the care and resources you need.

Your Family Advocate can help you:

- Find in-network doctors and facilities
- Schedule appointments
- Understand your benefits
- Stay on track with preventive care
- Connect with programs and support resources

Additional resources available

- Clinical Advocates help coordinate care and provide support for ongoing health conditions.
- Inclusive Care connects LGBTQ+ members and families with specialized care and support.
- Building Healthy Families provides support for family planning, pregnancy, and raising children age 5 and under.
- Virtual primary care allows you to meet with a primary care provider through the Sydney Health App.
- Behavioral Health Resource Center helps connect you with mental health support and resources.

Mammograms and colonoscopies: Know what your plan pays

Preventive care
When billed as preventive care, mammograms and colonoscopies are covered at 100% under all Anthem plans. You pay no deductible or coinsurance.

First diagnostic test
Copay Plans: the first diagnostic mammogram or colonoscopy is covered at 100%.

HDHP - HSA Eligible: the deductible applies. Once you meet your deductible, the plan would cover at 100%.

Later diagnostic tests
For later diagnostic mammograms or colonoscopies, the deductible and coinsurance apply under all Anthem plans.

Preventive care: A check or test when you feel well, to help prevent a problem or find it early.
Diagnostic care: A check or test because of symptoms, a health concern, or an abnormal result, to find the cause and plan care.

Telemedicine

If you're enrolled in an Anthem BCBS medical plan, telemedicine services will be provided through LiveHealth Online.

Sydney Health Mobile App

As an Anthem BCBS member, you have access to the Sydney Health app, which helps you manage your benefits and connect with care. You can access virtual care services 24/7 for common health concerns, schedule annual wellness visits, and get support for mental health.

To get started, download the Sydney Health Mobile App or visit **anthem.com** and follow the instructions provided.

1. Once you have your member ID, register and log in.
2. Your username and password are the same for the Sydney Health Mobile App and **anthem.com**.
3. Select **Care** > Virtual Care.

LiveHealth Online

LiveHealth Online is a telemedicine benefit that offers 24/7/365 access to a licensed physician via video chat and is available in all 50 states.

This benefit is designed to complement the care you receive from your primary care physician OR you can even elect to have a Virtual Primary Care provider. Because U.S. Venture knows the importance of being treated at the right time, this benefit is provided to all team members who are enrolled in an Anthem BCBS medical plan. These services are offered at NO COST to those enrolled, regardless of plan choice.

4. **Sydney Health App** Take your health plan with you.

With Sydney Health, you can:

- View your digital ID card
- Review claims and coverage details
- Find in-network providers
- Estimate healthcare costs
- Manage your prescriptions

Note: You'll be able to register once you're enrolled and have received your member ID.

Service	Provider	Member Cost
Primary care — preventive care visit	Primary Care	$0
Primary care — sick visits	Primary Care	$0
Behavioral health	Psychiatrist	$0
Behavioral health	Therapist	$0
Skin conditions	Dermatologist	$0

Virta: Nutrition-based support for diabetes and weight loss

Beginning January 1, 2027, Virta is available at no cost to you and your dependents, age 18 and over, who are enrolled in an Anthem BCBS medical plan and meet the program's health requirements. Virta uses nutrition and personalized support to help with diabetes care and healthy, lasting weight loss.

- Online nutrition support
- Personalized coaching
- Support from health professionals
- Digital tools to track your progress

Starting January 1, 2027, scan the QR code to enroll or visit **go.virta.com/signup**.

Hinge Health: Back and joint support

If you're enrolled in an Anthem BCBS medical plan, you and your eligsible dependents age 18 and older can access Hinge Health at no cost.

Hinge Health provides personalized exercise therapy and support to help:

- Relieve back and joint pain
- Prepare for surgery
- Improve movement and mobility

You can create and access your care plan at anytime from any device.

Questions? Call **855-902-2777** or visit **hinge.health/usventure** to learn more.

Point your phone camera at the QR code and tap on the pop-up notification to open from your phone's web browser.

Coordination of benefits

Team members covered under an Anthem BCBS medical plan may receive outreach from Anthem BCBS if there is belief that you have other coverage through another insurance carrier. If so, you will need to reply to the inquiry in order to prevent claim denials or processing delays.

Choose the right healthcare setting

Where you go for care can affect how much you pay and how quickly you can be seen. Use the chart below to help determine the best option for your healthcare needs.

Virtual care	Retail clinic/ convenient care clinic	Urgent care/ walk-in clinic	Clinical care (your doctor's office)	Emergency room (ER)
Speak to a U.S. licensed doctor or other licensed provider via video chat 24/7 from anywhere.	Located in retail stores, supermarkets, and pharmacies.	Sometimes called walk-in clinics, often open in the evenings and on weekends.	Seeing your doctor who knows your medical history and any ongoing health conditions.	Only if you are seriously ill or badly hurt.
When to use: Flu, allergies, pink eye, bronchitis, sinus infections, skin conditions, or if you're feeling anxious, depressed or having trouble coping	**When to go:** Colds or flu, sinus infections, allergies, vaccinations or screenings, minor sprains, burns or rashes, headaches or sore throats	**When to go:** Sprains and strains, mild asthma attacks, sore throats, minor broken bones or cuts minor infections or rashes, earaches	**When to go:** Preventive services and vaccinations; medical problems or symptoms that are not an immediate, serious threat to your health or life	**When to go:** Sudden change in vision; sudden weakness or trouble talking; large, open wounds; difficulty breathing; severe head injury; heavy bleeding; spinal injuries; chest pain; major burns; major broken bones
Wait times may vary	15 minutes or less, on average wait time	20 to 30 minutes approximate wait time or make an appointment (if available)	1 week or more approximate wait time for an appointment	3 to 12 hours approximate wait time for non-critical cases
Average cost **FREE**	**Average cost** **$**	**Average cost** **$**	**Average cost** **$$**	**Average cost** **$$$**

Personal Health Assessment (PHA) — save money!

One of the ways you can better understand your health and save money is by participating in a free Personal Health Assessment (PHA). The PHA is a voluntary wellness benefit available to all eligible team members and spouses/domestic partners, regardless of medical plan coverage, and it includes:

1. **A health screening** — blood test for cholesterol, triglycerides, nicotine, A1C blood glucose, and measurements for blood pressure, height, weight, and waist circumference. Prostate-Specific Antigen (PSA) is tested for all males that are 40 and older. Nicotine is the only substance that is tested.
2. **A health coaching appointment** — review your results with a health coach and establish one wellness goal for the year.

Onsite screenings are offered at most U.S. Venture locations between August and October. Participants can also complete the screening at an offsite lab or their physician's office. Regardless of how you are screened, please register at **usventure.mywellportal.com**. For login instructions through December 31, 2026, visit SharePoint or email **totalrewards@usventure.com**.

New Hires in 2027

New team members (and spouses/domestic partners) who enrolled in the medical plan in 2026 were given the average discount per pay period for the remainder of 2026. If your hire date is:

On or after October 1, 2026 — your average discount will extend into the 2027 benefit plan year.

Before October 1, 2026 — the average discount will drop off after December 31, 2026.
Your discount for 2027 depends on your participation in the 2026 PHA.

By completing your PHA, you earn health credits which reduce your paycheck deductions for medical premiums across all coverage levels. And, if you simply need employee only medical coverage, the cost of the Anthem BCBS Copay Plan — High Deductible is available for less than $10 per week if you score 100 points on your health screening and complete your health coaching.

2027 Discount — Maximum of 100 Points Available		
Who Can Earn This Credit	**Biweekly Maximum**	**Weekly Maximum**
Team Member	$40 per pay period (100 pts x $0.40 per point)	$20 per pay period (100 pts x $0.20 per point)
Spouse/Domestic Partner	$20 per pay period (100 pts x $0.20 per point)	$10 per pay period (100 pts x $0.10 per point)
Your discount will be calculated based on your individual score.		

If you cannot complete the Personal Health Assessment (PHA) or meet the health goals necessary to qualify for a discount, you may be eligible for a reasonable accommodation.
To request an accommodation, email coaching@mywellportal.com by **December 4, 2026**.

Married team members

If you and your spouse are both U.S. Venture Team Members, you can either:

- Enroll separately in medical coverage, or
- One of you can cover the other as a dependent.

Note: If your spouse is covered as a dependent, their health credit (for medical premium discount) will be calculated at the spouse rate, so the team member who expects to have the higher score should enroll as primary.

If you are married to another U.S. Venture team member and have questions, contact Total Rewards at totalrewards@usventure.com for guidance.

Looking ahead to 2028
Want to save money on your 2028 medical paycheck deductions? Team members and spouses enrolled in the medical plan will need to complete required well-being activities during the 2027 program year. Watch for more details on program requirements, deadlines, and incentive details starting in January 2027.

Pre-Tax Savings Accounts (HSAs and FSAs)

Health Savings Accounts (HSAs)

If you enroll in the Anthem BCBS High Deductible Health Plan (HDHP - HSA Eligible), you can contribute to a Health Savings Account (HSA) through Associated Bank. An HSA can help you save and pay for eligible healthcare expenses using pre-tax money. Things to know:

- **You keep the money, even if you leave U.S. Venture.** Any unused balance rolls over from year to year, so you can use it now or save it for future healthcare expenses.
- **You have the opportunity to invest your HSA balance.** Once your account reaches Associated Bank's investment requirements, you can invest it.
- **U.S. Venture contributes to your HSA**. You can receive the company contribution without contributing your own money, but you must enroll in the HSA plan in addition to the HDHP - HSA eligible medical plan in Workday. If you choose to contribute, you can change your contribution amount any time during the year.
- **You generally cannot have both an HSA and a Healthcare FSA**. However, you can have a Limited Healthcare FSA to use for dental and vision expenses.
- **Not everyone is eligible for an HSA**. For example, you cannot contribute to an HSA if you are enrolled in Medicare or claimed as a dependent on someone else's tax return.

U.S. Venture HSA contribution

U.S. Venture contributes to your HSA when you're enrolled in the HDHP - HSA Eligible medical plan. The annual contribution is prorated across all paychecks and is also prorated for new hires.

Coverage Level	Annual Company Contribution
Employee Only	$500
Employee + Dependents	$1,000

To receive the company contribution, you must enroll in the HSA through Workday, even if you choose to contribute $0 of your own money.

2027 IRS HSA contribution limits

Coverage Level	Maximum Contribution*
Employee Only	$4,500
Employee + Dependents	$9,000
Age 55+ Catch-Up Contribution	Additional $1,000

*Includes both your contributions and U.S. Venture's contributions.

Questions about HSA eligibility or qualified expenses?

Certain IRS rules apply to HSAs. Consult a tax professional or review IRS publications 969 and 502 at irs.gov.

Flexible Spending Accounts (FSAs)

FSAs let you set aside pre-tax money to pay for eligible healthcare or dependent care expenses. Because your contributions are taken from your paycheck before taxes, you may save money on eligible expenses.

Use the table below to help you compare your FSA options. The minimum contribution for FSAs is $5 per week.

Plan Provision	Healthcare Flexible Spending Account	Limited Healthcare Flexible Spending Account	Dependent Care Flexible Spending Account*
What it's for	Qualifying out-of-pocket medical, dental and vision expenses	Qualifying out-of-pocket dental and vision expenses for team members enrolled in the Anthem BCBS HDHP — HSA Eligible	Eligible dependent care expenses, such as day care, while you and your spouse work or attend school full-time
Eligible expenses	• Deductibles • Copays and coinsurance • Prescription medications • Other eligible healthcare expenses	• Deductibles • Copays and coinsurance • Optical supplies • Other eligible healthcare expenses not covered under the HDHP - HSA eligible medical plan	• Day care • Before- and after-school programs • Summer day camps • Care for a disabled dependent
Annual Contribution Limit for 2027	$3,400 Carryover to 2028 limited to $680	$3,400 Carryover to 2028 limited to $680	$7,500 Contributions cannot be carried over to the following year

*If you earned more than $160,000 in the prior year, IRS rules may affect the amount you can contribute to a Dependent Care FSA. Contact WEX or your HR team if you have questions.

Using your FSA

You can access your FSA funds by:

- Using your FSA debit card
- Requesting reimbursement online
- Submitting a claim form

Important things to know

- You must submit reimbursement requests within 90 days after the end of the plan year
- Up to $680 of unused Healthcare FSA or Limited Healthcare Flexible Spending Account funds can carry over to the next year*
- Dependent Care FSA funds do not carry over

Questions?

FSAs are administered by WEX. Contact WEX at **866-451-3399**, Monday through Friday, 6 a.m. to 9 p.m. CT, or visit www,usvbenefits.com or the Total Rewards SharePoint page.

Important: save your receipts

You may be asked to provide documentation to show that an FSA expense is eligible.

Examples of acceptable documentation include:

- An itemized receipt
- An Explanation of Benefits (EOB)
- Other documents showing:
- Date of service
- Type of service or item
- Provider or merchant name
- Amount charged

If you're asked to provide documentation, submit it promptly. If an expense cannot be verified, it may not be eligible for reimbursement, and any amount already reimbursed may be treated as taxable income.

Well-being Programs

Navigate: Bringing well-being together

Beginning January 1, 2027, Navigate is your one place for well-being programs and resources. Here, you can complete your Personal Health Assessment (PHA), connect with a health coach, and find tools to help you improve your overall well-being.

With Navigate, You Can:

- Connect with a health coach
- Set personal health goals
- Build healthy habits
- Track your progress
- Access well-being resources in one convenient place

Why use Navigate?

Navigate can help you make small changes that support your health and well-being. Whether you're looking to improve your health, manage stress, or build healthier habits, you'll find programs, tools, and support to help you along the way.

Ready to get started?

After January 1, 2027, watch for communications with instructions on how to access Navigate. You can also check back at **www.usvbenefits.com** for details.

Well-being reimbursement program

U.S. Venture reimburses team members up to $250 per calendar year.

Qualified expenses:

- Tobacco & nicotine product cessation
- Exercise class fees
- Race event entry fees
- Health club membership fees*
- Home fitness equipment*
- Weight management programs
- Wearable fitness trackers**

*A 50-use log is required before submitting expenses.
**For 2027, enrollment in Navigate is required for wearable fitness tracker reimbursements.

How to submit a request:

Log in to Workday and search "request one-time payment for myself." Complete the submission form and upload your required documents.

Need step-by-step instructions? Visit the Total Rewards SharePoint page and search for Well-Being Reimbursement.

2026 Submission Deadline: December 4
2027 Submission Deadline: December 1

Well-being questions

Contact **totalrewards@usventure.com**

Pelago

Nicotine and Substance Use Management Program

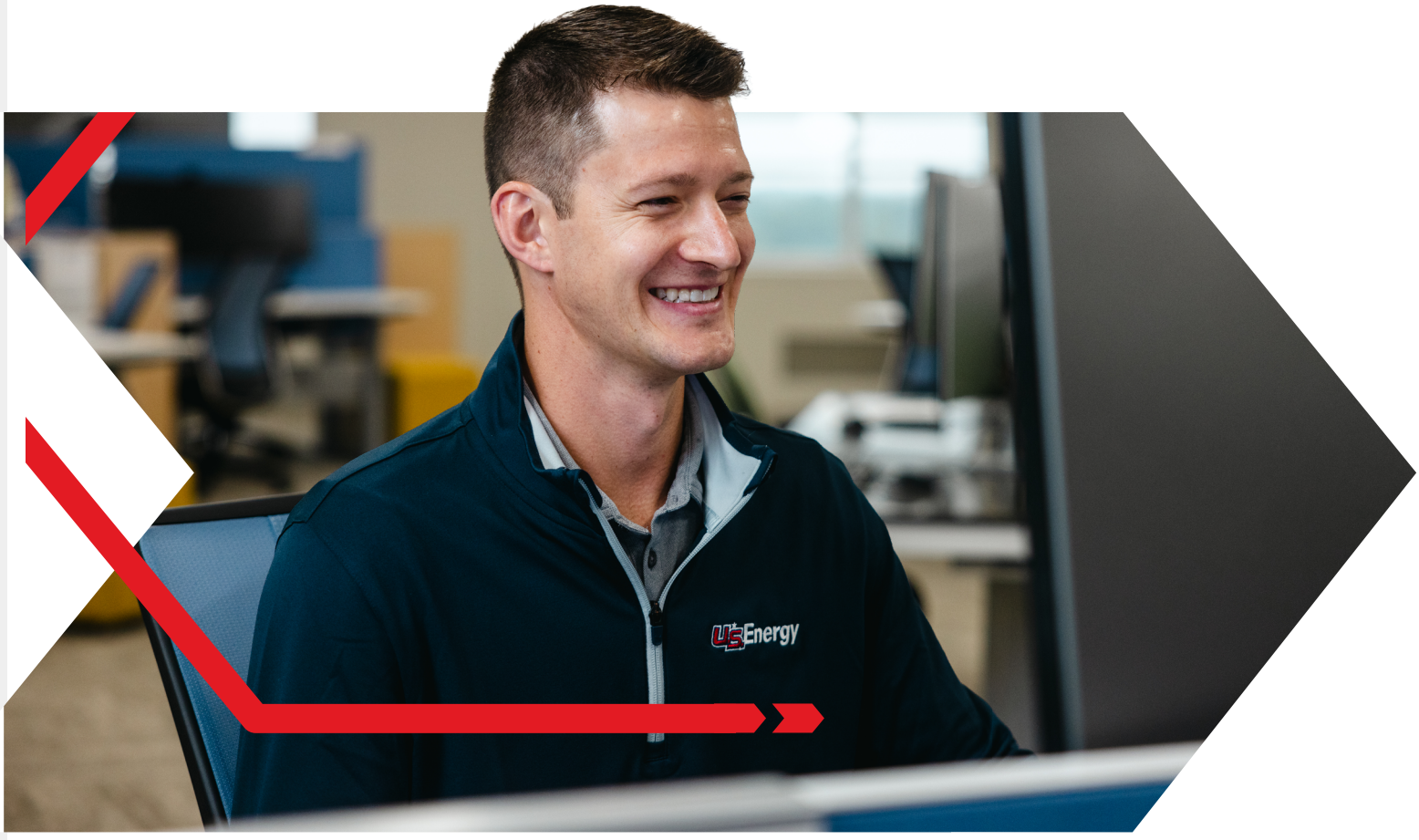
Pelago provides confidential, personalized support to help you reduce or quit nicotine, alcohol, cannabis or prescription pain medication use.

Pelago can help you:

- Reduce or quit nicotine products
- Cut back on or stop alcohol use
- Manage prescription pain medication use
- Change your relationship with cannabis

This program is available at no cost to all team members, as well as spouses/domestic partners and dependents age 15 and over that are enrolled in a U.S. Venture medical plan.

To get started, visit **pelago.health/usv-more** or scan the QR code. If you have questions, feel free to call **877-349-7755** for confidential support.



Dental

Dental insurance

U.S. Venture offers two dental plan options through Delta Dental of Wisconsin: the Basic Plan and the Comprehensive Plan.

Both plans:

- Cover in-network preventive care at 100%, including exams, cleanings, X-rays, fluoride treatments and sealants for children.
- Include the CheckUp Plus program, which means preventive care does not count toward your annual maximum benefit.

Basic Plan

- Covers preventive, basic and major dental services
- Must use a Delta Dental PPO or Premier Network dentist
- Does not cover orthodontia (braces)

Comprehensive Plan

- Covers preventive, basic, and major dental services
- Covers orthodontia (braces)
- Allows you to use PPO, Premier, or out-of-network dentists
- Includes orthodontia coverage for eligible children up to age 26 and covered adults

Find a network provider

Need a dentist?

Visit deltadentalwi.com to search for a PPO or Premier Network provider.

Have a dental emergency?

- Many dental issues can be treated through teledentistry when:
- You don't have an established dentist
- Your dentist isn't available
- You need care while traveling

Learn more at:
deltadentalwi.com/teledentistry.

Vision discount program

Need a dentist?

If you're enrolled in either dental plan, you also have access to EyeMed Vision discounts.

Savings may include:

- Routine eye exams Glasses and frames
- Contact lenses
- LASIK vision correction teledentistry

Visit the EyeMed website for participating providers and discount details.

New!

Your dental benefits are improving in 2027. Both plans will cover porcelain crowns and the comprehensive plan will now cover up to $2,000 lifetime for orthodontia. The higher orthodontia amount applies if you are already in treatment on January 1, 2027, or start treatment on or after January 1. We are also adding a Special Health Care Needs Benefit (SHCNB). You do not need to sign up for this benefit. It gives covered members with special health care needs extra support during dental care, such as more visits, added services or more time during an appointment.

Tip

If you or a covered family member may need braces or orthodontic treatment, consider the Comprehensive Plan.

DELTA DENTAL

Dental Coverage at a Glance through Delta Dental Plan of Wisconsin				
	Basic Plan (In-Network Only)		Comprehensive Plan	
Network	**PPO**	**Premier**	**PPO or Premier**	**Non-Participating**
Annual Deductible (per calendar year)	$50 per member	$50 per member	$50 per member	$75 per member
Preventive & Diagnostic Services Oral exams, X-rays, cleanings, topical fluoride, sealants and space maintainers	100%	100%	100%	80%
Basic and Major Services (Deductible Applies)				
Basic Services Emergency treatment to relieve pain, amalgam/ composite fillings, simple extractions (non-surgical)	80%	50%	80%	50%
Major Services				
• Oral surgery, endodontics, periodontics	50%	50%	50%	50%
• Crowns, inlays and onlays, implants, removable or fixed bridgework	50%	50%	50%	No coverage
Annual Maximum Benefit For basic and major services	$1,000 per member	$1,000 per member	$1,500 per member	$600 per member
Orthodontia ENHANCED ORTHODONTIA COVERAGE: For Adults and Eligible Dependents Up to Age 26				
Orthodontia Orthodontia Lifetime Maximum Benefit: $2,000	No coverage	No coverage	50%	No coverage

Vision

U.S. Venture offers two vision plan options through DeltaVision:

- Full-Service Plan: Includes a routine eye exam and vision materials.
- Materials Only Plan: Covers vision materials but does not include a routine eye exam.*

*If you are enrolled in an Anthem BCBS medical plan, your routine eye exam is covered under your medical plan.

Things to know

- Plan costs are paid entirely by team members
- Coverage is administered through EyeMed and the EyeMed Insight network
- Visit www.usvbenefits.com or the Total Rewards SharePoint page for more information

Find a Network Provider

Visit deltadentalwi.com/s/find-a-deltavision-provider-near-you and select the EyeMed Insight network or call Delta Vision at **844-848-7090**.

Vision Coverage at a Glance (DeltaVision Benefit Summary)		
Network	**EyeMed Insight**	
Frequency (Based on Last Date of Service)		
Exam	Full-Service Plan: 12 months | Materials Only Plan: N/A	
Lenses or Contact Lenses	12 months	
Frames	Full-Service Plan: 12 months | Materials Only Plan: 12 months	
Benefits Details	**Network Benefit**	**Non-Network Reimbursement**
Comprehensive Eye Exam*	Member pays $10	$35
Retinal Imaging*	Member pays up to $39	None
Standard Contact Lens* Fit & Follow up	Member pays $40	None
Premium Contact Lens* Fit & Follow up	10% discount off retail	None
Frames (any available frame at provider location)	$150 allowance, 20% off balance	$65
Laser Vision Correction (Lasik or PRK)	15% off retail or 5% off promotional price	None
Standard Plastic Lenses		
Single Vision	Member pays $10	$25
Bifocal	Member pays $10	$40
Trifocal	Member pays $10	$55
Standard Progressive	Member pays $75	$40

*Full-Service Plan only.

Vision Coverage at a Glance (DeltaVision Benefit Summary) *(continued)*		
Network	**EyeMed Insight**	
Benefits Details	**Network Benefit**	**Non-Network Reimbursement**
Lens Options		
UV Coating	Member pays $15	None
Tint (solid & gradient)	Member pays $15	
Standard Scratch Resistance	Member pays $15	
Standard Polycarbonate	Member pays $40	
Standard Anti-Reflective Coating	Member pays $45	
Other Add-ons and Services	20% off retail price	
Contact Lenses — In lieu of spectacles		
Conventional	$150 allowance, 15% off balance	$120
Disposable	$150 allowance	$120
Medically Necessary* **	Paid in full	$200
Premium Progressive Lens		
Tier 1	$95 copay	$60
Tier 2	$105 copay	$60
Tier 3	$120 copay	$60
Tier 4	$75 copay, 80% of charge less $120 allowance	$60
Premium Anti-Reflective Coating		
Tier 1	$57	None
Tier 2	$68	
Tier 3	80% of charge	

***Medically necessary contacts require authorization from a vision doctor when some conditions are present. Please contact the plan for more information.

Here's How to Get the Most From Your Vision Benefits

If you wear both contacts and glasses, you can make your benefits go further:

- Use your $150 contact lens allowance for your contacts. This uses your once-a-year lens benefit.
- Use your $150 frame allowance to buy new glasses frames.
- Since you used your lens benefit for contacts, your eyeglass lenses will not have the plan copay. But you can still save 20% on your eyeglass lenses.

Tip: You get a frame benefit and a lens benefit each year. Using your lens benefit for contacts still lets you use your frame allowance and get 20% off eyeglass lenses.

Voluntary Benefits

Accident Insurance

Accident Insurance pays a cash benefit if you have a covered accident and need medical care. You can use the money to help pay for medical expenses, household bills or other costs.

Coverage may include benefits for:

- Fractures and dislocations
- Cuts and injuries
- Ambulance service
- Emergency room visits
- Hospital stays

When you enroll in accident insurance, you will be required to name a accident plan beneficiary at the end of your Workday enrollment.

Critical Illness Insurance

The Critical Illness Insursnce pays a cash benefit directly to you if you are diagnosed with a covered illness, such as cancer, heart disease or stroke.

You can use the money however you choose, including for medical expenses or everyday bills.

Coverage options:

- Choose coverage in $5,000 increments, up to $25,000
- To enroll your spouse or children, you must first enroll yourself
- Spouse coverage is available up to 100% of your coverage
- Children are automatically covered at 50% of your coverage amount at no extra cost.

Team member and spouse coverage rates are based on the age of the team member.

Coverage Levels		
Employee	**Spouse**	**Child(ren)**
$5,000	$5,000	$2,500
$10,000	$10,000	$5,000
$15,000	$15,000	$7,500
$20,000	$20,000	$10,000
$25,000	$25,000	$12,500

Hospital Indemnity Insurance

The Hospital Indemnity Plan pays a cash benefit if you or your covered family members are admitted to a hospital for more than 23 hours and for any reason, for each day you are hospitalized, up to 15 days per year.

Hospital Indemnity Policy Notice

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 **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.

How can I earn my wellness benefit?

If you're enrolled in the **Accident, Critical Illness, or Hospital Indemnity Plan insurance plans**, you can earn a cash wellness benefit by completing eligible preventive care activities.

How it works:

- Earn $100 per covered person, per plan, each year.
- Eligible activities include, but are not limited to:
  - Annual physicals
  - Bloodwork
  - Cancer screenings
  - Dental cleanings
  - Vision exams
  - Hearing tests
- If you complete the U.S. Venture Personal Health (PHA) Screening, a claim will be submitted for you in the first quarter of 2027.

For a complete list of eligible screenings, visit **reliancematrix.com**.

For more details on all three of these voluntary benefit plans, review the certificate of coverage and policy documentation posted on the Total Rewards SharePoint page or **www.usvbenefits.com**.

Legal

New for 2027, the MetLife Legal plans have been redesigned to provide you the coverage you need. This year, you can choose between a Low and High Plan. The Low Plan has removed coverage that wasn't being used allowing the cost per paycheck to decrease. Additionally, the High Plan continues to offer coverage for parents, parents-in-law and grandparents, but also includes up to 20 hours of divorce services.

MetLife Legal Plans provide access to legal services for many common personal and family legal matters.

- Services are available through a network of attorneys
- There is no waiting period for covered services
- There are no deductibles
- You do not have to submit claim forms

Important

For 2027, MetLife Legal coverage will not carry over. If you want coverage in 2027, you must enroll again.

MetLife Legal Low Plan

Coverage is available for you, your spouse or domestic partner, and eligible dependent children.

Examples of covered legal services include:

- Estate planning, including wills and trusts
- Real estate matters, such as buying or selling a home
- Family and personal legal matters
- Identity theft assistance
- Traffic-related legal matters
- Civil legal matters

The examples above are not a complete list of covered services. View the legal plan summaries on www.usvbenefits.com for more information.

MetLife Legal High Plan

In addition to the coverage available through the MetLife Legal Low Plan, you can purchase the new Legal High Plan.

This plan now includes up to 20 hours of divorce coverage, providing additional support for one of life's most significant legal matters.

- Continues to offer broad legal coverage across a wide range of personal legal needs
- Maintains coverage for eligible parents, in-laws, and grandparents (up to eight additional family members)

Need More Information?

Contact the MetLife Client Service Center at **800-821-6400**, Monday through Friday, 8 a.m. to 8 p.m. ET.

MetLife Aura Identity Theft Protection Plus

Identity theft protection helps protect your identity, finances and devices from fraud and cyber threats. You can choose individual or family coverage.

Key features include:

- Monitors your identity: Social Security number and online accounts for fraud
- Alerts you to suspicious credit and banking activity
- Includes antivirus, safe browsing, and password protection
- Provides 24/7 fraud support, up to $5 million in identity theft protection, and $50,000 in cyber insurance per enrolled adult

You can choose individual or family coverage. Family coverage also includes:

- Coverage for unlimited dependent children
- Coverage for up to 10 additional adults, regardless of age, location, or relationship
- A private Aura account and insurance protection for each enrolled adult
- Life360 tools for location sharing, online safety, screen time, and digital activity

To register:

Visit my.aura.com/start.

For questions:

Contact MetLife Customer Service team at **844-931-2872**.

For more information:

View the identity theft plan summaries on www.usvbenefits.com.

Important

For 2027, Identity Theft Protection Plus coverage will not carry over. If you want coverage in 2027, you must enroll again.

Basic Life, AD&D and Supplemental Insurance

Basic Life and AD&D Insurance

U.S. Venture provides Basic Life and Accidental Death & Dismemberment (AD&D) Insurance at no cost to you through Voya.

- Coverage is equal to 1.5 times your annual earnings, up to $300,000
- You are automatically enrolled in this company-paid coverage
- Your coverage amount is based on your earnings*

Examples: If your annual earnings are $29,500, your coverage amount would be $45,000.

Important

If your company-paid Basic Life Insurance coverage is more than $50,000, a portion of the coverage may be taxable under IRS rules.**

*Annual earnings include commissions, bonuses and overtime pay.

**See the plan documents for additional details.

Supplemental Life Insurance

You can purchase additional life insurance coverage for yourself and your eligible family members.

Coverage options include:

- For yourself: Up to $500,000, in $10,000 increments
- For your spouse or domestic partner: Up to 50% of your coverage amount, in $5,000 increments
- For your children (up to age 26): $10,000

Important

- You must enroll in coverage for yourself before you can enroll your spouse, domestic partner or children.
- A dependent can only be covered under one employee's Supplemental Life Insurance plan.
- Employees cannot cover each other as dependents.
- Current participants may be able to increase coverage without completing EOI, up to plan limits. See plan details for more information.

About Evidence of Insurability (EOI)

If you're enrolling in coverage for the first time or increasing coverage above certain plan limits, you may be required to complete Evidence of Insurability (EOI), which is a health questionnaire used by the insurance carrier to determine eligibility. If EOI Is required, coverage will begin when the insurance carrier approves your EOI application. Child life insurance does not require EOI.

Basic Dependent Life Insurance

You may also purchase Basic Dependent Life Insurance that provides the following coverage:

- $10,000 for your spouse/ domestic partner
- $5,000 for each unmarried child to age 26

This option is available in addition to any other life insurance coverage you may purchase without needing to complete EOI.

You can enroll in Basic Dependent Life Insurance even if you do not enroll in Supplemental Life insurance for yourself.

Voluntary AD&D Insurance

If you enroll in Supplemental Life Insurance, you can also enroll in AD&D Insurance.

Dependent AD&D coverage options include:

- Spouse/domestic partner only: 60% of your coverage amount
- Children only: 15% of your coverage amount
- Family coverage: 50% for your spouse/ domestic partner and 10% for your children

Beneficiary designations

Be sure to name a beneficiary for your life insurance and other benefits, if applicable. A beneficiary is the person who will receive your benefits if you pass away.

Review and update your beneficiary information regularly, especially after major life events such as:

- Marriage
- Divorce
- Birth or adoption of a child
- Death of a beneficiary

Reminder

Life and AD&D insurance coverage is based on your earnings. To help keep your coverage accurate, it is reviewed and updated throughout the year as your earnings change.

If a claim is filed, the benefit amount is based on your earnings during the 12 months before the claim.

Important

You can choose extra Life and AD&D insurance for you and your eligible dependents during Annual Open Enrollment or if you experience a qualifying life event (QLE).

- Already enrolled? You can increase your Life coverage by up to $20,000 without EOI, up to a total of $350,000.
- Spouse already enrolled? You can increase their Life coverage by up to $10,000 without EOI, up to a total of $50,000.
- Not enrolled today? You can enroll in Life insurance, but you will need to complete EOI.
- Children: You can enroll eligible children in Life insurance without EOI. AD&D: If you elect Supplemental Life, you can also elect AD&D.

401(k) Savings Plan

The 401(k) Plan helps you save for retirement through automatic payroll deductions. You can make pre-tax or Roth (after-tax) contributions, and U.S. Venture helps you save by contributing to your account.

How the plan works:

- You can contribute up to 90% of your pay (up to IRS limits)
- U.S. Venture matches 100% of the first 2% you contribute and 50% of the next 4%
- U.S. Venture also contributes up to 3% of your pay each year
- You always own the money you contribute and the annual company contribution
- You own the company matching contributions after five years of vesting service
- The plan is administered by T. Rowe Price and you choose how to invest your account from a variety of investment options

Catch-up contributions

- If you're age 50 or older, you can make additional catch-up contributions each year, within IRS limits. If you're 60 to 63, you can make additional higher catch-up contributions, within IRS limits.
- Under the Secure 2.0 Act: If you are age 50 or older and you earned more than the IRS established wage threshold in the prior year, catch-up contributions must be made as Roth (after tax) contributions. If you elect catch up, your contributions will automatically be converted to Roth 401(k).
- Contact T. Rowe Price or your financial advisor if you have questions.

Enrollment

When you're eligible, T. Rowe Price will send you information about the plan and how to enroll.

If you do not make an election within 45 days of your hire date, you will be automatically enrolled at a 6% contribution rate. Your contribution rate will increase by 1% each year until it reaches 15%.

You can change your contribution rate or stop contributions at any time.

To manage your account, visit **rps.troweprice.com** or call **800-922-9945** Monday through Friday, 6 a.m. to 9 p.m. CT (Spanish: **800-368-2768**).

Financial advisory services

FRANCIS

Get personalized financial guidance — at no cost to you.

U.S. Venture provides access to **Francis LLC**, a registered investment advisor group dedicated to offering independent investment consulting and education services at no cost to you.

Francis LLC offers:

- Confidential financial education
- Individualized advisory sessions for you and your family

You can meet with an advisor by phone or web throughout the year to:

- Establish financial goals
- Create a personalized plan to achieve them
    - Get support whether you're just starting out, building momentum or preparing for retirement

Take advantage of this valuable benefit to get the financial help you need — when you need it.

Find more information on the Total Rewards SharePoint page or **www.usvbenefits.com**.

Questions?

Contact a Francis financial advisor at **866-232-6457**.

Commuter benefits

wex

The Commuter Benefit Plan lets you use pre-tax money to pay for eligible work-related transportation and parking expenses.

Eligible expenses may include:

- Bus, train, subway or ferry fare
- Vanpool costs
- Parking near your workplace

Things to know:

- The IRS limits how much you can contribute each month. Currently you can contribute up to $340 per month for both transit and parking. The minimum contribution for FSAs is $5 per week.
- Unused funds roll over from month to month while you remain eligible.
- The plan is administered by WEX.

This benefit is available only to team members who work the following counties, cities, or states:

- California: Berkeley, Los Angeles, Richmond, San Francisco Bay Area
- Illinois: Cook County
- District of Columbia
- State of New Jersey
- New York: New York City
- Pennsylvania: Philadelphia
- Washington: Seattle

Questions?

Contact WEX Participant Services at **866-451-3399**, Monday through Friday, 6 a.m. to 9 p.m. CT.

MyFlexPay

MyFlexPay gives you access to a portion of your earned wages before payday. This benefit can help you manage unexpected expenses and build savings.

With the MyFlexPay app, you can:

- View your earnings and hours worked
- Access up to 40% of your earned wages before payday
- Transfer money instantly for a small fee or the next day at no cost
- Save money automatically and earn 5% interest, up to $10,000 in savings
- Use budgeting and savings tools

Need help?

Visit **help.myflexpay.com** or contact your HR Business Partner.

Travel Insurance and Resources

Travel Assistance through Voya provides emergency support when you or your covered dependents travel more than 100 miles from home for business or personal travel.

Services may include:

- Medical assistance and referrals
- Help finding a hospital or doctor
- Prescription assistance
- Legal and interpreter referrals
- Emergency medical transportation, if needed

Important

This benefit provides travel assistance services and is **not medical insurance**.

Employee Assistance Program (EAP)

To help you manage life's daily challenges, U.S. Venture offers confidential and professional support with SupportLinc, our employee assistance program (EAP). SupportLinc offers the following resources, at no cost to you or people residing in your household, regardless of medical coverage:

- Counseling: Up to six free counseling sessions, per person, per issue, each year, available in-person or virutally.
- Legal support: Up to 30 minutes of free legal consultation with a local attorney.
- Everyday life resources: Referrals for child and elder care, housing, home repair, education, pet care, and more.
- 24/7 digital resources: Access mental health and well-being tools online or through the eConnect mobile app.

More ways to support your well-being

- Animo: Self-guided digital therapy and resources for stress, anxiety, depression, and emotional well-being.
- Mindstream: Live and on-demand video and audio sessions designed to support mental well-being and productivity.
- Assessments: Quick, expert-developed assessments can help you better understand your needs and find appropriate support.

How to access your EAP

- **888-881-LINC** (5462)
- www.supportlinc.com
- Text 'Support' to **51230**
- Scan QR code for eConnect Mobile App
- Access code: **USVENTURE**

Giving and Community Engagement

Giving back is an important part of U.S. Venture's culture.

Team members can participate in programs and resources such as:

- Up to 8 hours volunteer time off
- Groundswell personal giving account - volunteer, donate, and receive up to $1,000 in U.S. Venture matching annually
- Scholarships for eligible dependent children
- The ACT Fund, which supports employees facing hardship
- Community partnerships and volunteer opportunities

Visit the **Community Engagement SharePoint page** to learn more.

Giving back to be a better U.S.

Visit Community Engagement on myusventure.com to learn more about these programs.

- Groundswell personal giving account for Volunteer Hours/Donation Matching
- VICODEC school in Kenya to sponsor a child or support the school
- Scholarships for dependent children of U.S. Venture team members
- Grants for nonprofits you support from the U.S. Venture/Schmidt Family Foundation
- U.S. Venture Open charitable event dedicated to ending poverty

BE A BETTER U.S.

Associates Caring Together Fund (ACT Fund)

Supporting each other is an important part of U.S. Venture's culture. The ACT Fund provides financial assistance to U.S. Venture team members facing unexpected hardship.

Examples may include:

- Serious illness or injury
- Loss of income
- Natural disasters, such as floods, tornadoes or fires
- Other unexpected life events

Making contributions

You can make a contribution to the ACT fund through Groundswell, our workplace giving platform.

Your contributions are tax-deductible. PLUS, they're eligible for the U.S. Venture donation matching program — up to $1,000 per year. To learn how to contribute, go to myusventure.com under Groundswell.

Requesting assistance

Team members who need financial assistance can apply through the ACT Fund by completing a request form and financial summary on myusventure.com.

After all required information is submitted, the ACT Fund committee will review the request and provide a decision within five to seven business days.

Questions?

Contact Greg Vandenberg at ACTFundGreg@usventure.com.

We believe that programs like the ACT Fund truly make U.S. Venture an employer of choice and great place to work!

act ASSOCIATES CARING TOGETHER

Recognition Program

RAVE is U.S. Venture's team member recognition program. It makes it easy to recognize and celebrate team members who go above and beyond:

Through RAVE, team members can:

- Recognize coworkers for great work
- Receive recognition from peers and managers
- Participate in Service Award and Finding a Better Way Award programs Redeem recognition points for rewards

Managers receive recognition points each month to reward team members for their contributions.

Access RAVE anytime at **usventure.awardco.com**.

Please note: Redeemed points are considered taxable income, except those earned through Service Awards or Retirement gifts, which are grossed up. Any applicable taxes will appear in your payroll the month after redemption.

Employment Verification Service

U.S. Venture uses The Work Number to provide employment and income verification.

You may need employment verification when:

- Applying for a loan or credit card
- Renting a home or apartment
- Verifying income for services or benefits

The Work Number is available 24/7 and can quickly verify your employment or income.

For more information, including a wallet card you can share with a verifier, visit the Total Rewards SharePoint page. Contact details for The Work Number can be found in the Contact Information section of this guide.

Please note: The Work Number cannot verify DOT-related requests, such as past accidents, drug test results, etc.

Perks

U.S. Venture offers many perks to our Team Members. Below are a few highlights. To learn more, visit the Total Rewards SharePoint page.

Gallagher Marketplace

Gallagher Marketplace gives you and your family access to a variety of voluntary benefits and discounts.

Available offerings may include:

Visit Gallagher Marketplace to see your available benefits.

- Home and auto insurance
- Pet insurance
- Renters insurance
- Vehicle protection plans
- Other products and services

PerkSpot, available through Gallagher Marketplace, offers discounts on travel, entertainment, electronics, apparel, restaurants and more.

Things to know

- Discounts and offers are updated regularly.
- You must create an account to access PerkSpot discounts.
- Visit **c2mb.ajg.com/gmahtp/benefits** to get started.

How to Get Started

- Visit Gallagher Marketplace to explore available benefits and discounts.
- Select a product or service to learn more.
- Compare options, get quotes or enroll if interested.
- Enter U.S. Venture as your employer when prompted.

Whirlpool InsidePass

Inside Pass is your exclusive connection to the best deals on some of the most trusted, best-selling and most dependable appliance brands in the industry.

Visit **whirlpoolinsidepass.com** to learn more.

PerkSpot

PerkSpot is an online platform that gives you access to thousands of exclusive discounts and special offers. You can use it from your computer or mobile device — no physical card needed. We help you save money by making it easy to find and redeem deals on products and services you love. Scan here to learn more:

Tires and parts

Discounted wholesale price on any aftermarket parts or tires.

Tuition Reimbursement Program

U.S. Venture encourages team member development by providing financial assistance through our tuition reimbursement program. By investing in continuing education opportunities for our team members, we create a stronger, well-prepared workforce that can meet our organizational growth plans. This program also supports our desire to promote from within, where practical.

Team members are eligible for reimbursement of 100% of the cost of tuition and materials with a grade of A or B and 75% with a C. Team members must receive a C or better for each course to be eligible. Non-graded coursework is also reimbursable by submitting evidence of satisfactory completion.

Full-time team members may receive reimbursement for up to $5,250 per calendar year for graduate or undergraduate programs. Part-time team members may receive reimbursement for up to $2,500 per calendar year for undergraduate or graduate programs.

Details about this program and a tuition reimbursement application are on the Learning & Development SharePoint page under **Submit a Request**.

Paid Time Off

Vacation-personal time off

Taking time away from work is important. U.S. Venture provides Vacation-Personal time so you can take time off when you need it. Team members earn time based on the schedule below. Part-time team members earn time based on their FTE. Time is earned each pay period, and you are encouraged to use it throughout the year. You may carry over up to 40 hours into the next year, subject to state requirements. If you leave U.S. Venture, any earned, unused time will be paid to you.

Period of Service (Based on Anniversary Date)	Vacation Hours/Year	Personal Hours/Year
Less than 5 years	2 weeks/ 80 hours	4 days/ 32 hours
Between 5 years and less than 10 years	3 weeks/ 120 hours	4 days/ 32 hours
10 or more years	4 weeks/ 160 hours	4 days/ 32 hours

Please see full policy details on the Total Rewards SharePoint page under **Time Off & Leaves**.

Holidays

At U.S. Venture, we value time to recharge and celebrate with loved ones. Each calendar year includes six paid holidays to help you do just that:

- New Year's Day*
- Independence Day*
- Thanksgiving
- Memorial Day
- Labor Day
- Christmas Day*

When departments or divisions need to continue limited operations on a holiday, team members may be required to work on the holiday. Depending on your department's holiday schedule, a floating holiday may be provided instead. Check with your supervisor on how holidays are handled in your area.

*If the holiday falls on a Saturday, the paid holiday may be observed the Friday before. If the holiday falls on a Sunday, the paid holiday may be observed on the Monday after. For 2027, depending on your department's holiday schedule, a floating holiday may be provided instead.

Sick-safe time off

U.S. Venture provides paid sick-safe time when you need time off for your own illness, a family member's illness, or doctor appointments for you or your family. When possible, you may adjust your work schedule to make up missed time.

After 30 days of employment, full-time salaried team members receive 40 hours and regular full-time hourly team members receive 24 hours, unless state or local rules require otherwise. In your first year, your sick-safe time is prorated based on your hire date. In some states, sick-safe time is earned based on hours worked instead.

See the full policy on the Total Rewards SharePoint page under **Time Off & Leaves** for state-specific rules or visit the polices page on SharePoint

Jury duty

U.S. Venture supports team members who are called to serve on a jury.

How it works:

- Receive your regular pay for up to 10 business days of jury duty in a rolling year, unless otherwise required by state or local regulations
- You do not need to repay any money you receive from the court.
- If jury duty lasts longer than 10 business days, U.S. Venture will pay the difference between the juror's fees and your regular wages.

For questions about jury duty leave, speak with your leader or HR Business Partner.

Bereavement time off

We understand that losing a loved one is difficult. U.S. Venture provides paid time off so you can grieve, make arrangements, travel and attend a funeral.

If you need bereavement time off, talk with your leader as soon as possible.

Volunteer time off

U.S. Venture supports volunteerism and wants to support your personal contribution and commitment to serving the communities in which you live and work.

How it works:

- Receive up to eight hours of paid volunteer time each year
- Volunteer during your regularly scheduled work hours
- Volunteer with an IRS-approved charitable organization in the U.S.
- Request volunteer time in Workday and receive leader approval

Leaves of Absence

At U.S. Venture, we understand that life doesn't pause for work—and sometimes, stepping away is necessary to care for yourself, your family, or your responsibilities. That's why we partner with Reliance Matrix to manage a variety of leave programs designed to support your well-being and provide flexibility during life's planned and unexpected moments. Whether you're navigating a personal health issue, serving on a jury, fulfilling military obligations or taking time under FMLA, STD or LTD, these programs are here to help you manage time away with confidence and care.

Please explore the leave types outlined below and notify your HR Business Partner and leader if you need to take a Leave of Absence. After providing notification, Team Members are responsible for initiating their leave claim directly with Reliance Matrix. Refer to the Time Off & Leaves of Absence SharePoint page for additional guidance and review the company polices

Short-Term Disability (STD)

STD provides income protection if you can't work because of a non-work-related illness or injury.

How it works:

- STD benefits begin after you've been out of work for seven calendar days
- You may use available paid time off (PTO) during the first week waiting period. Any time not covered by PTO will be unpaid.
- STD pays 85% of your pay for weeks 2–6 and 70% of your pay for weeks 7–26
- You may receive STD benefits for up to 26 weeks in a rolling 12-month period
- If you're unable to return to work after STD ends, you may be eligible for Long-Term Disability (LTD)

Important

If your state offers Paid Disability Leave, this benefit may only pay the difference between your state benefit and what this benefit would normally pay. See the policy for details or contact your HR Business Partner. For more information, visit the Total Rewards SharePoint page under **Time Off & Leaves** or view the policy page.

Long-Term Disability (LTD)

If you're unable to work because of a non-work-related illness or injury for more than six months, LTD can replace part of your income.

How it works:

- Benefits may begin after 180 days of disability
- LTD pays 60% of your monthly earnings, up to $15,000 per month
- Benefits may continue as long as you remain eligible under the plan
- LTD is provided through Reliance Matrix

For more information, visit the Total Rewards SharePoint page under **Time Off & Leaves**.

Please contact Reliance Matrix no more than 30 days in advance or as soon as possible, if you need a leave of absence.

To file a leave, contact Reliance Matrix at 877-202-0055 or online at **matrixabsence.com**.

Family Medical Leave (FML)

You are eligible for Family and Medical Leave (FML) if:

- You have worked for the company for at least 12 months, and
- You have worked at least 1,250 hours during the past 12 months

If you are eligible, you can take up to **12 weeks of unpaid leave** for:

- The birth or adoption of a child
- Your own serious health condition
- Caring for a child, spouse or parent with a serious health condition

Requesting leave

If possible, let your leader or HR Business Partner know at least 30 days before your leave begins. If your leave is unexpected, notify your leader as soon as you can.

Important

FMLA may run at the same time as disability or caregiver benefit, if applicable. Contact your HR Business Partner, notify your leader, and reach out to Reliance Matrix to begin the leave process.

For more information, see the Family and Medical Leave policy on the Time Off & Leaves SharePoint page.

Caregiver benefit

U.S. Venture offers a Caregiver Benefit to support team members during important life events, including becoming a parent or caring for a loved one.

If eligible, you may receive:

- Up to 80 hours* of paid caregiver benefit during a rolling 12-month period
- Benefits paid at 100% of your regular pay
- A benefit amount adjusted based on your scheduled work hours

*Additional caregiver benefits may be available based on eligibility. For more information, including eligibility requirements and state-specific rules, visit the Total Rewards SharePoint page under **Time Off & Leaves**. or the polices page on SharePoint.

Please note: This benefit is not eligible for team members in states with Paid Family Leave.

Please contact Reliance Matrix no more than 30 days in advance or as soon as possible, if you need a leave of absence.

To file a leave, contact Reliance Matrix at 877-202-0055 or online at **matrixabsence.com**.

Your Cost for Coverage

BIWEEKLY rates effective January 1, 2027

Medical

	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Anthem BCBS Copay Plan — Low Deductible	$90.46	$204.82	$164.76	$276.90
Anthem BCBS Copay Plan — High Deductible	$50.00	$124.06	$95.10	$172.50
Anthem BCBS High Deductible Health Plan (HDHP — HSA Eligible)	$60.04	$129.42	$103.42	$179.10

Dental

	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Delta Dental Basic Plan	$5.60	$10.64	$12.30	$19.96
Delta Dental Comprehensive Plan	$6.34	$12.22	$14.14	$23.06

Vision

	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Delta Vision Full Service Plan	$2.44	$4.86	$4.96	$7.40
Delta Vision Materials Only Plan	$1.96	$3.90	$3.98	$5.94

Voluntary Benefits

	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Accident Insurance	$4.72	$7.25	$9.00	$13.62
Hospital Indemnity Insurance	$8.76	$18.76	$14.96	$26.22
Other Voluntary Plans	Rates for Critical Illness coverage vary based on your coverage election and age. See page 50 for details on Critical Illness, Legal and Identity Theft Benefits.			

WEEKLY rates effective January 1, 2027

Medical

	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Anthem BCBS Copay Plan - Low Deductible	$45.23	$102.41	$82.38	$138.45
Anthem BCBS Copay Plan - High Deductible	$25.00	$62.03	$47.55	$86.25
Anthem BCBS High Deductible Health Plan (HDHP — HSA Eligible)	$30.02	$64.71	$51.71	$89.55

Dental

	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Delta Dental Basic Plan	$2.80	$5.32	$6.15	$9.98
Delta Dental Comprehensive Plan	$3.17	$6.11	$7.07	$11.53

Vision

	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Delta Vision Full Service Plan	$1.22	$2.43	$2.48	$3.70
Delta Vision Materials Only Plan	$0.98	$1.95	$1.99	$2.97

Voluntary Benefits

	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Accident Insurance	$2.36	$3.63	$4.50	$6.81
Hospital Indemnity Insurance	$4.38	$9.38	$7.48	$13.11
Other Voluntary Plans	Rates for Critical Illness coverage vary based on your coverage election and age. See page 50 for details on Critical Illness, Legal and Identity Theft Benefits.			

Critical Illness Insurance

Your costs for critical illness insurance coverage are based on your age and the amount of coverage (see page 30 for available coverage amounts).

The formula for calculating the amount you pay for coverage is:

Coverage amount
÷ 1,000
x age rate from the table below
= cost per pay period

Critical Illness Rates (Per $1,000 of coverage)		
Age	**Biweekly Rate**	**Weekly Rate**
Under 20	0.12923	0.06462
Age 20–24	0.12923	0.06462
Age 25–29	0.15692	0.07846
Age 30–34	0.19385	0.09692
Age 35–39	0.24923	0.12462
Age 40–44	0.37846	0.18923
Age 45–49	0.60923	0.30462
Age 50–54	0.90462	0.45231
Age 55–59	1.28308	0.64154
Age 60–64	1.88769	0.94385
Age 65–69	2.61692	1.30846
Age 70–74	1.68000	0.84000
Age 75+	2.36308	1.18154

MetLife Legal Plan

	Biweekly Rates	Weekly Rates
MetLife Legal Low Plan	$6.12	$3.06
MetLife Legal High Plan	$14.20	$7.10

MetLife Aura Identity Theft Protection Plus

	Biweekly Rates	Weekly Rates
MetLife Aura Identity Theft Protection Plus — Individual	$3.72	$1.86
MetLife Aura Identity Theft Protection Plus — Family	$6.12	$3.06

Supplemental Life Insurance

The amount you pay for employee and spouse coverage depends on:

- Your age
- The amount of coverage you choose

Child coverage is available at no cost. If you have eligible children, consider enrolling them for coverage.

The formula for calculating the amount you pay for coverage is:

Coverage amount
÷ 1,000
x age rate from the table below
= cost per pay period

Example: A 32-year old employee who elects $50,000 of coverage would pay about $1.85 per biweekly pay period.

To calculate the cost of coverage: Coverage amount / 1,000 x age rate = cost per pay period

Age Rate Table		
Age	**Biweekly Rate**	**Weekly Rate**
Under 30	0.02770	0.01385
Age 30–34	0.03692	0.01846
Age 35–39	0.04154	0.02077
Age 40–44	0.07385	0.03692
Age 45–49	0.12923	0.06462
Age 50–54	0.21231	0.10615
Age 55–59	0.33692	0.16846
Age 60–64	0.52154	0.26077
Age 65–69	0.79385	0.39692
Age 70+	1.22769	0.61385

Dependent Child(ren)

If you elect coverage for yourself, you may purchase $10,000 of life insurance coverage for your children under age 26 at $0.92 per biweekly pay period and $0.46 per weekly pay period.

Basic Dependent Life Insurance

You can also purchase Basic Dependent Life Insurance for your spouse and/or dependents for **$1.20 per biweekly pay period or $0.60 per weekly pay period**. This option is available in addition to any other supplemental life insurance coverage you elect for yourself or your family members, and includes the following:

- $10,000 for your spouse/domestic partner
- $5,000 for each unmarried child from live birth to age 26

You can find more information on the Total Rewards SharePoint page.

NOTE: The IRS requirement for group term life insurance is outlined in Internal Revenue Code (IRC) Section 79. This regulation states that the first $50,000 of employer-provided group term life insurance coverage is excluded from taxable income. However, any coverage above $50,000 is considered a taxable fringe benefit and must be reported as imputed income on the employee's W-2 form. The taxable value of the excess coverage is calculated using the IRS Premium Table found in Publication 15-B. This imputed income is subject to Social Security and Medicare taxes.

Benefit Plan Waiting Periods

Day one benefits

You are immediately eligible for the benefits shown below.

Health and Wellness

- Medical Coverage
- Dental Coverage
- Vision Insurance
- Accident Insurance
- Critical Illness Insurance
- Hospital Indemnity Insurance
- Well-Being Reimbursement Program

Community, Recognition and Work/Life

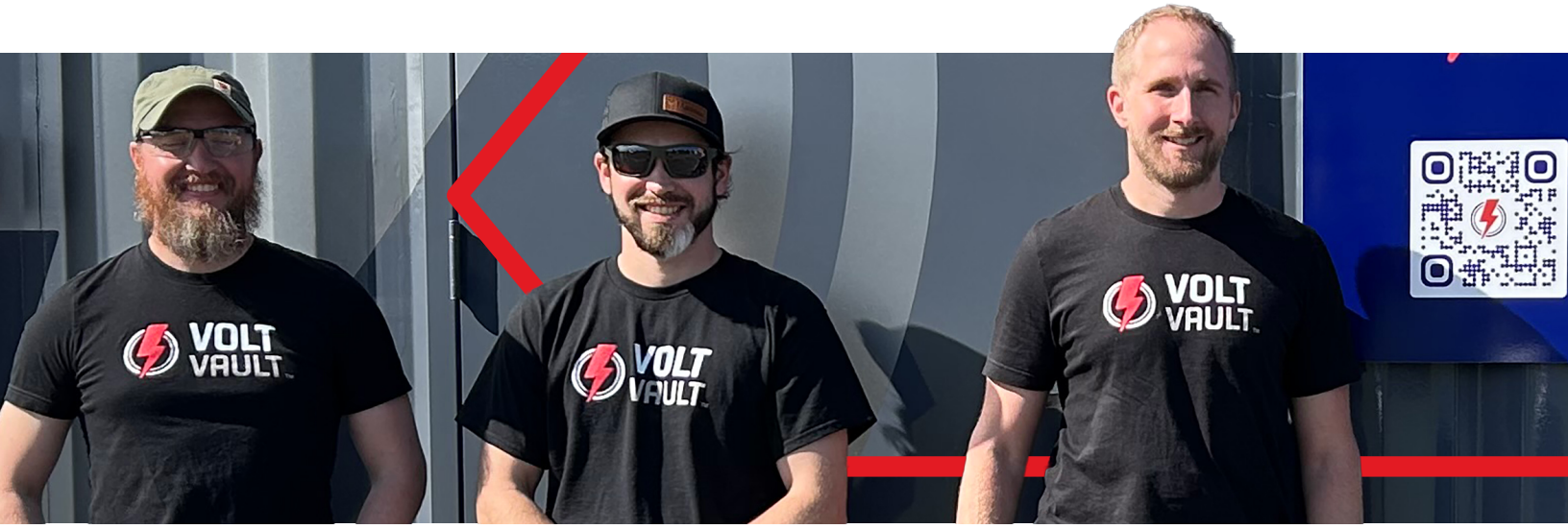
- Employee Assistance Program (EAP)
- Bereavement Time Off
- Holiday Pay
- Jury Duty
- Associates Caring Together (ACT) Fund
- RAVE Recognition Program

Financial

- Basic Life Insurance (company-paid)
- Supplemental Life Insurance
- Health Savings Account (HSA)
- Flexible Spending Accounts (FSA)
- MetLife Legal
- MetLife Aura Identity Theft
- 401(k) Retirement Savings Plan
- Francis Investment Advisor Services
- Discounts
- Matching Gift Program

Team members scheduled to work 20 to 29 hours a week are generally eligible for the Anthem BCBS HDHP - HSA eligible medical plan and the Delta Dental Basic Plan. Refer to **page 4** on eligibility for part-time team members.

Team members who qualify under ACA rules can choose from all available medical plans and are eligible for the company HSA contribution.



Benefits requiring a waiting period

Eligibility for the benefits below requires you to be actively working for a specified period of time before coverage can begin.

Benefit Plan	Full Time (30+ Hours per Week)	Part Time (20 to 29 Hours per Week)
Family and Medical Leave	12 months and 1,250 hours	12 months and 1,250 hours
Flexible Spending Account	No waiting period	Not eligible
Well-being Programs	1 week	1 week
Caregiver Benefit	90 days	90 days
Long-Term Disability	30 days	Not eligible
Short-Term Disability	30 days	30 days
Sick-Safe Time Off*	30 days	30 days
Tuition Reimbursement	No waiting period	30 days
Vacation-Personal Time Off	30 days	30 days (based on FTE)
Volunteer Time Off	30 days	1 year

*Waiting periods may vary based on state or local laws.

Contact Information

Health and Wellness

Medical (Anthem plan participants only)

Anthem BCBS

844-614-3275

anthem.com or your Sydney Health Mobile App

Telemedicine (Anthem plan participants only)

LiveHealth Online

855-603-7985

livehealthonline.com or your Sydney Health Mobile App

Prescription Medications (Anthem plan participants only)

CarelonRx

844-614-3275

anthem.com or your Sydney Health Mobile App

Specialty Medications (Anthem plan participants only)

BioPlus

833-549-2114

anthem.com or your Sydney Health Mobile App

Musculoskeletal Therapy (Anthem plan participants only)

Hinge Health

855-902-2777

hinge.health/usventure

Health Savings Account (HSA) (Anthem plan participants only)

Associated Bank

800-270-7719

associatedbank.com

FSAs and Commuter Benefits

WEX

866-451-3399

www.wexinc.com

FEDlogic

Online: employees.fedlogicgroup.com

Employee questionnaire: employees.fedlogicgroup.com/questionnaire

Phone: **877-837-4196**, Monday through Friday, 7 a.m. to 5 p.m. CT

Email: services@fedlogicgroup.com

Access code: 0924RF

Accident Insurance

Critical Illness Insurance

Hospital Indemnity Insurance

Reliance Matrix

855-775-2524

reliancematrix.com

Health Coaching Program

Marquee Health (through 12/31/2026)

800-882-2109

coaching@mywellportal.com

Wellness Reimbursement Program

TotalRewards/HealthSmart/ Reimbursement Program

Weight Management Program

Virta (Beginning 1/1/2027)

go.virta.com/signup

Nicotine and Substance Use Management Program

Pelago

877-349-7755

pelago.health/usv-more

Personal Health Assessment (PHA)

Marquee Health (through 12/31/2026)

800-882-2109

usventure.mywellportal.com

Dental

Delta Dental of Wisconsin

800-236-3712

deltadentalwi.com

Vision

DeltaVision through EyeMed

844-848-7090

eyemed.com

Financial

Emergency Travel Assistance	Voya **317-659-5841** Email: **assist@imglobal.com** **imglobal.com/member** Select **Create an Account** Enter referral code: VOYATRAVEL
Legal	MetLife Legal **800-821-6400** **legalplans.com**
Identity Theft	MetLife Aura Identity Theft **844-931-2872** **my.aura.com/start**
401(k) Retirement Savings Plan	T. Rowe Price **800-922-9945** Spanish: **800-368-2768** **rps.troweprice.com**
Financial Advisory Services	Francis LLC **866-232-6457** **francisway.com/services/participant-portal/us-venture/**
Life and AD&D Insurance	Voya **888-238-4840** **voya.com/claims**
Leave of Absence, STD, LTD, FMLA, Caregiver Benefit	Reliance Matrix **877-202-0055** **matrixabsence.com**

U.S. Venture Resources and Tools

Health & Wellness Benefits Team	Total Rewards **920-831-8881** Email: **totalrewards@usventure.com** **USVbenefits.com** Total Rewards SharePoint
Workday	**www.myworkday.com/usventure**

Well-being, Community, Recognition and Work/Life

Employee Assistance Program (EAP)	SupportLinc **888-881-LINC (5462)** **supportlinc.com** Text "Support" to **51230**
Employment Verification Service	The Work Number **800-367-5690** **theworknumber.com** Employer code **15856**

This brochure describes your medical care coverage and other benefits in general terms and is not a guarantee of coverage. Refer to the Summary Plan Descriptions, Summaries of Benefits and Coverage (SBCs), Plan Documents and other plan summaries on the Total Rewards SharePoint page or when available, on **www.usvbenefits.com**, to determine the benefit terms and conditions including limitations and exclusions. If there is any discrepancy between this brochure and the Plan Document or policies that govern the plans, the Plan Document or policies will rule.

U.S. Venture