



For you About you

2026 Benefits Guide



A full-page background image of a man and a woman laughing joyfully while sitting in an orange hammock. The man is wearing a pink tank top and the woman is wearing a yellow and white striped shirt. They are outdoors on a grassy area with trees in the background. The image is overlaid with several white circular lines and a yellow curved line.

Welcome to IMI

Your life isn't one-size-fits-all — and your benefits shouldn't be either.

At IMI, we're focused on providing support that fits your unique needs, wherever you are in life and work.

Our benefits are designed to work for you — whether you're building your career, managing your health and family or planning for what's next. We offer a range of options, tools and resources to help you make confident choices and get the most from your benefits now and in the future.

This guide is your starting point. Use it to explore your IMI benefits and choose what works best for you.

**New hires have 30 days
to enroll in benefits.**

Don't miss your chance!

Get ready

There are a few things you can do ahead of enrolling to make sure you're prepared.

Your benefits will start on the first day of the month following your start date.

That means, for example, if you start February 1, your benefits would begin March 1.

Know the options

Here are the benefits you can elect for 2026.

Healthcare

- Medical
- Dental
- Vision

Money-smart accounts

- Health Savings Account (HSA)
- Health Care Flexible Spending Account (HCFSA)
- Limited Purpose Flexible Spending Account (LPFSA)
- Dependent Care Flexible Spending Account (DCFSA)

Protection benefits

- Supplemental Life and Accidental Death & Dismemberment (AD&D) Insurance
- Critical Illness Insurance
- Hospital Indemnity Insurance
- Accident Insurance
- Long-term Disability Insurance Buy-up Option
- Legal Plan
- Identity Theft Protection
- Permanent Life Insurance with Long-term Care

Choose whom to cover

If you're eligible, you can cover yourself, your spouse and your dependents.

You

If you're a full-time employee at IMI and working a minimum of 30 hours per week

Your legal spouse or state-registered domestic partner*

You can also cover your spouse or domestic partner if you're eligible for benefits.

Your children

Up to age 26 (or older if permanently disabled), including biological children, stepchildren, legally adopted children, and any other child for whom you have legal or court-ordered guardianship

Adding a dependent to your coverage

It's your responsibility to ensure you only have eligible dependents on your plan. You'll be required to submit dependent verification documentation within 30 days of enrolling them in IMI plans. Failure to do this will result in ineligibility or loss of coverage. If you're adding new dependents, proof of dependency will need to be provided. If you don't provide the proof, your dependent won't be covered.

*Imputed income will apply. Only certain states allow domestic partners to be registered. If your state allows you to register your domestic partner, they're eligible for our plans and you'll need to provide proof of registration.

Enroll through PlanSource

1. Log in

Visit thesource.plansource.com/IMI to start the process.

Your username will be the first four letters of your first name, the last three digits of your Social Security number, the day of your birth and the last two digits of your birth year (FFFF###DDYY).

If this is your first time logging in, your password will be your date of birth (MMDDYYYY). You'll be prompted to change this immediately upon logging in.

If you have logged in previously and can't remember your password, you can request a password reset.

2. Create your profile and add qualified dependents

Ensure your personal information is correct and add any dependents you'd like to cover. You'll need information like Social Security numbers and dates of birth to add dependents. It's your responsibility to ensure you only have eligible dependents on your plan. You can remove any ineligible dependents during Open Enrollment each year without repercussion.

Any dependent you enroll in IMI plans must be a verified dependent. Anytime you add new dependents, proof of dependency will need to be provided within 30 days. Failure to do so will result in ineligibility or loss of coverage.

Need help?

Call the PlanSource Resource Center at **1-844-347-2498**.

3. Compare and choose

Compare plan features and costs, and select the benefits that best meet your needs for 2026. Make sure you press "**Save**" after each benefit selection.

4. Add your beneficiaries

Add beneficiaries for your life insurance. Without a beneficiary listed, your policy would be forfeited to your estate. If you choose a minor as your beneficiary without an active trust, your policy will also go to your estate and the courts will decide where those funds should be allocated.

5. Confirm your choices

Review the summary of your enrollment selections and print or save a copy of the confirmation statement that summarizes your choices. This is your evidence of enrollment.

New hires: You have 30 days to enroll.

If you don't enroll, you won't have healthcare benefits for 2026. Be sure to make your elections and assign beneficiaries within 30 days of being hired or becoming eligible so you have the coverage you and your family need for 2026.

What if the unexpected happens?

We understand that a year is a long time, and your circumstances may change outside of the Open Enrollment period held each fall.

If you experience a qualifying life event, you'll be able to change your benefit selection with the consent of IMI. Here are a few examples:

- Marriage;
- Birth or adoption of a child; and
- Death of a spouse, state-registered domestic partner or dependent child.

If you want to make a change to your benefit selections, you must do so within 30 days of the qualifying life event.

Healthcare

How it works

Find fresh options for you and yours.

IMI knows it's important to keep healthy — and that means different things to different people. By offering a range of medical plans, we can assure you there's something for everyone. You have your choice of three medical plan options (four if you live in California). Check out how the plans work and see what fits you best.

Keep in mind

Under the HSA Low Plan, if you cover any family member(s) in addition to yourself, the entire family deductible must be met before the plan will begin to pay out for any family member. And the entire family out-of-pocket maximum must be met before the plan pays in full for any family member.

For all other plans, if you cover any family member(s) in addition to yourself, once one family member meets the individual deductible, the plan will start to pay eligible costs for that individual. And once one family member meets the individual out-of-pocket maximum, the plan pays covered benefits for that individual.

HSA Low Plan

HSA High Plan

(Lower monthly premium, higher costs at care)

PPO Plan

(Higher monthly premium, lower costs at care)

Kaiser HMO Plan

(California employees only)

(Higher monthly premium, lower costs at care)

First

You pay the full cost

for medical care and prescriptions until you meet the deductible

HSA Low Plan \$1,850/\$3,700

HSA High Plan \$3,400/\$6,800

You don't pay out of pocket for in-network preventive care and preventive medications.

To help, IMI gives you **\$500** or **\$1,000** in your HSA. You can use this money first to pay the bill or save it for later — you choose.

Then

Once you hit the deductible, you and the plan

share the cost

for covered services.

You pay 20% (Low Plan) 30% (High Plan)

and the **plan pays 80% (Low Plan) 70% (High Plan)** (this is called coinsurance) of the cost for in-network care. If you go out of network, you'll pay more out of pocket.

You can contribute to an **HSA** and a **Limited Purpose FSA** to help pay for healthcare costs.

Finally

If you reach the annual out-of-pocket maximum (combined medical and prescription costs in one year),

the plan covers 100%

of eligible in-network expenses for the rest of the year.

You pay a \$30 or \$60 copay

with no deductible each time you receive care at an in-network doctor's office. Copays won't apply to your out-of-pocket costs or deductible.

If you need care beyond these office visits, you must meet your plan deductible (**\$900/\$1,800**) before the plan helps pay the cost. See the chart on **page 6** for your deductibles.

If you receive preventive care from an in-network provider, the plan will typically cover eligible costs with no deductible or copays.

After you meet your deductible, you and the plan

share the cost

for covered services.

The **plan pays 80% of the cost** for additional healthcare expenses — as long as you stay in-network — and

you pay 20%

up to the out-of-pocket maximum. For some services, you'll still pay a copay, even after you meet your deductible.

You can contribute to a **Health Care FSA** to help pay for healthcare costs.

If you reach the annual out-of-pocket maximum (combined medical and prescription costs in one year),

the plan covers 100%

of eligible in-network expenses for the rest of the year.

You pay copays

for most care including primary and specialist office visits, urgent care and emergency room visits.

You'll pay the full cost of care for inpatient hospital stays until you meet your plan deductible (**\$500/\$1,000**). See the chart on **page 6** for your copays and deductibles.

If you receive preventive care from an in-network provider, the plan will typically cover eligible costs with no deductible or copays.

After you meet your deductible, you'll **continue to pay copays** for most care.

For in-network hospital stays,

you'll pay 10% of the cost

once you hit the deductible.

You can contribute to a **Health Care FSA** to help pay for healthcare costs.

If you reach the annual out-of-pocket maximum (combined medical and prescription costs in one year),

the plan covers 100%

of eligible in-network expenses for the rest of the year.

Compare the plans

The plans differ in how much you pay when you receive care (annual deductibles, copays, coinsurance and out-of-pocket maximums) and several other key features. Check out the differences below and choose the right plan for you and your family.

Keep in mind:

The Kaiser HMO Plan has no out-of-network benefits.

What you’ll pay for in-network care

	HSA LOW PLAN*	HSA HIGH PLAN*	PPO PLAN*	KAISER HMO PLAN (CA employees only)
Individual/Family Annual Deductible	\$1,850/\$3,700	\$3,400/\$6,800	\$900/\$1,800	\$500/\$1,000
Individual/Family IMI Contribution to HSA**	\$500/\$1,000	\$500/\$1,000	N/A	N/A
Individual/Family Out-of-Pocket Maximum	\$3,500/\$6,500	\$6,800/\$13,600	\$3,000/\$6,000	\$1,500/\$3,000
Plan Coinsurance	20% after deductible	30% after deductible	20%	10%
Preventive Doctor Visit	\$0	\$0	\$0	\$0
Office Visit (Primary Care/Specialist)	20% after deductible	30% after deductible	\$30/\$60 copay***	\$25/\$40 copay*** (some coinsurance may apply)
Telemedicine/Teletherapy	\$0	\$0	\$0	\$0

*The HSA Low, HSA High and PPO plans are managed by Anthem and use the BCBS national network of providers.

**Prorated based on your date of hire

***Deductible doesn’t apply.

Costs per paycheck*, **

This chart details what you’ll pay each paycheck* if you choose to enroll in one of the medical plans.

	HSA LOW PLAN	HSA HIGH PLAN	PPO PLAN	KAISER HMO PLAN (CA employees only)
Employee	\$74	\$47	\$95	\$54.41
Employee + Spouse	\$203	\$133	\$264	\$148.97
Employee + Child(ren)	\$147	\$94	\$192	\$107.44
Family	\$203	\$133	\$264	\$148.97

*The rates in this table don’t reflect the discount offered to those who complete required activities in the IMI wellbeing program.

**Imputed income applies to domestic partner coverage.

Healthcare

Prescription drug

Prescription drug coverage comes with your IMI medical plan.

Filling maintenance medications

All maintenance medications must be delivered straight to your home using the Anthem pharmacy (Carelton) or at a local CVS Pharmacy. You can get two fills of your maintenance drugs in-store at your regular pharmacy before you need to start using home delivery or a CVS pharmacy. You'll also save money — a three-month supply will cost the same as two-and-a-half months' worth.

For specialty drugs, one fill can be made at your local pharmacy before you must use the specialty mail order.

Find out more at [anthem.com](https://www.anthem.com), download Anthem's Sydney Health mobile app or call Anthem at **1-844-271-5549** to make the switch to home delivery.

What you'll pay for in-network prescription drugs

Your coverage differs depending on the plan you choose. **Preventive medication that's on the ACA preventive drug list is offered to you at a low cost and, in some cases, free!**

	HSA LOW PLAN	HSA HIGH PLAN	PPO PLAN	KAISER HMO PLAN (CA employees only)
Retail				
Generic Drugs	20% after deductible	30% after deductible	\$10 copay*	\$10 copay*
Preferred Brand	20% after deductible	30% after deductible	30%* (min. \$25, max. \$50)	\$30 copay*
Non-Preferred Brand	20% after deductible	30% after deductible	45%* (min. \$40, max. \$80)	\$30 copay*
Mail Order				
Generic Drugs	20% after deductible (90-day supply)	30% after deductible (90-day supply)	\$25 copay* (90-day supply)	\$20 copay* (100-day supply)
Preferred Brand	20% after deductible (90-day supply)	30% after deductible (90-day supply)	30%* (90-day supply, min. \$62.50, max. \$125)	\$60 copay* (100-day supply)
Non-Preferred Brand	20% after deductible (90-day supply)	30% after deductible (90-day supply)	45%* (90-day supply, min. \$100, max. \$200)	\$60 copay* (100-day supply)

*Deductible doesn't apply.

Health Savings Account

A Health Savings Account (HSA), managed by **PlanSource**, lets you decide how much to save and spend for eligible expenses now and in the future. If you're enrolled in the HSA Low or HSA High plans, you can make pre-tax payroll contributions to help pay for qualified medical, prescription drug, dental and vision expenses. The more you contribute, the more funds you'll have available when you need them. If you enroll in the PPO or Kaiser HMO plan, because of government rules, you're not eligible for the HSA.



Enroll

When you enroll in either the HSA Low or HSA High medical plans, the **company contributes \$500/\$1,000 into your HSA**, depending on whom you cover. In your first year of employment, your contribution amount will be prorated based on your date of hire. You'll be eligible for the full contribution amount from IMI in 2026.



Choose

You decide how much money you want to contribute to your account. **You and IMI together can contribute up to \$4,400 for employee only coverage or \$8,750 for any level of family coverage***. You can change your contributions at any time during the year. You don't need to contribute to the account in order to receive the contribution from IMI**.

*If you'll be age 55 or older in 2026, you can contribute an additional \$1,000.
**If you choose not to contribute to an HSA, you must still open an account fully in order for IMI to make the employer contribution.



Spend or save

Use your HSA debit card to pay for eligible medical, dental and vision expenses, tax-free, or submit claims for reimbursement. Or you can pay out of pocket and let your HSA grow. Any money you don't spend during the year rolls over. And if you leave IMI or retire, you can take your money with you. Be sure to keep your itemized receipts to verify your claims, as required by the IRS.



Invest

Once you have \$1,000 in your account, you can invest everything over that amount in a variety of options and get tax-free earnings on invested funds.

Already have an HSA with a former employer?

You can transfer your HSA to our vendor, **PlanSource**. Call **1-844-347-2498** or visit thesource.plansource.com/IMI for more information.



Save on taxes three ways*

1

Save tax-free money in your HSA.
Your contributions come out of your paycheck before taxes, which lowers your taxable income. So you pay less in taxes and save money.

2

The money grows tax-free until you need it.
The money in your account earns interest, and any investment earnings are tax-free too.

3

Withdrawals you make to pay for eligible expenses are tax-free.
You can use the money for healthcare expenses now or anytime in the future.

*HSAs are triple tax-advantaged for federal taxes and most state taxes, which means you never pay taxes on contributions, earnings or withdrawals as long as they're used for eligible healthcare expenses. Certain states, however, require state taxes to be paid on HSA contributions and/or earnings.

Through your savings, IMI's contributions and any interest growth, you're building funds that can be used now or in the future for eligible healthcare costs. The account is always yours, even if you leave IMI or retire.

Finding care

We've taken the search out of the care process — because we know the last thing you want when you need help is to spend time looking for it. We make it easily accessible and affordable to get what you need, when you need it.



Virtual doctor visits

As part of your Anthem or Kaiser medical plan, you have free access to licensed health specialists and doctors 24/7.

Telemedicine can provide fast, convenient, professional care for nonemergencies like colds, skin rashes or earaches.

Anthem participants, call **1-888-548-3432** or visit livehealthonline.com for more information. Kaiser participants, call the number on the back of your medical card. For emergencies, always dial 911.

LiveHealth Online Resources

From dermatology to tobacco cessation to sleep support resources, Anthem participants have access to a number of tools through LiveHealth Online. Log in to your Anthem account to learn more.

Did you know Anthem participants can get all of their primary care virtually through the Sydney Health app? **Download it through the Apple App Store or Google Play.**

Health management

Anthem participants have access to support to answer healthcare-related questions. From access to a 24-hour Nurseline to ongoing case managers who can support ongoing conditions, there's always someone available who can answer your questions. Call **1-800-337-4770** to speak with someone anytime.

Case management

Coping with illness is stressful, and you may be feeling unsure about what to do next. If you're enrolled in one of the Anthem plans, you have access to a nurse case manager who can help you navigate a diagnosis or injury. Your case manager will help you understand your health plan, learn about treatment options and even connect you with local resources. Call **1-877-636-3735** to get started.

Inclusive Care

Anthem participants have access to Inclusive Care, a total care support system designed for those who identify with or are allies for the LGBTQ+ community. Get help finding the care you need from those who understand you.

Employee Assistance Program

Work stress got you down? Anxiety keeping you up? Whatever it is, as an IMI employee, you're eligible to use the Employee Assistance Program (EAP) at no extra cost and regardless of your participation in other IMI benefits. You have access to a network of highly trained professional counselors and up to six free face-to-face or video counseling sessions per issue, per year. Confidential 24/7 support is available for you and your family. Call the EAP at **1-888-851-7032**. You can also visit global.helpwhereyouare.com (use company code: IMI).

Building Healthy Families

Growing your family? That's great news! Anthem participants have access to Building Healthy Families through the Sydney Health app. This intuitive digital experience can provide pre-pregnancy, maternity and postpartum care as well as parenting support. You also have access to Ovia through Personify Health for additional support when it comes to planning, starting and raising a family.

Hinge Health

Say goodbye to aches and pains. Hinge Health delivers personalized, expert care for joint and muscle health, and pelvic floor therapy whenever and wherever you need it. It's convenient, private and free for Anthem participants.



Keeping things confidential

The support you receive from these programs is confidential, and all the information you provide is secure. Your information won't be shared with IMI, and IMI won't receive any individual information or personal health information about you.

Dental

Whether it’s a routine checkup and cleaning or more involved dental work (ouch!), you can count on either of these Delta Dental plans to get you smiling again.

You have two options for dental coverage: **Enhanced with Orthodontia** and **Basic Plus**.



What you’ll pay for in-network care

	ENHANCED WITH ORTHODONTIA	BASIC PLUS
Individual/Family Deductible (waived for Preventive Services)	\$50/\$150	\$50/\$150
Preventive Services	\$0*	\$0*
Basic Services	10%	20%
Major Services	40%	70%
Orthodontia Services	50%	Not covered
Orthodontia Maximum Lifetime (in-network and out-of-network)	\$2,000**	Not covered
Annual Maximum Benefit	\$2,000	\$1,000
Cost per paycheck		
Employee Only	\$13	\$5
Employee and Spouse	\$24	\$10
Employee and Child(ren)	\$30	\$12
Employee and Family	\$40	\$16

*Deductible doesn’t apply.
**Orthodontia coverage available for eligible children up to age 26.

Vision

Keep your eyes healthy and — if you need them — set your sights on glasses or contacts through the vision plan, administered by EyeMed.

Enrolling in vision coverage helps you save on eligible expenses like eye exams, glasses and contact lenses. Staying in-network helps you save even more on eye exams, frames and lenses — and visiting a Plus provider takes those savings to the next level.

Plus Providers are part of the EyeMed network, so the extra perks are built right into your benefits — no promo codes, no coupons, no extra paperwork. Just the same great vision benefits, with a little more savings.

\$180 Frame allowance

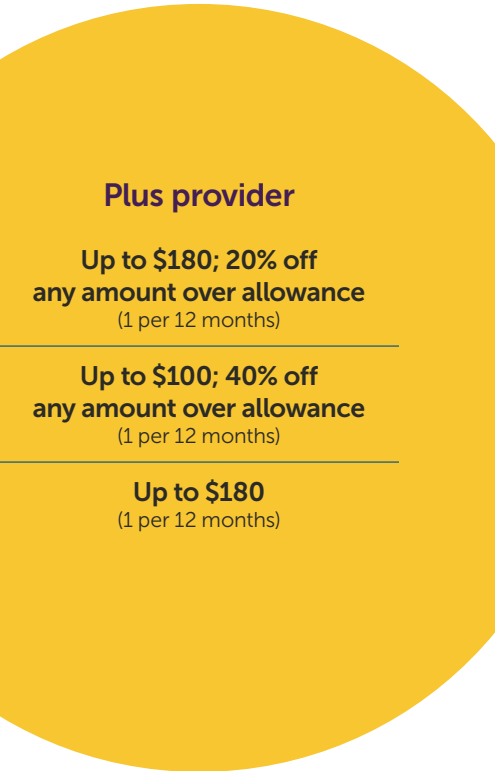
\$180 Contact lens allowance

\$100 Additional glasses allowance

Not sure where to go? No problem. Once you enroll, EyeMed will send you a welcome kit with information on **local in-network providers and where to find Plus providers** — making it easy to get care that fits your needs and your budget.

What you’ll pay for in-network care

	STANDARD
Copay	
Exam	\$0 (1 per 12 months)
Lenses	\$10 (1 per 12 months)
Contact Lens Fitting	Up to \$40 for fitting and two follow-up visits (1 per 12 months)
Retail Allowance	
Frames	Up to \$130; 20% off any amount over allowance (1 per 12 months)
Second Pair of Frames	Up to \$50; 40% off any amount over allowance (1 per 12 months)
Contact Lenses	Up to \$130 (1 per 12 months)
Cost Per Paycheck	
Employee Only	\$3
Employee and Spouse	\$6
Employee and Child(ren)	\$6
Employee and Family	\$9



Plus provider

Up to \$180; 20% off any amount over allowance
(1 per 12 months)

Up to \$100; 40% off any amount over allowance
(1 per 12 months)

Up to \$180
(1 per 12 months)

Flexible Spending Accounts

Flexible Spending Accounts (FSAs) are a smart, powerful way to stretch your dollars further by letting you set aside part of your income before taxes to cover health and dependent care expenses. The Dependent Care FSA is especially valuable — it helps you save big on costs like daycare, babysitting and more, all while lowering your taxable income. It’s like getting extra money back just for planning ahead!

Use it or lose it

You must spend your FSA funds before December 31, 2026. Then, you have to submit those expenses by March 31, 2027. After March 31, 2027, you’ll lose those funds due to IRS rules.



You’ll receive one debit card for all accounts that you can use to pay for eligible expenses, or you can submit claims for reimbursement of those expenses.

	Health Care FSA	Limited Purpose FSA	Dependent Care FSA
Which medical plan(s) it goes with	PPO plan and Kaiser	HSA Low and HSA High plans	Any and all!
How much you can contribute per year*	\$3,300	\$3,300	Up to \$7,500
When funds are available	Your entire annual contribution is available to you from the beginning of the plan year	Your entire annual contribution is available to you from the beginning of the plan year	Your funds are only available to you after they’ve been deposited into your account each pay period
What you can use the money for	Eligible medical, dental and vision expenses	Eligible dental and vision expenses (It can also be used to pay for eligible medical expenses after you reach your health plan annual deductible.)	Expenses for child/elder care for eligible dependents
What happens if you don’t use it	Your funds don’t roll over. You’ll forfeit any remaining balance after the March 31 receipt deadline	Your funds don’t roll over. You’ll forfeit any remaining balance after the March 31 receipt deadline	Your funds don’t roll over. You’ll forfeit any remaining balance after the March 31 receipt deadline

*During your first year of employment with IMI, your annual election will be prorated by the remaining pay periods of the year.

Don’t leave money on the table

Use a Dependent Care FSA to pay for child care with pre-tax dollars — and save hundreds a year.



Protection

If the worst should happen, you can feel confident knowing financial help is on the way. We automatically provide Basic Life, Accidental Death & Dismemberment (AD&D), and Disability Insurance at no cost to you and offer the option of supplemental coverage — just in case.



Select a beneficiary

Whether you elect additional coverage or not, it's important to choose who will receive the policy's benefit payment in the event of your death — your beneficiaries.

If you don't name a beneficiary, the state will decide how and when your benefit pays out. Keep in mind that naming a minor as your beneficiary will risk the state controlling how and when the minor receives the benefit. You can make this designation on PlanSource.

Basic Life and AD&D Insurance

In the event of your death, Basic Life pays your covered beneficiaries two times your annual salary.

Additional Life Insurance

To supplement the coverage provided by IMI, you can purchase additional Life Insurance coverage, getting up to four or five times your annual salary to meet your needs. If electing additional coverage, you may need to provide Evidence of Insurability (EOI). This coverage is tied to your employment and typically ends if you leave IMI.

Additional AD&D Insurance

To supplement the coverage provided by IMI, you can purchase additional AD&D Insurance for yourself.

Spouse Life Insurance

Choose from coverage levels of \$25,000, \$50,000, \$75,000 or \$100,000 for your spouse. This coverage is tied to your employment and typically ends if you leave IMI.

Child Life Insurance

You can purchase term Life Insurance for your dependent children (\$10,000 or \$20,000). This coverage is tied to your employment and typically ends if you leave IMI.

Permanent Life Insurance with Long-term Care

You can also purchase Permanent Life Insurance through Transamerica. With a Permanent Life Insurance policy, you're the policy owner, and you can maintain the coverage, even if you leave IMI, for as long as you choose to continue to pay the premium. This option offers you the ability to provide lasting protection for your family. And if you're diagnosed with a terminal illness, long-term care provisions may pay a portion of your benefit while you're still alive.

Disability Insurance

Receive supplemental income if you can't work because of injury or illness.

Disability coverage provides you with supplemental income if you become disabled and are unable to work. You have two disability income replacement programs, Short-term Disability (STD) and Long-term Disability (LTD), that you're automatically enrolled in at no cost to you. There's also a voluntary buy-up option.

Short-term Disability Insurance

When you need to miss work for an extended period of time due to an illness or accident, Short-term Disability Insurance can replace a percentage of your lost income for 13 weeks. This benefit is completely paid for by IMI, and you'd receive 60% of your lost work income, up to \$1,500 per week. If you live in California, New York, New Jersey, Rhode Island, Hawaii or Puerto Rico, your state requires your employer to offer Short-term Disability benefits. Your disability benefit will be coordinated between your employer and the state.

Long-term Disability Insurance

If you experience a disabling illness or injury that lasts longer than 13 weeks, Long-term Disability Insurance can replace 60% of your lost income (up to a maximum \$6,000 monthly benefit). This benefit is completely paid for by IMI.

Long-term Disability Insurance Buy-up Option

If you want additional coverage, you can cover 66.67% of your lost work income (up to a maximum \$15,000 monthly benefit). If electing additional coverage, you may need to provide EOI.

Supplemental insurance

Get extra help for unexpected medical expenses — for you, your spouse and your dependent children. You can view rates while you're enrolling online.

Critical Illness

A critical illness can cost you thousands of dollars in out-of-pocket expenses. Critical Illness Insurance gives you cash so you can pay your bills and cover everyday expenses (like utility bills and mortgage payments) while you focus on getting better. This insurance covers conditions such as:

- Heart attack;
- Stroke;
- Cancer; and
- End-stage renal failure.

Accident

If you're injured in an accident, this insurance can cover everything from your medical costs to everyday expenses.

Hospital Indemnity

An unanticipated trip to the hospital can be costly. With this insurance, you receive a lump sum to help pay for expenses if you or a covered family member is hospitalized.



Did you know?

If you're interested in a higher deductible plan with a lower medical premium, you may want additional coverage that pays benefits directly to you to help cover deductibles and out-of-pocket expenses.

Consider combining your medical coverage with Critical Illness, Accident or Hospital Indemnity Insurance. These plans are great complements to your medical plan choice and can help reduce the financial risk associated with illness and injury.

Depending on your situation, you may be able to save money by purchasing a lower-cost medical plan and adding one or more supplemental plans to achieve effective protection at a lower plan cost.

Wellbeing

Rewards through Personify Health

We want you to feel supported and prepared for anything. Our Personify Health program helps you focus on four aspects of wellbeing: mental, physical, financial and social. And by participating in the program, you can earn a \$500 discount on your medical premiums for the following calendar year! Earn your discount by doing wellbeing-related activities like financial planning, fitness programs, nutritional guidance and more.

Ready to reach your goals? Here’s how it works!

Act

Between January 1 and August 31 each year, you participate in approved wellbeing activities through Personify Health. You choose the activities and what you’d like to focus on, including your mental, physical, social and financial health.

Earn

You’ll earn points for each activity you complete. Some activities even offer multiple opportunities to earn points throughout the year, like tracking your sleep or watching webinars.

Save

Earn 100 points by August 31 and you’ll automatically be eligible for a \$500 discount on your medical plan premiums for the following calendar year.

How to get started (Effective January 1, 2026)

1. Visit join.personifyhealth.com/optimize to set up an account. Existing members can sign in at login.personifyhealth.com.
2. Fill in your personal details, enter the enrollment passphrase: nurture-your-world, accept the terms and conditions and choose your email preferences.
3. Track your activities and points on the Personify Health site or on the Personify Health mobile app (scan the QR code to download the app).



Apple Store



Google Play

How to earn points

ACTIVITIES

Know Your Numbers/Health

Complete the online Health Assessment/Health Check	Once per year	10
Complete a biometric screening or annual wellness physical (Tip! You can take up to four hours of PTO to receive your annual biometric screening.)	Once per year	50
Take a Foodsmart nutritional assessment	Once per year	5
Complete three preventive care activities	Once per year	15

Get Active/Get Online

Create a Koa Health account	Once per lifetime	5
Complete a Koa Health program	Three times per program	10
Watch a Schwab webcast	Three times per year	5
Complete an Enrich course	Once per month	10
Complete the company challenge	Three times per program	10
Update the Enrich financial wellness checkup	Once per year	5
Track you steps or activity 20 days in a month	Once per month	5
Complete the Enrich money personality	Once per lifetime	5
Track your sleep 20 days in a month	Once per month	5
Complete a Sworkit workout	Once per week	2
Attend an IMI lunch & learn	Three times per year	10
Register on the Personify Health platform	Once per lifetime	5
Enroll in Ovia	Once per lifetime	5

Interact with Experts

Meet w/a Schwab investment counselor via phone	Once per year	15
Complete a Foodsmart telehealth visit with a registered dietitian	Once per year	10
Complete an Ovia fertility/pregnancy/parenting interaction	Once per year	15
Complete a coaching call tailored to your health goals	Three times per year	15

Social, Emotional, Physical

Resources that can help you get answers to questions, get support when you need it and even have a little fun

Enrich

Offered through Personify Health

Need help managing your money? Start your financial wellbeing journey with Enrich today. You'll receive a customized financial education to improve the financial skills most important to you. Focus areas include student loans, retirement, healthcare and personal finance.

Foodsmart

Offered through Personify Health

Foodsmart makes healthy eating easy with its powerful mobile app, plus grocery discounts, meal kits and more. Identify how to clean up your diet by taking NutriQuiz. Foodsmart makes healthy food the most tasty, convenient and affordable option for every meal of the day.

Ovia

Offered through Personify Health

Ovia offers you personalized and comprehensive programming for all things related to fertility, pregnancy, adoption, surrogacy, parenting and returning to work.

Sworkit

Offered through Personify Health

Sworkit helps you get moving and build healthy habits with video-guided workouts. It's easy to find a workout that works for you and your busy schedule. Choose from 400 unique workouts and over 800 exercises. You can also create and save your own custom workouts in strength training, stretching, cardio, yoga and more.

Koa Health

Offered through Personify Health

Your mental wellbeing matters, and taking care of it is more important than ever. Created to support mental wellbeing, the Foundations app from Koa Health includes a library of content grounded in science to help you deal with stress, poor sleep, anxious thoughts and more.

Time away

We offer time away for holidays, sick time and personal time. We also offer leaves for all stages of life such as welcoming a child, sabbatical, bereavement, volunteering, fertility, mental health support and more.

Wellbeing Champions

Passionate about helping others and increasing awareness about the importance of mental wellbeing? Join our Global Wellbeing Champions group, dedicated to cultivating greater wellbeing through supportive conversations, healthy habits and self-care.

Employee Resource Groups

Find community and connect with others through our Employee Resource Groups (ERGs). Our groups include the Global Pride Network for LGBTQIA+ individuals and allies and the IMI Network of Women (NOW).



Financial

Beyond the basics, we offer programs and tools to support your financial wellbeing.

Visit us.imi-optimize.com to learn more about these programs.

BenefitHub

BenefitHub is a voluntary benefits platform that will allow you to enroll in discount programs and get insurance coverage for your pets and personal belongings (like your home and car). BenefitHub features multiple vendors available on a direct-bill basis, giving you the option to shop between them and find the best price for your family. Set up your account at imi.benefithub.com (referral code: 9W9PB9).

Legal benefits

The MetLife® Hyatt Legal Assistance Plan offers you economical access to attorneys for common legal services, such as will preparation, estate planning, family law and more. You, your spouse and your dependents will have access to a nationwide network of 14,000 experienced attorneys — just a phone call away!

When you enroll in the legal plan, you will also be able to use the MetLife Family First services. Family First provides you with digital tools and a confidential team of highly trained experts who will examine your unique caregiving situations, create holistic care plans and provide the resources and guidance needed to make care-related decisions.

Identity theft protection

Allstate has an industry-leading identity protection plan that includes proactive identity and credit monitoring, offering you the most comprehensive solution to fight today's identity fraud issues.

401(k)

A 401(k) is a tax-advantaged savings account that can help you prepare for retirement. Contributions are withheld directly from your paycheck, and IMI matches up to 6%. That means free money for your future! There's life after work, and we want you to make the most of it. Remember that you can change your 401(k) contribution at any time throughout the year by logging in to your Schwab account.

Yep! You must elect a beneficiary for your 401(k) too.

You can elect or change your beneficiaries anytime. To add or change a beneficiary, log in to workplace.schwab.com > My Profile > Beneficiaries.

Employee Stock Purchase Plan (ESPP)

The Employee Stock Purchase Plan (ESPP) is an easy, risk-free way to save and invest in IMI and your future by buying shares in the business at a reduced price. You can save up to \$500 each pay period for two years, which is held at a local bank, after which you have three options:

1. Purchase shares at a 10% discount and sell them immediately. You'll receive all your invested money back in addition to the gain from the sale of the shares.
2. Purchase shares at a 10% discount and hold on to them. Your shares will be kept for you in the Global Nominee Account at Equiniti until a future date of your choosing.
3. Decline to purchase shares. If the sale price is lower than the option price, you can have your savings returned to you.

The ESPP has an enrollment period once a year. You'll receive information about enrolling when the enrollment period is open. Generally, enrollment will be near the end of the year with a deadline of January 31 of the following year. Deductions will start in March each year.

Questions?

Contact the PlanSource Benefits Resource Center by calling **1-844-347-2498**. For specific plan questions, contact the benefit providers directly or visit us.imi-optimize.com for more information.



2026
benefits
contacts

	PHONE NUMBER	WEBSITE/EMAIL ADDRESS
Enrollment Platform		
PlanSource	1-844-347-2498 Representatives are available 8am – 11pm EST, Monday – Friday	<u>thesource.plansource.com/IMI</u> Username: First four letters of your first name, last three digits of your Social Security number, day of your birth, last two digits of your birth year (FFFF##DDYY) Password: Date of birth (MMDDYYYY) — you'll be prompted to change this immediately upon logging in.
Medical		
Anthem	1-844-271-5549	<u>anthem.com</u>
Kaiser	1-800-278-3296	<u>kp.org</u>
Dental		
Delta Dental	1-800-610-0201	<u>deltadentalco.com</u>
Vision		
EyeMed	1-866-800-5457	<u>eyemed.com</u>
Accounts		
PlanSource	1-844-347-2498	<u>thesource.plansource.com/imi</u>
Life, AD&D and Disability		
Lincoln Financial	1-877-275-5462	<u>mylincolnportal.com</u> Employee code: IMIOptimize
Supplemental Insurance		
Transamerica	1-855-244-8318	<u>transamerica.com</u>
Telemedicine		
LiveHealth Anthem medical plans only	1-888-548-3432	<u>livehealthonline.com</u>

	PHONE NUMBER	WEBSITE/EMAIL ADDRESS
401(k)		
Charles Schwab	1-800-724-7526 En español: 1-877-905-2553	<u>workplace.schwab.com</u>
Employee Stock Purchase Plan		
Equiniti	Helpline: +44 371-384-2040	<u>interne@equiniti.com</u>
Legal		
MetLife	1-800-821-6400	<u>legalplans.com</u> Access code: GETLAW
EAP		
Workplace Options	1-888-851-7032	<u>helpwhereyouare.com</u> Company code: IMI
Wellbeing		
Personify Health	1-888-671-9395	<u>join.personifyhealth.com/</u> <u>optimize</u> passphrase: nurture-your-world <u>support@personifyhealth.com</u>
Perks		
BenefitHub	1-866-222-8789	<u>imi.benefithub.com</u> Referral code: 9W9PB9
Identity Theft		
Allstate Identity Protection	1-800-789-2720	<u>myaip.com</u>
Virtual Physical Therapy		
Hinge Health	1-855-902-2777	<u>hingehealth.com</u>

This document constitutes a Summary of Material Modifications (“SMM”) regarding the IMI Americas Inc. Health and Welfare Plans. This is a summary of important changes to the information previously provided in the Summary Plan Description (“SPD”).

Because this SMM supplements and amends the SPD, you should retain a copy of this document with your copy of the SPD. If you have any questions, please contact the Plan Administrator by emailing **benefits@imiamericasinc.com**.

This SMM to the SPD for the plan is provided to you in accordance with the Employee Retirement Income Security Act of 1974, as amended. Every effort has been made to provide accurate information in this SMM. The information contained in this SMM is for informational purposes only; it doesn't constitute a contract or contractual obligation. In the event of a conflict between this SMM and the plan document, the terms of the plan document will control. Copies of plan-related documents are available upon written request to the Plan Administrator. Although IMI Americas Inc. (the “Company”) intends to continue the plan, the Company reserves the right to change, modify, amend, or terminate any or all of the provisions of the plan at any time and for any reason, subject only to applicable law.

