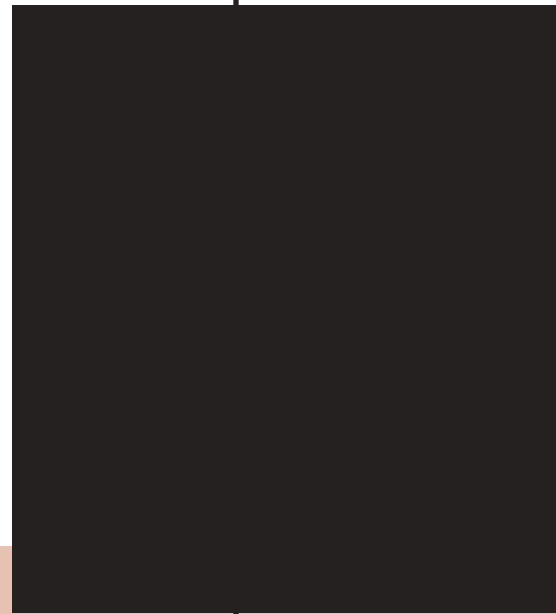
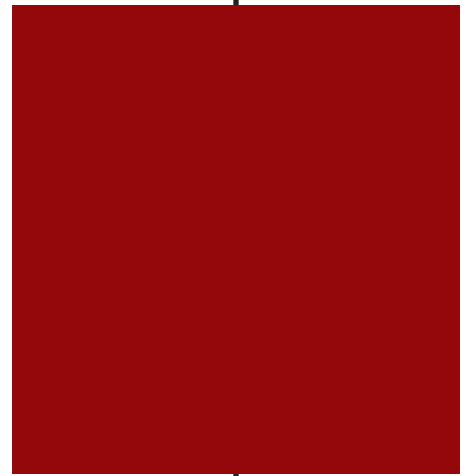


BENEFITS GUIDE



2026-
2027

This publication contains important information about your employee benefit program.

Please read thoroughly.

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Adler University Benefits

Welcome to the Adler University Team!

At Adler University, our success comes from dedicated employees like you. You bring the insight, expertise, and ambition that help us deliver the best possible service to each student's particular needs. We know that every employee is unique. Each of you has different needs when it comes to benefits. With that knowledge, Adler University provides a competitive benefits program that offers choices to protect the health and well-being of you and your family. This guide will provide an overview of the benefits available to all eligible employees. Please read this information carefully so you can make the best choices in benefits.

Enrollment Checklist

■ Read about your benefits

Read this guide and share it with your family.

■ Decide which benefits are best for you and your family

Think about your family's needs when considering plan options.

■ Enroll

Make your elections during Open Enrollment. If you are a new hire, you are eligible to enroll on the first of the month following your date of hire.

Benefits You Can Choose

- Medical
- Dental
- Vision
- Voluntary Critical Illness Plan
- Voluntary Accident Plan
- Voluntary Life and AD&D
- Health Savings Account (HSA)
- Flexible Spending Account (FSA)
- Voluntary ID Theft Protection
- Voluntary Pet Insurance
- Voluntary Long Term Disability

Benefits Adler University Provides

You receive these benefits at no cost to you.

- Group Life and AD&D
- Short Term Disability
- Employee Assistance Program

This Benefits Guide is offered as a highlight of the benefits available to eligible employees of Adler University. It is not intended to be a complete description of any plan. Nothing in this Benefits Guide is intended to create any express or implied contract of employment or guarantee of any benefits. All insurance contracts and plans have limitations and exclusions that apply. Please refer to and read all plan documents for more complete descriptions. If any statement conflicts with the applicable plan documents, the plan documents will govern. Adler University reserves the right to amend, modify, or eliminate any benefit program with or without prior notice.

Eligibility and Enrollment

Who's Eligible?

All U.S.-based employees regularly scheduled to work at least 20 hours a week are eligible for medical, dental, and vision benefits. All U.S.-based full-time employees regularly scheduled to work at least 30 hours a week are eligible for all benefits offered through Adler University. You are eligible to enroll in the benefit plans on the first of the month following your date of hire. You can enroll your eligible family members as described here. Eligible dependents include:

- Your lawful spouse who does not have coverage available to them through their employer
- Your domestic partner who does not have coverage available to them through their employer
- Your child(ren) who are younger than 26 (natural, adopted, or stepchildren)

Enrolling

New Hires: You are eligible to enroll on the first of the month following your date of hire. You must enroll at the appropriate time for coverage. If you miss this deadline, you will need to wait until the next Open Enrollment or have a qualifying life event in order to elect benefits.

Open Enrollment: You may enroll or change your elections once a year during Open Enrollment.

Spousal Coverage

Adler University's health plan will not cover an employee's spouse if the spouse is offered coverage through his or her employer.

Limiting spousal coverage to those who do not have other opportunities to obtain group coverage helps ensure that we can continue to offer you a quality health plan with competitive premiums.

Qualifying Status Change

The benefit elections you make (either as a new hire or during Open Enrollment) stay in place for the entire plan year, unless you have a qualifying status change. Federal law prohibits you from dropping, adding, or changing any plan paid with pre-tax dollars during the plan year. However, you may make a change if you encounter a qualifying event. These events include changes in your family status that may affect your coverage needs, such as birth or adoption of a child, marriage, divorce, or a dependent who becomes ineligible for coverage.

If you experience a qualifying event and need to make a change during the plan year, contact the Office of People & Culture within 30 calendar days of the event. For IRS guidelines and a list of qualifying events, go to www.healthcare.gov/glossary/qualifying-life-event.

Employee Well-Being

Wellness Program

The wellness contributions listed in this guide apply for the 2026-2027 plan year once you complete the requirements of the current (2025-2026) Adler U Wellbeing Program. These requirements include:

- Complete annual physical
- Complete health assessment
- Complete a corporate challenge

Benefit Contacts

Need More Information?

Use these contacts to find in-network providers, check your claims, ask questions about your benefits, and more.

UNITEDHEALTHCARE

Surest Plan: **866.683.6440**
 High Deductible Health Plan: **866.314.0335**
 HMO Plan: **855.828.7715**
www.myuhc.com



For help with:

- Finding network providers and pharmacies
- Managing claims
- Coverage questions
- Finding forms

PHARMACY BENEFITS— OPTUMRX

888.290.5416
www.optumrx.com



For help with:

- Questions about prescription coverage

DENTAL CARE—DELTA DENTAL

800.323.1743
www.deltadentalil.com



For help with:

- Finding network dentists
- Managing dental claims
- Coverage questions

VISION—VSP

800.877.7195
www.vsp.com



For help with:

- Finding network providers
- Vision claims
- Coverage questions

LIFE INSURANCE, DISABILITY PLANS—MUTUAL OF OMAHA

Life, Critical Illness, Accident: **800.775.8805**
 Long Term Disability: **800.877.5176**
 Short Term Disability: **877.462.3652**
www.mutualofomaha.com
 STD: AbsencePro.absencemgmt.com



For help with:

- Life/AD&D
- Long and Short Term Disability
- Critical Illness and Accident

RETIREMENT— EMPOWER RETIREMENT

800.338.4015
<https://participant.empower-retirement.com/participant/#/sfd-login?accu=Empower>



For help with:

- Retirement services

EMPLOYEE ASSISTANCE PROGRAM—TELUS

Toll Free: **888.851.7032**
One.TelusHealth.com



■ Username: adler

■ Password: eap

For help with:

- Counseling services
- Legal and financial services

FSA AND COBRA— NAVIA BENEFIT SOLUTIONS

FSA: **800.669.3539**
 FSA: www.naviabenefits.com
 COBRA: www.taben.com



For help with:

- Flexible Spending Account (FSA)
- COBRA

HSA—HEALTHQUITY

866.346.5800
www.healthequity.com



For help with:

- Health Savings Account (HSA)

PET INSURANCE—NATIONWIDE

877.738.7874
benefits.petinsurance.com/adler



For help with:

- Questions about the pet insurance plan

ID THEFT PROTECTION—LIFELOCK

800.607.9174
www.lifelockbusinesssolutions.com/EmployeeBenefits/Benefitplans



For help with:

- Questions about the ID theft protection plan

Medical Benefits

Medical Plan Options

- Option 1: Surest Plan
- Option 2: High Deductible Health Plan (HDHP)
- Option 3: HMO Plan

Surest Plan

With the Surest Plan, you have access to a copay-only health plan that eliminates deductibles and coinsurance for covered care. This means you'll know your costs upfront, making it easier to plan and budget for healthcare services.

Each service and provider has a specific copay amount, which you can view through Surest's digital platform.

Costs may vary depending on the provider and facility you choose. Surest is designed to guide you toward high-value care, with lower copays for providers and locations that offer quality, cost-effective services. For each episode of care, you'll see a single, bundled price.

When searching for providers, you will need to select Choice Plus network to determine which providers are in-network.

High Deductible Health Plan (HDHP) with HSA

With the High Deductible Health Plan (HDHP), you have access to UnitedHealthcare's network of doctors and hospitals. You may see any doctor at any time, with no referrals needed for specialists. Keep in mind, however, that you will receive a higher level of benefits when using in-network providers. When searching for providers, you will need to select the Core network to determine which providers are in-network.

HMO Plan

The HMO Plan is only available to employees located in the Chicagoland area. With the HMO Plan, you will have the lowest out-of-pocket costs and a set copay for a range of medical services. When you enroll in the HMO Plan, you must select a primary care physician (PCP) who will provide or coordinate all of your care. For specialty care, you will need a referral from your PCP. If you do not receive care through your PCP, your medical costs will not be covered by your health plan. There are no out-of-network benefits under the HMO Plan. When searching for providers, you will need to select the Navigate HMO network to determine which providers are in-network.

FINDING NETWORK PROVIDERS

UnitedHealthcare has an extensive network of doctors and hospitals. When you visit an in-network provider, you receive the best value from your health plan. To find in-network providers based on the health plan in which you enroll, follow the directions below.

1. Go to myuhc.com
2. Select Find a Provider under the Find a Doctor tile
3. Choose Medical Directory
4. Choose Employer and Individual Plans
5. Select the type of care you are looking for
6. Enter the ZIP code of your residence
7. Select the network of your plan
 - Surest Plan Network: Choice Plus
 - High Deductible Health Plan Network: Core
 - HMO Plan Network: Navigate HMO

Medical Plans

	High Deductible Health Plan		HMO Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Calendar Year Deductible				
Individual	\$3,400	\$5,000	\$500	N/A
Family	\$6,800	\$10,000	\$1,000	N/A
Out-of-Pocket Maximum (includes deductible)				
Individual	\$3,400	\$10,000	\$3,500	N/A
Family	\$6,800	\$20,000	\$7,000	N/A
Coinsurance (after you reach the deductible)				
Plan Pays	100%	80%	80%	N/A
Physician Office Visits				
Preventive Care	No charge	80% after deductible	No charge	N/A
PCP Office Visits	0% after deductible	80% after deductible	\$20	N/A
Specialist Office Visits	0% after deductible	80% after deductible	\$40	N/A
Hospital Services				
Urgent Care	0% after deductible	80% after deductible	\$50	N/A
Emergency Room	0% after deductible	0% after deductible	\$250 + coinsurance	\$250 + coinsurance
Inpatient	0% after deductible	80% after deductible	Deductible/coinsurance	N/A
Retail Prescription Copay (30-day supply)				
Generic	0% after deductible	0% after deductible	\$10	N/A
Formulary	0% after deductible	0% after deductible	\$40	N/A
Non-Formulary	0% after deductible	0% after deductible	\$75	N/A
Specialty	0% after deductible	0% after deductible	\$125	N/A



UHC Surest Plan—New in 2026!

Surest Plan Overview

Surest is a copay-only plan, unlike traditional medical plans. There are no deductibles or coinsurance for care.

Services and doctors have a specific copay price, which you can see through Surest’s easy-to-use digital platform. With just a click, you can get clear answers about costs, coverage, and options before you choose your care.

Even better, lower prices are assigned to higher value care providers and facilities—from preventive to emergency care, colds to cancer treatment. There will be one price for a single event.

Also, guidance and advocacy are built into the platform, giving you more control of your healthcare experience. Surest allows you to make the best healthcare decisions for your family and budget.

Surest Highlights

- No deductible, no coinsurance
- Copay price based on service and provider selection
- Upfront pricing (you know what you owe in advance)
- Easily search your symptoms within the Surest app* or website
- Opportunities to pay less for quality care

* The Surest app doesn’t link to www.myuhc.com or UnitedHealthcare’s wellness program.

	Surest Plan	
	In-Network	Out-of-Network
Calendar Year Deductible		
Individual	\$0	\$0
Family	\$0	\$0
Out-of-Pocket Maximum (includes deductible)		
Individual	\$5,500	\$11,000
Family	\$11,000	\$22,000
Coinsurance (after you reach the deductible)		
Plan Pays	N/A	N/A
Physician Office Visits		
Preventive Care	No charge	\$195 copay
PCP Office Visits	\$25 to \$130	\$220 copay
Specialist Office Visits	\$25 to \$130	\$220 copay
Hospital Services		
Urgent Care	\$80	\$210 copay
Emergency Room	\$900	\$900 copay
Inpatient	\$400-\$3,500 copay/stay	Up to \$10,000 copay/stay
Retail Prescription Copay (30-day supply)		
Generic	\$10	\$10
Formulary	\$35	\$35
Non-Formulary	\$70	\$70
Specialty	\$10-\$200	\$10-\$200



Get started by scanning this QR code to check prices and providers! <https://surest.com/plan?accesscode=FI26ID5500ALT1>



Tobacco Surcharge

Adler will impose a \$50 monthly surcharge for employees who have used tobacco or nicotine products within the last 6 months and are enrolled in the medical plan. During Open Enrollment, you will be required to attest to your status as a tobacco or non-tobacco user. Employees who do not answer the tobacco status truthfully may be subject to discipline if they are found to be a tobacco user.

Employees who use tobacco and are enrolled in the HMO or HSA plans have access to Quit For Life® on Rally Coach™ through UnitedHealthcare at no additional cost. This program provides personalized support, including one-on-one coaching, online tools, group sessions, and 24/7 resources to help you quit and stay tobacco-free. To get started, visit myuhc.com and navigate to your additional benefits to enroll.

* For the sole purpose of this policy, tobacco products include, but are not limited to, cigarettes, cigars, snuff, chewing tobacco, pipes, e-cigarettes, hookah, nicotine gels, dissolvables, etc.

Employees enrolled in the Surest plan have access to Pivot, a digital tobacco cessation program available at a \$0 copay for eligible members ages 18 and older. Pivot offers personalized, non-judgmental support through a mobile app, unlimited coaching, an online community, and tools like the SmartSensor and nicotine replacement therapy (for eligible participants). To learn more or enroll, visit pivot.co/surest and use access code surest.

Both programs are designed to support your journey to quit tobacco by offering convenient tools, expert guidance, and ongoing encouragement based on your plan enrollment.



Health Savings Account (HSA)

Health Savings Account

If you enroll in the High Deductible Health Plan (HDHP), you may enroll in a Health Savings Account (HSA). An HSA is a separate, tax-advantaged medical savings account available only if you enroll in what's considered a qualified High Deductible Health Plan (HDHP). You can open an HSA through HealthEquity.

An HSA works similarly to a personal checking account; however, the money can only be used to pay for qualified health expenses. Your HSA can pay for you and your eligible dependents' health expenses tax free. An HSA belongs solely to you, which means you keep the account even if you change jobs or retire. Any unused funds rollover from year to year. Other HSA advantages include:

- You can add tax-free contributions and take the deduction when filing your taxes. This helps you save on most state and federal taxes.
- You can use the money in your account to pay for eligible out-of-pocket medical, dental, and vision expenses.
- You can pay COBRA and some Medicare premiums with your HSA.
- You can use the money at any time, as long as it's for a qualified medical, dental, or vision expense.

Who Can't Open an HSA?

- You cannot be enrolled in Medicare. (If you had an HSA prior to enrolling in Medicare, you may still use the funds. You just can't contribute to the account anymore.)
- You cannot be claimed as a dependent on someone else's taxes.
- You cannot have a regular FSA. (If you do have an FSA, but decide to open an HSA, your FSA will be relabeled a limited use FSA. Limited use FSAs cannot be used to pay for medical and pharmacy expenses, but can be used for qualified dental and vision expenses.)

Contribution Limits

Each year, the IRS sets an annual limit on deposits to HSA's. The maximum you can deposit into your HSA depends on whether you enroll in individual or family coverage. The limits take into account contributions from all sources—amounts you or anyone else deposits. Individuals over the age of 55 who are opening an HSA for the first time may contribute an additional \$1,000 every year.

2026 HSA Contribution Limits	
Individual	\$4,400
Family	\$8,750

Dental

Dental Benefits

You and your eligible dependents can enroll in the Delta Dental PPO Plan. In the PPO, you are free to use any dentist at any time, but using in-network providers will help you save money. Network providers offer discounted fees to Delta Dental, and you share in the savings. Going out-of-network, you risk being balance billed by your provider.

Delta Dental of Illinois PPO

Plan Features	In-Network Delta Dental PPO* and Delta Dental Premier** (You Pay)	Out-of-Network (You Pay)
Annual Maximum	\$2,000	\$2,000
Deductible	\$50 single/ \$150 family	\$50 single/ \$150 family
Services		
Preventive (exams, X-rays, cleanings, fluoride)	0%	0%
Basic Services (fillings, space maintainers, simple extractions, sealants, oral surgery)	20%	20%
Major Services (crowns, bridges, dentures, implants, endodontics, periodontics)	50%	50%
Orthodontia (to age 19 and adults)	50%	50%
Orthodontia Lifetime Maximum	\$1,000	\$1,000

* Delta Dental PPO dentists accept payment based on the lesser of the submitted fee (their usual fee) or Delta Dental’s allowed PPO fee. PPO network dentists cannot charge you for costs exceeding the PPO fee.

** Delta Dental Premier dentists accept payment based on the lesser of the submitted fee (their usual fee) or Delta Dental’s maximum plan allowance. Premier dentists may not charge you for costs exceeding the maximum plan allowance.



Vision

Vision Benefits

You and your eligible dependents can enroll in vision coverage at a reasonable rate through VSP. This plan offers network benefits for eye exams, prescription eyeglasses, frames, and contact lenses. You can also take advantage of special discounts on eyeglass frames, sunglasses, and even laser vision correction. The vision plan gives you access to an extensive network of VSP providers. Your network is **VSP Choice**.

VSP Vision Plan

	In-Network Benefits (You Pay)	Out-of-Network Benefits (Reimbursement to You)
Exam	\$10	Up to \$45
Prescription Glasses	\$25	See Benefits Summary for details
Frames (every 24 months)	\$180 allowance and then 20% discount	Up to \$70
Lenses		
Single	\$25	Up to \$30
Lined Bifocal/Trifocal	\$25	Up to \$50/\$65
Lenticular	\$25	Up to \$100
Contacts (instead of prescription glasses)		
Elective	\$180 allowance	Up to \$105
Medically Necessary	Covered in full	Up to \$210
Frequency		
Exam		12 months
Lenses		12 months
Contacts		12 months
Frames		24 months
Laser Vision Correction		
	Average 15% off the regular price or 5% off the promotional price; discounts only available for contracted facilities.	



Disability

Disability insurance replaces part of your income if you become disabled and cannot work due to a non-work-related illness or injury. To help protect you and your family, Adler University provides Group Short Term Disability at no cost to you. To qualify for this benefit, you must be under a doctor’s care and your disability must be approved by the insurance carrier. Some pre-existing condition rules may apply. The Short Term Disability plan is administered by Mutual of Omaha. Long Term Disability coverage is available as a voluntary benefit for employees who choose to enroll.

Group Short Term Disability (paid by employer)

Plan Features	Benefits
Benefit Maximum	60% of weekly earnings or \$1,000/week, whichever is less
Benefits Begin	
Injury	8th consecutive day of disability
Illness	8th consecutive day of disability
Benefit Duration	
	12 weeks

Voluntary Long Term Disability (paid by employee)

Plan Features	Benefits
Benefit	60% of your monthly earnings
Benefit Maximum	\$9,000/month
Benefits Begin	91st consecutive day of disability
Benefit Duration	To Age 65 or Social Security Normal Retirement Age



Voluntary Critical Illness

For protection against the unexpected, Adler University offers Voluntary Critical Illness insurance. The plan provides a specific cash benefit to you if you acquire a serious illness. You can use these cash benefits at your discretion. Coverage is available for purchase for you and your eligible family members and the cost is paid by employees. The plan is administered by Mutual of Omaha.

Voluntary Critical Illness

Plan Features	Benefits
Employee Benefit	\$5,000 to \$30,000 in \$5,000 increments Guarantee Issue: \$30,000
Spousal Benefit	\$5,000 to \$30,000 in \$5,000 increments Not to exceed 100% of Employee Benefit Guarantee Issue: \$30,000
Child(ren) Benefit	50% of employee/member benefit up to \$15,000 Guarantee Issue: \$15,000

Plan Features	Benefits
Cancer Type1 (Invasive)	100%
Heart Attack	100%
Kidney Failure	100%
Organ Transplant	100%
Stroke	100%
Benign Brain Tumor	25%
Carcinoma in Situ	25%

POLICY BENEFIT MAXIMUM

The maximum payout amount is 4 times the benefit amount for each insured person. If the benefits paid for an insured person reach the benefit maximum, insurance for the insured person will terminate. Insurance for any other insured persons will remain in effect, subject to this maximum. If insurance terminates for the employee/member, any dependent(s) may remain insured provided the employee/member continues to satisfy the eligibility requirements.

PORTABILITY

When insurance ends, you have the right to continue Voluntary Group Critical Illness insurance for yourself and your dependents, if applicable.

For complete pricing, please see the Critical Illness Benefit Booklet.

WELLNESS BENEFIT

You can receive \$50 per covered person per calendar year when you each receive a qualified preventative health screening.



Voluntary Accident Insurance

Accident Insurance is designed to cover unexpected expenses that result from all kinds of accidents, even sports-related and household ones. It provides cash benefits to cover things your health insurance doesn't, such as deductibles and copays. The plan is administered by Mutual of Omaha and the cost is paid by employees.

Examples of Covered Injuries Include:

- Broken bones
- Burns
- Torn ligaments
- Eye injuries
- Concussions

Examples of Covered Expenses Include:

- Emergency room treatment
- Outpatient surgery facility
- Doctor office visit
- Physical therapy
- Hospitalization

See the benefit summary for a full list of covered injuries and expenses and the corresponding benefit amounts.

Your benefits come directly to you without any restrictions on how you can use them. You can't predict when unexpected accidents will happen, but you can help protect your family from the expenses that accidents bring with them.

WELLNESS BENEFIT

You can receive \$50 per covered person per calendar year when you each receive a qualified preventative health screening.



Life and AD&D

Life and Accidental Death & Dismemberment (AD&D) provides your beneficiary with a sum of money in the event of your death. Adler University provides group term life insurance at no cost to you. You can purchase additional coverage for you and your eligible family members for added protection. The Life and AD&D plans are administered by Mutual of Omaha.

Group Life and AD&D (paid by employer)

Plan Features	Benefits
Benefit Amount	1.5× annual earnings up to \$500,000
AD&D	Equal to amount of life insurance
Reduction Schedule	Reduces to 65% at 65, 50% at 70

Voluntary Life and AD&D (paid by employee)

Plan Features	Benefits*
Employee Benefit	\$10,000 to \$500,000, in increments of \$10,000 or 5× annual earnings Guarantee Issue: \$100,000 when first eligible
Spouse Benefit	Increments of \$5,000 to a maximum of 100% of the employee's election with an overall maximum of \$100,000 Guarantee Issue: \$35,000
Child(ren) 14 Days Old to Age 26	Flat amount of \$10,000 Guarantee Issue: \$10,000
AD&D	Equal to amount of life insurance
Reduction Schedule	Reduces to 65% at 65, 50% at 70

* Any increase in voluntary life benefits which does not take place within 31 days of the employee's or dependents' eligibility effective date is subject to evidence of insurability.



Flexible Spending Account (FSA)

Flexible Spending Accounts, or FSAs, let you set aside part of your pre-tax pay and use it for out-of-pocket medical expenses like copays, deductibles, or dependent daycare expenses. The money you put into the account(s) is deducted from your paycheck before federal and most state taxes are taken out. You don't pay taxes on the money when you use it to pay for eligible medical expenses.

You can enroll in any of the accounts below, even if you waive other coverages.

- Healthcare FSA (only for PPO or HMO enrollees)
- Limited Healthcare FSA (only for High Deductible Health Plan/HSA enrollees)
- Dependent Care FSA
- Transit and Parking FSA

How it Works

You can use a convenient debit card to pay for prescriptions, office visits, day care, and/or parking and transit—or request reimbursements online. Flexible Spending Accounts are administered by Navia Benefit Solutions. To learn more, visit www.naviabenefits.com.

Healthcare FSA

This account allows those enrolled in a PPO Plan or HMO Plan to put aside pre-tax dollars to pay for out-of-pocket medical, dental, and vision expenses.

Limited Healthcare FSA

This account enables those with a High Deductible Health Plan/HSA the ability to put aside pre-tax dollars to pay for out-of-pocket dental and vision expenses only.

Annual Contribution Limit (2026-2027) for Healthcare FSAs and Limited Healthcare FSAs

\$3,400

Transit and Parking FSA

Certain transit and parking expenses can be covered by two separate FSA plans. Eligible mass transit FSA expenses include costs for any fare card, pass, voucher, or ticket to cover commuting costs. Qualified parking expenses include parking near work, or a location where an employee commutes to work.

Maximum Allowed Amounts (2026-2027)	
Parking	\$340/month
Transit	\$340/month

Dependent Care FSA

You can use the money you contribute to a Dependent Care FSA for your qualified dependents such as:

- Dependents under age 13
- Your dependents who are disabled
- Your elderly parent if you provide more than half your parent's maintenance costs during the year

Expenses for care of a qualified dependent are only eligible if the care enables you to work.

Annual Contribution Limits (2026-2027)	
Individual	\$7,500
Married (filing one tax return)	\$7,500
Married (filing separately)	\$3,750

“Use it or Lose It” Rule

If you don't use all the money in your medical and dependent care FSAs by the end of the plan year, any balances will be forfeited. Be sure to set aside only what you think you'll need for eligible expenses. You can't transfer money between FSAs, e.g., the Dependent Care FSA must be used for day or eldercare and can't be used for health expenses, (and vice versa).

- The Healthcare FSA has a \$680 rollover provision. This allows you to use your 2025-2026 FSA account balance to pay for healthcare expenses in 2026-2027 without the rollover amount being forfeited.
- The Dependent Care FSA has a 2.5 month “grace period” that allows you to use remaining 2025-2026 elections through September 15, 2026.
- Funds left over in a FSA transit and/or parking account roll over into the next year provided you stay enrolled in the plan.



Employee Assistance Program

The TELUS Employee Assistance Program is here to support you in all aspects of your personal and professional life. TELUS EAP can assist with common, everyday concerns and is here to support you through the unique challenges we face today. All services offered through the EAP are provided at no cost to you and your household family members.

Trained professionals can help you:

- Balance your work and home life
- Deal with family and relationship concerns
- Cope more successfully with anxiety, depression, or drug/alcohol issues
- Make healthy lifestyle changes that last

Services include:

- Coaching and counseling in person, by telephone, or by video
- Referrals for child care and elder care
- Help with daily living issues
- 24/7 phone support for immediate help

Strictly Confidential!

Your participation in the EAP is always voluntary and always confidential. Participating in the EAP is always your choice. TELUS, an independent provider, administers the EAP and follows strict confidentiality guidelines as defined by HIPAA. Your personal health information is never shared with your employer.

CALL YOUR EAP TODAY: 888.851.7032

VISIT: [ONE.TELUSHEALTH.COM](https://one.telushealth.com)

- Username: adler
- Password: eap



Nationwide Pet Insurance

You can elect pet insurance through Nationwide that works very similar to a medical insurance plan offered to a human with an annual max and a deductible. Rates are based on the state that you live in, the plan you select, your pet's species, age and breed.

Visit <http://benefits.petinsurance.com/adler> or call **877.738.7874** and mention that you're an employee of Adler to receive preferred pricing. If you choose to enroll in pet insurance, you will pay the premium directly to Nationwide.

Components of the Plan

- 24/7 vet helpline
 - 24/7 access to veterinary experts
 - Contact experts via phone, chat, and email
 - Unlimited help for everything from general pet questions to identifying urgent care needs
- Coverage details
 - \$250 deductible
 - Up to 50% or 70% back on veterinary bills (based on the plan you choose)
 - \$7,500 annual max
- Covers
 - Accidents
 - Illness
 - Hereditary and congenital
 - Cancer
 - Behavioral treatments
 - Rx therapeutic diets and supplements



Identity Theft Protection

LifeLock helps provide you peace of mind with comprehensive identity theft protection. If a potential threat is detected, you are notified via email, text, phone, or mobile app alerts. Should you become a victim of identity theft, LifeLock provides a dedicated restoration specialist to help restore your identity. The plan coverage details are outlined below:

	Essential	Premier
LifeLock Identity Theft Protection		
Home Title Monitoring		X
LifeLock Skill for Amazon Alexa	X	X
Credit, Bank, and Utility Account Freezes	X	X
Identity Verification Monitoring	X	X
LifeLock Identity Alert System	X	X
Payday—Online Lending Alerts	X	X
Credit Alerts and Social Security Alerts	X	X
LifeLock for Norton360 mobile app (Android and iOS)	X	X
Dark Web Monitoring	X	X
LifeLock Privacy Monitor	X	X
USPS Address Change Verification	X	X
Stolen Wallet Protection	X	X
Reduced Pre-Approved Credit Card Offers	X	X
Fictitious Identity Monitoring	X	X
Data Breach Notifications	X	X
Bank and Credit Card Activity Alerts	X	X
Checking and Savings Account Application Alerts		X
Bank Account Takeover Alerts		X
401(k) and Investment Account Activity Alerts	X	X
File Sharing Network Searches	X	X
Sex Offender Registry Reports	X	X
Prior Identity Theft Remediation	X	X
U.S.-Based Identity Restoration Specialists	X	X
24/7 Live Member Support	X	X
Million Dollar Protection Package	Up to \$1 million each	Up to \$1 million each
Credit Application Alerts	One-Bureau	One-Bureau
Credit Monitoring	One-Bureau	Three-Bureaus
Annual Credit Report and Credit Score		Three-Bureaus
Monthly Credit Score Tracking		One-Bureau
Norton Device Security		
Secures PCs, Macs, and Mobile Devices	Up to 3 devices (family gets 6 devices)	Up to 5 devices (family gets 10 devices)
Online Threat Protection	X	X
Password Manager	X	X
Parental Control	X	X
Smart Firewall	X	X
Cloud Backup	10 GB	50 GB
Online Privacy		
SafeCam	X	X

Employee Contributions (Per Pay Period)

Medical (Wellness)*

Tier	Surest Plan	HDHP Plan	HMO Plan
Employee	\$90.36	\$38.50	\$30.02
Employee + Spouse	\$321.90	\$248.10	\$216.32
Employee + Child(ren)	\$283.71	\$201.71	\$175.91
Family	\$511.01	\$406.89	\$354.67

Vision*

Tier	
Employee	\$4.32
Employee + Spouse	\$6.91
Employee + Child(ren)	\$7.06
Family	\$11.38

Medical (Non-Wellness)*

Tier	Surest Plan	HDHP Plan	HMO Plan
Employee	\$115.36	\$63.50	\$55.02
Employee + Spouse	\$346.90	\$273.10	\$241.32
Employee + Child(ren)	\$308.71	\$226.71	\$200.91
Family	\$536.01	\$431.89	\$379.67

Critical Illness

See table for pricing details.

Accident Insurance

Tier	
Employee	\$5.01
Employee + Spouse	\$8.08
Employee + Child(ren)	\$9.63
Family	\$15.68

Tobacco Surcharge*

Tobacco users will be subject to an additional \$25 surcharge (per pay period).

* Contributions are taken out of your paycheck pre-tax.

Dental*

Tier	PPO
Employee	\$14.50
Employee + Spouse	\$28.90
Employee + Child(ren)	\$33.70
Family	\$50.48



Voluntary Life and AD&D (Rates per \$1,000)

Age	Employee Rate	Spouse/Domestic Partner Rate
Less than 25	\$0.038	\$0.034
25-29	\$0.047	\$0.048
30-34	\$0.056	\$0.063
35-39	\$0.079	\$0.097
40-44	\$0.097	\$0.125
45-49	\$0.137	\$0.173
50-54	\$0.186	\$0.244
55-59	\$0.309	\$0.357
60-64	\$0.495	\$0.667
65-69	\$0.839	\$1.068
70-74	\$1.512	-
75+	\$3.635	-

Voluntary Life and AD&D Child(ren) (Rate per \$1,000)

\$0.145

Voluntary Long Term Disability (Rate per \$100 of Monthly Covered Payroll)

Age	Rate
<20	\$0.08
20-24	\$0.09
25-29	\$0.13
30-34	\$0.20
35-39	\$0.25
40-44	\$0.31
45-49	\$0.42
50-54	\$0.62
55-59	\$0.73
60-64	\$0.78
65-69	\$0.82
70-99	\$0.86

Identity Theft Protection

Tier	Essential	Premier
Employee	\$4.50	\$7.50
Family	\$8.99	\$14.99



CALCULATE VOLUNTARY LIFE INSURANCE COSTS

1. Life insurance amount divided by 1,000
2. Find the rate for your age
3. Multiply the result of the first step above by the rate for your age
4. This will provide you with your per pay period premium

Additional Benefits Programs—U.S.

Paid Leave Programs

Vacation Time

Eligible U.S.-based employees begin accruing paid vacation time upon hire along the following schedule:

Length of Service	# of Vacation Days Accrued Annually	# of Vacation Hours Accrued Annually	# of Vacation Hours Accrued Semi-Monthly
0 to 12 Months	12	96	4
13 to 24 Months	15	120	5
25 Months to 10 Years	18	144	6
More Than 10 Years	22	176	7.33

Sick Time

Eligible U.S.-based employees begin to accrue paid sick time upon hire, up to 10 days per year.

# of Sick Days Accrued Annually	# of Sick Hours Accrued Annually	# of Sick Hours Accrued Semi-Monthly	Cap on Sick Maximum Unused Hours
10	80	3.33	240

Holidays

The University generally observes up to fifteen (15) holidays each year and provides pay to eligible employees when their scheduled workday falls on a day that their campus closes in observance of a holiday. Additionally, the University provides eligible employees up to two (2) floating holidays to schedule and use each year, prorated in the first year of employment based on the employee’s start date. Although this schedule is set each year and is subject to change, the general schedule observed by the University’s campuses in the U.S. are below.

- New Year’s Day
- Martin Luther King, Jr. Day
- President’s Day
- Spring Holiday
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Indigenous Peoples Day
- Veterans Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Eve
- Christmas Day
- Paid winter break closure (December 24 through New Year’s Day; number of days varies annually)

Retirement Savings Program

Eligible employees are invited to participate in Adler University's 403(b) and 457(b) Retirement Plans. Shortly after beginning employment, employees can elect to make contributions to deferred compensation accounts through Empower Retirement either on a pre-tax or post-tax basis. The University matches employee contributions up to 5%. Employer match contributions become vested after 1 year of eligible service.

Education Support Programs

Eligible employees may access funding support to enroll in courses at Adler University or another institution of higher learning after completing one year of eligible service. The coursework must be relevant to the employee's work with the University or future work with the University. Approval to participate must be sought in advance from the employee's supervisor and applicable internal administrative offices. Employees are only permitted to participate in one program at a time. Employees may be required to commit to ongoing lengths of service with the University for accessing these benefits without a repayment requirement.

These programs are outlined below and are subject to change at the University's discretion. Please contact the Office of People and Culture for additional information.

Tuition Remission—Adler University Coursework

Eligible employees may enroll in courses at Adler University up to six (6) credit hours each term, tuition free. Employees are responsible for all other related expenses such as standard fees, books, supplies, and any tax liability that may apply. Adler University interns may audit university courses at no cost. This benefit does not waive admissions requirements of the University and its programs.

Tuition Reimbursement—Degrees and Coursework at Another Institution

Subject to supervisory and University approval, Adler University may reimburse eligible employees for up to ½ of tuition costs for coursework or degree programs completed at an outside institution. Approval is granted on a case-by-case basis and is dependent upon departmental needs, budget considerations, and the relevance of the coursework to the employee's role or professional development.

Tuition reimbursement is provided following the successful completion of the approved course(s) and will be paid directly to the employee upon submission of appropriate documentation of tuition expenses and course completion.

All other expenses associated with enrollment, including but not limited to registration fees, student fees, books, and supplies, are the responsibility of the employee.

Definitions

THIS GLOSSARY WAS CREATED TO HELP YOU BETTER UNDERSTAND THE DIFFERENT TERMS USED BY HEALTH PLANS WHEN DESCRIBING COVERAGE AND COSTS.

Allowed Amount

The amount the plan pays for covered services is based on the “allowed amount” as determined by the insurance company.

Balance Billing

When an out-of-network provider charges more than the allowable amount or discounted fee, you may be billed for the difference. PPO providers do NOT balance bill you for amounts over the allowable amount.

Coinsurance

Your share of the cost of health services provided to you.

Copays or Copayments

A set dollar amount that you pay for a covered healthcare service.

Covered Services

Healthcare services that will be paid for, in part or in full, by a medical plan.

Deductible

The amount of money you are required to pay each plan year for healthcare services before your health plan starts paying a portion of the medical bill. In most plans, the deductible for in-network and out-of-network (non-preferred) providers is separate.

Emergency Care

Medical care that is needed immediately to save your life or to prevent serious harm to your health.

Explanation of Benefits (EOB)

After you’ve visited a doctor, clinic, or hospital, you will receive an EOB from your health plan administrator that tells you what portion of the provider’s charges are eligible for benefits and explains what’s covered. If the service is declined, the EOB will include the reason(s) and appeal information. If your provider is part of a network, you will also see the calculated discount.



In-Network

A group of healthcare providers and facilities that form an affiliation and contract as a group with a health plan to offer negotiated rates and savings discounts.

Out-of-Pocket Limits

Healthcare expenses paid by you in the form of copays, coinsurance, and deductibles. Charges that are not covered by the insurance plan, are not medically necessary, or are billed by a non-network provider and are over the allowed amount are not included in the out-of-pocket maximum.

Out-of-Network or Non-PPO

Healthcare providers and facilities who are not under contract with a health plan to provide discounted fees.

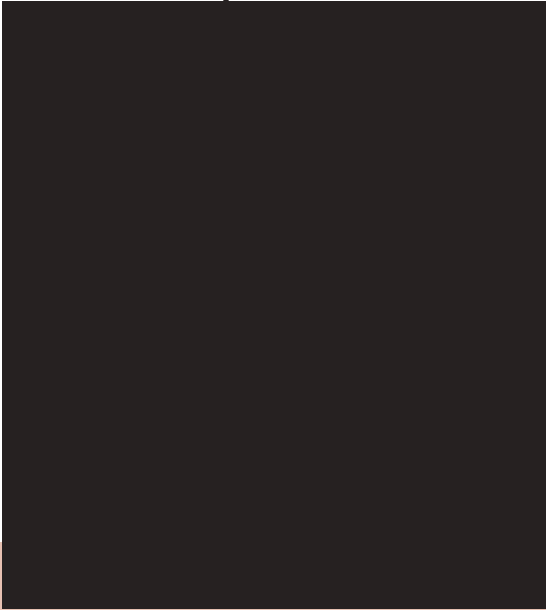
Preferred Provider Organization (PPO)

A network of medical providers that contracts with an insurer to provide services at pre-negotiated, discounted fees.

Preventive Care

Medical care that focuses on healthy behavior and includes services that help prevent health problems and allow you to manage risk factors. This includes health education, immunizations, early disease detection, health evaluations, and routine care and exams.





This benefit guide is only intended to highlight some of the major benefit provisions of the company plan and should not be relied upon as a complete detailed representation of the plan. Please refer to the plan's summary plan descriptions for further detail. Should this guide differ from the summary plan descriptions, the summary plan descriptions prevail.