



2026

BENEFIT GUIDE

Provided By:



Endress+Hauser USA (Sales Center – Greenwood EEs)
Endress+Hauser Level+Pressure USA
Endress+Hauser Flow USA
Endress+Hauser Temperature+System Products USA
Endress+Hauser InfoServe USA
Endress+Hauser USA Holding



New Hire Enrollment

Your health and wellness is very important to us and we continue to research and provide options that will be beneficial for both you and your families.

To make enrollment easier, you have the ability to enroll over the phone with one of our Enrollment Specialists. Please review the provided benefit information and when ready, use the Phone Enrollment option below. If you prefer, you also have the option to self-enroll online.

If you have any questions, reach out to the Benefits Call Center or the Human Resources Department for details.



Two Ways to Enroll



Phone Enrollment

Go to www.endressbenefits.com to review benefit materials

When ready to enroll, phone the Call Center:

888-598-2040

Monday-Friday 7:00 a.m. – 5:00 p.m. CST

If possible, have a computer or smart phone nearby to view your enrollment live.

Our representative will enroll you directly over the phone.

Online Enrollment

Go to <https://benefits.plansource.com/logon>

Username:

Last four (4) of your SS#, your first initial, and the first six (6) letters in your last name. If you don't have six (6) letters in your last name, use your last name.

Password:

The first time you log in, your password will be your birthdate in the format YYYYMMDD

Users will be prompted to change their password. Enter the new password and click save.

Benefit Highlights

2026 Plan Year Details

The New Hire Enrollment period is your opportunity to enroll in or make changes to your benefits for the current year. Be sure to review each benefit and the plan details provided before choosing which coverage level is right for you.

Tip: During enrollment, you will need to enter all of your dependents and beneficiaries, so it is helpful to gather their information (SS#, Date of Birth, contact information) before beginning.



Medical Plans

- Yellow HSA Plan is a High-Deductible Health Plan (HDHP)
 - IRS changed Family embedded deductible to \$3,400
- Purple PPO Plan offers flat copays for all in-network services, on the UHC network with no deductible to meet.
- Yellow and Purple Plans offer the One Pass Select fitness and wellness program.
- HealthCheck360 Innovative Platform



Dental Plan

- Delta Dental is your dental carrier offering Preventive, Basic and Major Services.
 - Delta Dental PPO



Vision Plan

- EyeMed is your vision carrier utilizing the EyeMed Insight Network.



Supplemental Benefits

- Endress+Hauser does an employer match for the Health Savings Account (HSA) and Dependent Care FSA!
- Life and Long-Term Disability benefits are offered to all benefit eligible employees.
- Accident and Critical Illness benefits is offered by Voya. ID Theft is with Norton's Identity Theft (two choices of coverage). The whole life insurance coverage is offered by Allstate.
- Wishbone Pet Insurance – offers different plan options to fit your budget!



Benefits Enrollment Support

- Benefits Call Center support for easy telephonic enrollment, and support for benefits-related questions or concerns. Benefit Specialists are available to you all year for any questions you may have.



Eligibility and Enrollment Details

2026 PLAN YEAR DETAILS



Eligibility

All full-time employees working at least 30 hours per week are eligible for the benefits program.

- You may insure yourself and eligible family members under the program.
- Your children are eligible for medical, dental, and vision to age 26 (and Voluntary Life Insurance where the maximum dependent age is 26).
- Your children may be eligible to remain on the plan if they are incapable of self-support due to a mental or physical disability that began before the age of 26.



Proof of Dependent Eligibility

As required by our insurance contracts, you may be required to provide proof of eligibility for your dependents. If your dependent becomes ineligible for coverage during the year, you must contact Human Resources within 30 days.



Making Benefit Changes After New Hire Enrollment

You may make a change to your benefits, outside of Open Enrollment, within 30 days of a qualified status change (reach out to Human Resources for questions), such as:

- Marriage
- Divorce
- Legal Separation
- Birth or adoption of a child
- Change in a child's dependent status
- Death of a spouse, child, or other qualified dependent
- Commencement or termination of adoption
- Change in your spouse's benefits or employment status



Medical Overview

Medical and Rx Benefits

- Purple PPO Plan
- Yellow HSA Plan
- Medical HMO Plan (Southern California residents only)

Healthy Measures Wellness Program

- HealthCheck360 innovative myHC360+ wellness platform!
- Healthy Measures Wellness Program

Marathon Health

Hello Heart

- Endress+Hauser USA (Sales Center- Greenwood EEs)
- Endress+Hauser Level+Pressure USA
- Endress+Hauser Flow USA
- Endress+Hauser Temperature+System Products USA
- Endress+Hauser InfoServe USA
- Endress+Hauser USA Holding

2026 Purple PPO Medical Plan Overview

MEDICAL & PRESCRIPTION DRUGS INSURED BY SUREST, USING THE UHC CHOICE PLUS NETWORK

Purple PPO Plan Medical & Rx Employee Bi-Weekly Premiums

	Wellness Participant Non-Tobacco User	Wellness Participant Tobacco User	Non-Wellness Participant
Employee Only	\$29.27	\$60.17	\$91.07
Employee + Spouse	\$115.17	\$146.07	\$176.97
Employee + Child(ren)	\$41.42	\$72.32	\$103.22
Family	\$135.27	\$166.17	\$197.07

PURPLE PPO PLAN

	Network Benefits	Non-Network Benefits
Deductible	Embedded	
Single	\$0	\$0
Family	\$0	\$0
Coinsurance	Not Applicable	Not Applicable
Out-of-Pocket Maximum	Embedded	
Single	\$5,500	\$11,000
Family	\$11,000 (Embedded Individual \$5,500)	\$22,000 (Embedded Individual \$11,000)
Physician Office Visit	\$25 - \$125 Copay	\$375 Copay
Specialist Office Visit	\$25 - \$125 Copay	\$375 Copay
Virtual Visit with a Designated Virtual Provider	\$0 Copayment	Not Covered
Preventive Care	100% Coverage	\$190 Copay
Imaging	\$200 - \$1,400 Copay	Up to \$2,850 Copay
Facility Fee	\$50 - \$3,500 Copay	Up to \$10,000 Copay
Hospital Services	\$400 - \$3,500 Copay	Up to \$10,000 Copay
Outpatient Services	\$25 - \$140 Copay	Up to \$10,000 Copay
Maternity Services	\$1,300 - \$2,350 Copay	\$7,050 Copay
Inpatient Services	\$2,750 Copay	\$8,250 Copay
Emergency Room Services	\$700 Copay for visit, \$350 Copay for transport	
Urgent Care Centers	\$70 Copay	\$210 Copay
Mental Nervous / Substance Abuse		
In-patient	\$2,750 Copay	\$8,250 Copay
Out-patient	\$25 - \$140 Copay	\$190 - \$420 Copayment
Pharmacy		
Retail Generic Drugs**	\$10 Preferred, \$25 other	Not Covered
Retail Preferred Drugs*	\$90 Copay	Not Covered
Retail Non-Preferred Drugs*	\$120 Copay	Not Covered
Mail Order Generic Drugs**	\$25 preferred; \$65 other	Not Covered
Mail Order Preferred Drugs*	\$225 Copay	Not Covered
Mail Order Non-Preferred Drugs*	\$300 Copay	Not Covered
Specialty Drugs	\$330, \$370 or \$400 Copay	Not Covered

*More information about prescription drug coverage is available at Join.Surest.com

**RiteAid, CVS & Walgreens are non-preferred Pharmacies. Examples of preferred pharmacies are Kroger, Walmart, Meijer, and other retailers.

Medical Administration by Surest using the UHC Choice Plus Network: UHC has negotiated discounts with a large national network of doctors and hospitals named United Healthcare Choice Plus. You will enjoy the highest level of benefits and the greatest value if you choose to receive care through the Choice Plus Network of providers. While it is not required that you utilize the network, the services you obtain outside of the network will be billed at a greater cost to you.

Surest: The Purple PPO Plan

EASY TO USE. UPFRONT PRICES. DESIGNED TO HELP YOU SAVE.

Easily search & shop for options.

Before making an appointment, check and compare costs – then choose the option that works best for your budget and lifestyle. Receive one bill for a single trip to the doctor or hospital. View prices and the network:

britehr.app/EH2026
join.surest.com/eh
 Access Code: eh2026

Questions?? 1-866-683-6440



Annual physical - \$0
(annual preventive visit)



Basic diagnostic lab tests,
x-rays, & ultrasounds - \$0



Emergency room visit - \$700



Maternity labor & delivery
\$1,300 to \$2,350



Zero deductible - \$0



Urgent Care
In-office visit ... \$70



Office visit
In-office visit ... \$25 to \$125
Virtual visit ... \$0



Out-of-pocket limit
Employee ... \$5,500
Family ... \$11,000



Physical therapy—20 visits
\$15 to \$115

The \$ is the price tag (copay) you will pay out of pocket for health services, as defined by the Surest plan, until you hit your out-of-pocket limit.



Virtual visits

Access a virtual network of licensed physicians and behavioral health specialists through Doctor On-demand. Available 24/7 or by appointment, get help with colds, allergies, UTIs, prescription refills, anxiety, stress and more.

Receive care - for less - without leaving home with K Health. 24/7 access to doctors for colds and coughs, asthma, allergies, rashes, sinus infections, UTIs, chronic heartburn, migraines and more.



Second-opinion services

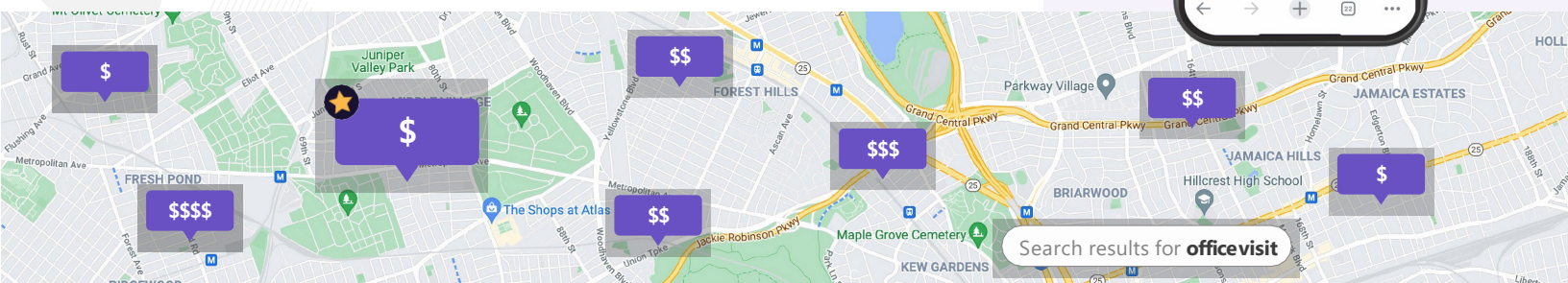
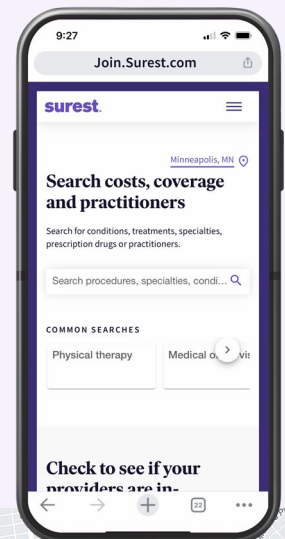
2nd.MD provides access to top medical experts for second opinions. Not sure you need that surgery or have questions about a treatment? 2nd.MD can help.

surest™



Quality vs. quantity

It may be helpful to know how the Surest plan assigns prices to health services. Prices (copays) are low for what we consider higher-value options, based on quality, efficiency, and overall effectiveness of care. **When you check prices before seeking or scheduling care, you have the power to save money.**





Virta Health

From **surest**™

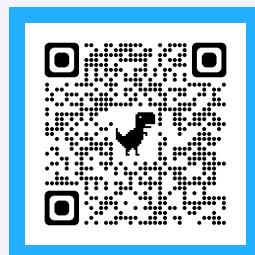
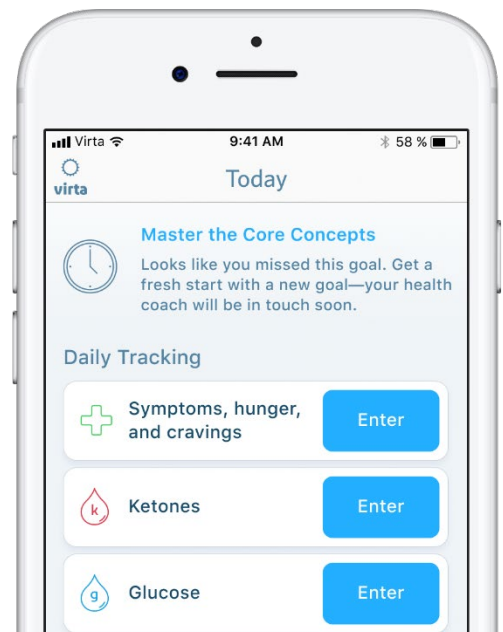
Don't Settle for a Life with Diabetes

Virta Health is a virtual clinic that may help you lower blood sugar, lose weight, and rely less on pricey drugs. Members eat their way to better health thanks to a plan made just for them and support from medical providers, coaches, and digital health tools.

Within 10 weeks, 87% of Virta members in a clinical study stopped or reduced insulin.

Behind Virta's Programs

- Backed by research
- Tips to make meals more healthy
- Personalized provider care and coaching
- Daily support via mobile/desktop app
- You may be covered for \$0 care



Register today at:
virtahealth.com/join

2026 Yellow HSA Plan Benefit Overview

Medical & Prescription Drugs Insured by UMR, using the Choice Plus Network

Yellow HSA Plan Medical & Rx Employee Bi-Weekly Premiums			
	Wellness Participant Non-Tobacco User	Wellness Participant Tobacco User	Non-Wellness Participant
Employee Only	\$29.27	\$60.17	\$91.07
Employee + Spouse	\$115.17	\$146.07	\$176.97
Employee + Child(ren)	\$41.42	\$72.32	\$103.22
Family	\$135.27	\$166.17	\$197.07

YELLOW HSA PLAN		
	Network Benefits	Non-Network Benefits
Deductible	Embedded	
Single	\$3,000	\$4,000
Family	\$6,000 (Embedded Individual \$3,400)	\$8,000 (Embedded Individual \$4,000)
Coinsurance, Premium Care Providers	20% after Deductible	40% after Deductible
Coinsurance, Non-Premium Care Providers	30% after Deductible	40% after Deductible
Out-of-Pocket Maximum	Embedded	
Single	\$4,000	\$8,000
Family	\$8,000 (Embedded Individual \$4,000)	\$16,000 (Embedded Individual \$8,000)
Physician Office Visit	20% or 30% after Deductible	40% after Deductible
Specialist Office Visit	20% or 30% after Deductible	40% after Deductible
Teladoc Health	\$0	Not Covered
Preventive Care	100% Coverage	40% after Deductible
Imaging	20% or 30% after Deductible	40% after Deductible
Facility Fee	20% or 30% after Deductible	40% after Deductible
Hospital, Maternity, Out-patient, & In-patient Services	20% or 30% after Deductible	40% after Deductible
Emergency Room Services	30% after Deductible	
Urgent Care Centers	30% after Deductible	40% after Deductible
Mental Nervous / Substance Abuse	20% or 30% after Deductible	
In-patient & Out-patient	20% or 30% after Deductible	40% after Deductible
Preventive Rx Drugs		
Retail Generic Drugs	20% after Deductible	40% after Deductible
Retail Preferred Drugs	20% after Deductible	40% after Deductible
Non-Preferred Drugs	20% after Deductible	40% after Deductible
Mail Order Generic Drugs	20% after Deductible	Not Covered
Mail Order Preferred Drugs	20% after Deductible	Not Covered
Mail Order Non-Preferred Drugs	20% after Deductible	Not Covered

Medical Administration by UMR: UMR has negotiated discounts with a large national network of doctors and hospitals named United Healthcare Choice Plus. You will enjoy the highest level of benefits and the greatest value if you choose to receive care through the Choice Plus Network of providers. While it is not required that you utilize the network, the services you obtain outside of the network will be billed at a greater cost to you. You may log on to www.umar.com for a listing of participating providers.

Provider Benefits

From UMR Yellow HSA Plan



UMR Mobile Services Available 24/7





- 24/7 mobile access to plan information, paid claims, provider, and other UMR helpful tools including: plan cost estimator, health and wellness resources, and tools on navigating the app
- Questions? Call the Customer Support Center using the phone number on your ID card.

NurseLineSM

A call to the UMR's NurseLine service will connect you to a team of registered nurses who can answer your questions and provide advice. Calling the NurseLine is easy and a free service if enrolled in the medical plan. Simply dial toll-free 877-950-5083, available 24/7. The number can also be found on the back of your member ID card.

Premium Provider Designations

The UnitedHealth Premium program, offered through UMR evaluates various specialties using evidence-based medicine and national standardized measures to help you locate quality and cost-effective providers. Understand the following symbols on the UMR website to better understand.

- | | | |
|---|---|---|
|  | Premium Care Physician | Physician meets Premium Program criteria for quality and cost-efficient care |
|  | Quality Care Physician | Physician meets program criteria for providing quality care |
|  | Not Evaluated for Premium Care | Program criteria does not evaluate physicians in this specialty or the physician does not have enough date to be evaluated. |
|  | Does Not Meet Premium Quality Criteria | Physician does not meet program criteria for providing quality care. |

Mail Order Benefits

Navitus Mail Order Pharmacy provides an Online Ordering service through Costco. If you choose to utilize Online Ordering, it is helpful to be familiar with basic online purchasing processes and to have frequent access to your email account. Most communication between you and the Mail Order Pharmacy will be through email. When using this service, all orders for new prescriptions must be initiated online at pharmacy.costco.com.

Mail Order Pharmacy
Customer Service
1-800-607-6861

Monday through Friday: 8 a.m. to 10 p.m. (EST)
Saturday: 12:30 p.m. to 5 p.m. (EST)

Visit online at: pharmacy.costco.com

Navitus - Phone (855) 847-1025 **Website** - memberportal.navitus.com



UMR CARE Yellow HSA Plan

CARE app powered
by Vivify Health

The CARE app supports
individuals at all risk levels:

- **Engage (low risk):** Maintaining health with wellness and health tips
- **Guide (at risk and high risk):** Enhancing CARE programs with additional communication channels and providing extra information for the nurse to better support you
- **Monitor (high risk):** Providing clinical, hands-on, heightened level of oversight with Bluetooth device integration and virtual visits

Bluetooth devices available*:

- Blood pressure device
- Scale
- Glucometer
- Pulse oximeter

Remote patient monitoring for all members

Experience. Empathy. Empowerment.

With the CARE app, powered by Vivify Health, UMR's CARE nurses, coaches and other clinical resources have digital connectivity with you—no matter your health status – and can cultivate meaningful interactions that encourage you to self-manage and self-advocate.

You receive support and health information when you need it, the way you want it – all through your mobile device.

ALL ACCESS from ANYWHERE

Key Benefits:

- Total population health
- Flexible omni-channel communication
- Deep and broad engagement
- Remote patient monitoring

Robust Features:

- Advanced risk stratification, including social determinants of health
- Bi-directional secure messaging
- Push messaging to target audiences
- Remote patient monitoring, including Bluetooth devices
- Individualized CAREpaths based on the condition
- Self-management for low-to moderate-risk individuals
- Multi-party virtual visits
- Educational content



UMR Resources Yellow HSA Plan



Message a dedicated therapist anytime, anywhere.

- Find a therapist with an online matching tool
- Start therapy within hours of choosing your therapist
- Message your therapist whenever – no appointments necessary
- Get messages back throughout the day, five days a week
- Choose real-time face-to-face video visits by appointment, when needed
- You can also access Talkspace Psychiatry to schedule a live video session with a psychiatrist trained in mental health care and prescription management for a tailored treatment plan.



Talkspace is convenient, safe, and secure.

Simply register (first visit online) and choose a provider and message anywhere, anytime at talkspace.com/connect. After you register, download the Talkspace app to your mobile phone.

Talkspace is your space to use in your time. It's covered under your plan's behavioral health benefits.

Say, "Hello" to the Designated Diagnostic Providers Benefit




More value for you, more savings for employees

Designated Diagnostic Providers (DDPs) are laboratory and imaging services providers that meet certain quality and efficiency requirements. When you choose a DDP for your outpatient lab or imaging services, you'll receive the highest level of benefit from our plan. This means more value for lab or imaging services – and more value for you.




Look for the green check

Participating providers will be designated in the provider search on [UMR.com](https://www.UMR.com)

Lab providers

	ABC Laboratory Laboratory 1234 Main Street Any City, ST 11111 (123) 456-7890 PHONE 5.9 Miles Away Get Directions 	 Designated Diagnostic Provider
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Imaging centers

	XYZ Imaging Center X-ray and Radiology Facility 1010 Any Highway Big City, ST 12345 (123) 456-7890 PHONE 4.1 Miles Away Get Directions 	 Designated Diagnostic Provider
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UMR Shop for Care Yellow HSA Plan



The health cost estimator allows you to research treatment options and learn about the recommended care and estimated costs associated with your selected treatment option. You can even access quality and efficiency measurements for participating providers.

Compare Quality & Cost Before You Go

The next time you're in the market for a new doctor or are wondering how much you'll pay for a possible medical procedure, visit umr.com first. Your online services make it easy to look up UnitedHealthcare network providers and health care facilities and find cost estimates for different services – all in one place.



Stay in-network

With umr.com, you have anytime access to a searchable directory of UnitedHealthcare network providers in your area. Choosing a doctor or facility in the network ensures your benefits are paid at the highest level, so you can expect to pay less out of your own pocket. And when you go to a network provider for preventive services, there's typically no cost to you.



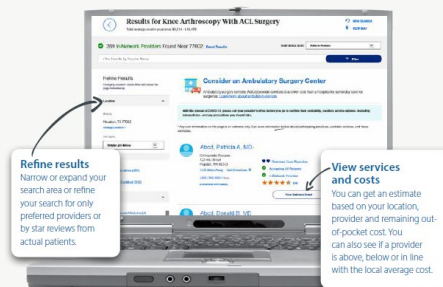
Check for quality

The two blue hearts next to a doctor's name tells you they are a Premium Care Provider who has been reviewed by UnitedHealthcare and meets quality standards for delivering cost-effective care. You may also see star ratings for customer satisfaction based on reviews from previous patients.



Understand the costs

Different providers may charge different amounts for the services they offer. Your search results will give you a range of the average costs for preventive care or medical procedures in your area. And the individual provider listings show whose costs are below, above, or meet the local average. If a procedure typically includes multiple steps of treatment, you can review the total cost and your estimated out-of-pocket cost for each step. Your estimated out-of-pocket costs are personalized to you, based on your own benefit plan's deductible, annual out-of-pocket max, copay, coinsurance and how much you've paid toward your deductible.



**START SHOPPING
TODAY**

Login to umr.com
and select **Find a provider** or log in
and look for the **health cost
estimator shopping
cart icon** to get
started.



24/7 Doctor Visits

Via phone or mobile app

Teladoc gives you round-the-clock access to U.S. board certified doctors, from home or on the go. Call or connect online or using the Teladoc mobile app for affordable medical care, when you need it.

General Medical –

Talk to a U.S.-licensed doctor for non-emergency conditions 24/7 from anywhere you are.

Mental Health Care -

Talk to a therapist or psychiatrist of your choice 7 days a week from wherever you are.

Dermatology -

Upload images of a skin issue online or on the app and get a custom treatment plan within 24 hours.



Talk to a doctor anytime, anywhere you happen to be



Prompt treatment, median call back, in 10 minutes



Receive quality care via phone, video or mobile app

Get the care you need.

Teladoc doctors can treat many medical conditions, including: cold & flu symptoms, allergies, pink eye, respiratory infections, sinus problems, skin problems, and more.

With your consent, Teladoc is happy to provide information about your Teladoc visit to your primary care physician.

Teladoc[™]
HEALTH

Visit [Teladoc.com](https://www.teladoc.com)
or call
1-800-Teladoc

UMR & Surest One Pass Select



One Pass Select™ can help you reach your fitness goals while finding new passions along the way. Find a routine that's right for you whether you work out at home or at the gym. Choose a membership tier that fits your lifestyle and provides everything you need for whole body health in one easy, affordable plan. You and your eligible family members or friends can get started with One Pass Select today.

Find your fit with One Pass Select:



At the gym

Choose from our large nationwide network of gym brands and local fitness studios. Use any gym in the network and create a routine just for you.



At home

Work out at home with live or on-demand online fitness classes. Try the workout builder to get routines created just for you, no matter what your fitness level and interests are.



In the kitchen

Get groceries and household essentials delivered to your home. One Pass Select makes it easy to plan for everything you need to enjoy delicious, nutritious meals.

Category	Digital	Classic	Standard	Premium	Elite
Monthly fee*	\$10	\$34	\$69	\$109	\$249
Gym network size	(Online fitness classes)	12,000+ gym locations	14,000+ gym and premium locations	16,000+ gym and premium locations	20,000+ gym and premium locations
Grocery delivery	✗	✓	✓	✓	✓

*A one-time enrollment fee will apply.



Learn more and enroll today at [OnePassSelect.com](https://www.OnePassSelect.com)

One Pass Select is a voluntary program featuring a subscription-based nationwide gym network, digital fitness and grocery delivery service. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. Individuals should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for them. Purchasing discounted gym and fitness studio memberships, digital fitness or grocery delivery services may have tax implications. Employers and individuals should consult an appropriate tax professional to determine if they have any tax obligations with respect to the purchase of these discounted memberships or services under this program, as applicable.

Navitus Pharmacy Member Guide



Customer Service

The Navitus team is here to help you 24 hours a day, 7 days per week. Our knowledgeable representatives can assist you with benefit overviews, prior authorizations, pricing on medications, copay assistance and much more.

UMR Medical Plan? Use Costco Mail Order Pharmacy

For maintenance medications, you can use our preferred mail order pharmacy, Costco Home Delivery. Costco offers convenient delivery options and makes refilling your medications easy with the ability to refill by phone, online, and text. To get started, go to rx.costco.com and click on "Get Started" to create your account. You do not have to be a Costco member to take advantage of savings offered by this service.



1.800.607.6861



[Rx.Costco.com](https://rx.costco.com)

Surest Medical Plan? Use Kroger Mail Order Pharmacy

Postal Prescription Services (PPSRX) is a full-service, mail-order pharmacy committed to providing affordable prescription delivery and exceptional service. Access the online prescription management tool to order refills for yourself or your family, review medication information, create an expense report and more. Go to ppsrx.com to get started.



1.800.552.6694



[PPSRX.com](https://ppsrx.com)

Lumicera Specialty Pharmacy

If you are taking or using a specialty medication, Lumicera Health Services will be your specialty pharmacy for most medications. An Navitus representative can reach out to you to assist with this transition. If you have questions, please call Navitus or Lumicera.

Hours of Operation:

Monday - Thursday 8:00 a.m. - 7:00 p.m. CST

Friday 8:00 a.m. - 6:00 p.m. CST



1.855.847.3553



www.lumicera.com

2026 Medical HMO Benefit Overview

MEDICAL & PRESCRIPTION DRUGS INSURED BY KAISER PERMANENTE
FOR SOUTHERN CALIFORNIA RESIDENTS ONLY

Medical HMO & Prescription Drug Plan Employee Bi-Weekly Premiums

Employee Only	\$93.51	You must live in a Kaiser Permanente Coverage Area to enroll in this plan
Employee + Spouse	\$185.31	
Employee + Child(ren)	\$160.20	
Family	\$255.97	

Medical HMO Plan

	Network Benefits	Non-Network Benefits
Deductible	Embedded	
Single	\$0	Not Covered
Family	\$0	Not Covered
Coinsurance	Not Applicable	Not Covered
Out-of-Pocket Maximum	Embedded	
Single	\$1,500	Not Covered
Family	\$3,000 (Embedded Individual \$1,500)	Not Covered
Physician Office Visit	\$25 Copayment	Not Covered
Specialist Office Visit	\$25 Copayment	Not Covered
Preventive Care	100% Coverage	Not Covered
Telehealth Visits	100% Coverage	Not Covered
Hospital Services	\$500 Copayment	Not Covered
Out-Patient Services	\$100 Copayment	Not Covered
Allergy Injections / Immunizations	\$5 Copayment	Not Covered
Emergency Room Services	\$200 Copayment	
Urgent Care Centers	\$25 Copayment	Not Covered
Ambulance Services	\$100 Copayment	Not Covered
Chiropractic Services	\$15 Copayment (up to 30 visits per year)	Not Covered
Retail Generic Drugs	\$15	Not Covered
Retail Preferred Drugs	\$35	Not Covered
Non-Preferred Drugs	30% (maximum \$250)	Not Covered
Mail Order Generic Drugs	\$30	Not Covered
Mail Order Preferred Drugs	\$70	Not Covered
Mail Order Non-Preferred Drugs	Not Covered	Not Covered

Your HMO Network is Kaiser Permanente. You **must** live in a Kaiser Permanente coverage area to enroll in this plan. Limited to Southern California residents. For access to network providers and a listing of covered medications, please log onto:

<https://healthy.kaiserpermanente.org>.

Manage Your Health 24/7

From Kaiser Permanente HMO Plan

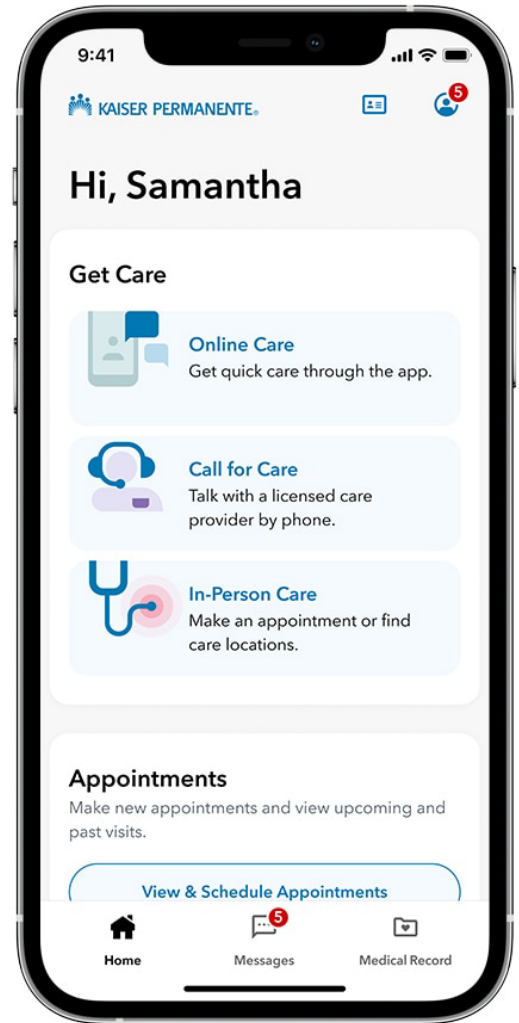


Stay Connected Wherever You Go

With our Kaiser Permanente app, keeping up with your care is quick, easy, and secure.

- Schedule or cancel routine appointments
- Email your doctor's office with non-urgent questions
- Refill most prescriptions
- Check most lab results
- Access a digital version of your member ID card
- View and pay bills
- Manage care for your family

También disponible en español



Create Your Account

Start using these convenient features by downloading our app for your mobile device. To register, you'll need your health/medical record number, which you can find on your ID card.



**KAISER
PERMANENTE®**

Pharmacy Cost Comparison Tools

Did you know prescription drug costs vary from pharmacy to pharmacy? Your insurance carrier provides discounts for prescriptions when you use your ID card at the time of the fill. However, vendors exist that may provide greater or additional discounts. Review the tools below to shop and compare the next time you need to fill a medication.



GoodRx

GoodRx

www.goodrx.com

GoodRx has both a website and a mobile app that can be used to compare prices. Go to the website and type in your drug name. GoodRx will display the cost available at multiple pharmacies. Print the coupon and present to your pharmacist. You do not need to register, and you don't need an ID card.



NAVITUS
PHARMACY BENEFITS REINVENTED™

Yellow HSA and Purple PPO Plan Support through Navitus

memberportal.navitus.com

The Navitus website can help you better manage your pharmacy benefits. You can find in-network pharmacies, price out a medication, view your current approved medications, evaluate mail order options, and review the drug list for low cost, high efficacy solutions.

Rx Tools

When to Use Coupons

In this video, our in-house Pharmacist walks you through why medications are less expensive through these services. He also compares if it might be better to save using coupons, or if you'll save more in the long-run chipping away at your deductible to meet your out-of-pocket max earlier in the year.

Watch online at lhdbenefits.com/rx-education/



Mark Cuban's CostPlus Drug Company

costplusdrugs.com

The goal of the Mark Cuban Cost Plus Drug Company is to dramatically reduce the cost of drugs like Albendazole, but we also think that it is just as important to introduce transparency to the pricing of drugs, so patients know they are getting a fair price. Watch the video to the left to understand when it's right for you to use this service



MARK CUBAN
CostPlus
DRUG COMPANY

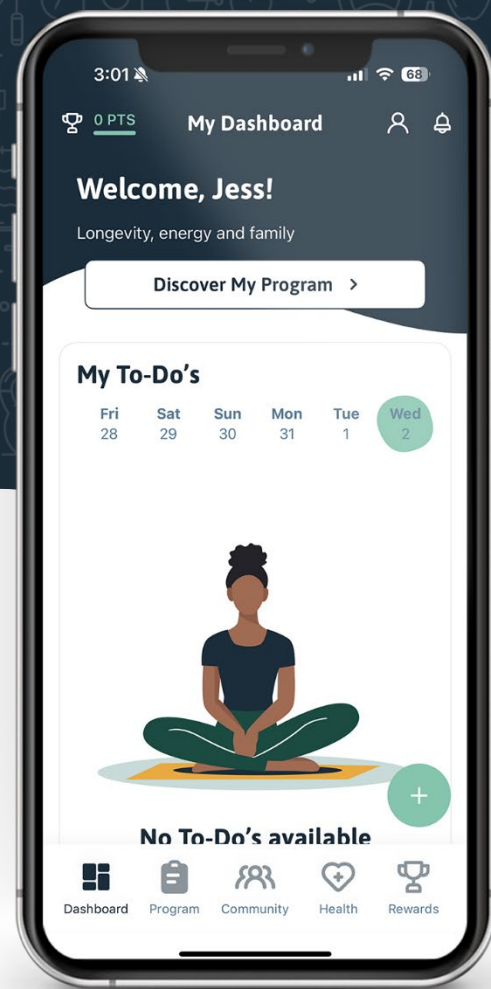
Endress+Hauser 2026 Wellness Program

Everything You Love, Now Even Better.

Endress+Hauser has partnered with HealthCheck360 to expand your Healthy Measures Wellness Program. **Discover the ultimate benefits with the myHC360+ mobile app.** Gain unparalleled access, comprehensive support, and advanced health tracking. In addition to gaining powerful and personalized information about your health and well-being, **a bi-weekly premium discount up to \$61.80 will be offered for those fully participating by September 30th, 2026.** Both the health plan employee and health plan spouse must complete all the required components to be considered eligible for the incentive. This applies to all divisions except for Optical Analysis where the spouse is not required to complete any components.

New Hires:

- Employees hired between **01/01/2026 –09/30/2026** will have 90 days from their hire date to complete both their biometric screening and survey to qualify for the current year's incentive. Completion within this timeframe also counts towards eligibility for the 2027 incentive.

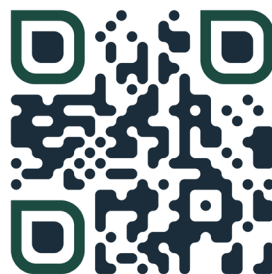


Questions?

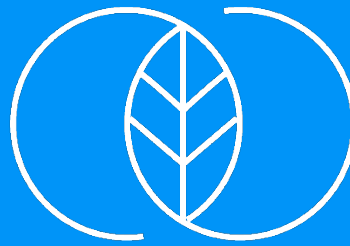
Contact our support team!

Phone: 866-511-0360

Email: Support@HealthCheck360.com



Company Code: ENDRE
Unique ID: last 4 SSN



HealthyMeasures

WELLNESS PROGRAM

Participate & Receive Reduced Medical Premiums

Employees choosing to participate in the Healthy Measures Wellness Program will enjoy medical premium discounts. Participation is voluntary. The employee and covered spouse are **both** required to complete the annual program requirements to receive the medical premium discount in 2027.

Program Requirements: To be eligible for the 2027 premium discount, employees and enrolled spouses must complete the following between **1/1/2026 – 9/30/2026**.

1. Biometric Screening

- Participants must complete a biometric screening. This can be completed at the Greenwood Marathon Health Clinic by scheduling an annual physical with biometric labs. Appointments can be scheduled through the [Marathon Health Portal](#) or by calling 317-530-1811.
- If you choose to visit your own medical provider, please bring the HealthCheck360 provider form for them to complete. After your appointment, upload the completed form to the [HealthCheck360](#) wellness platform as proof of completion.

2. Health Risk Assessment

- Complete Health Risk Assessment (HRA) through [HealthCheck360](#) wellness platform.

Failure to complete both annual biometric screening and HealthCheck360 HRA by 9/30/2026 will result in loss of premium discount for 2027.

NEW EMPLOYEES

New employees and spouses (if applicable) enrolling in an Endress+Hauser medical plan **must** complete a biometric screening at the Greenwood Marathon Health Clinic or with their own medical provider. If using your own provider, please bring the HealthCheck360 provider form for them to complete. After your appointment, upload the completed form on the [HealthCheck360](#) wellness platform and complete the HealthCheck360 HRA. This **must** be done within 90 days of hire date in order to continue receiving the premium discount for the remainder of the year.

QUALIFYING LIFE EVENT ENROLLMENT

If you waived participation in 2025 and experience a qualifying life event in 2026, you and your spouse (if applicable) must complete a biometric screening at the Greenwood Marathon Health Clinic or your own medical provider. If using your own provider, please bring the HealthCheck360 provider form for them to complete. After your appointment, upload the form on the [HealthCheck360](#) wellness platform and complete the HealthCheck360 HRA. This **must** be done within 90 days of the Qualifying Life Event in order to continue receiving the premium discount for the remainder of the year.

REASONABLE ALTERNATIVE

If you or your spouse (if applicable) are medically unable to meet the Healthy Measures program requirements, notify the Greenwood Marathon Health Clinic at (317) 530-1811 for a medical exemption.



Healthy Measures Wellness Clinic

Extensive service offerings to spark your health journey

Endress+Hauser has partnered with Marathon Health, one of the leaders in worksite healthcare, to provide you and your family with high-quality healthcare.

All employees enrolled in the Purple PPO Plan, or the Yellow HSA plans and their covered dependents (2 years old+) are eligible. All services are FREE. The care you receive by Marathon Health is confidential and protected by state and federal law.

All Endress+Hauser employees are eligible to receive the following benefits in the clinic:

- Treatment for work-related injuries
- Annual flu vaccinations
- COVID-19 testing

Employees and dependents (age 2+) covered on the Endress+Hauser Purple or Yellow medical plans are eligible to receive the following additional free services:

- Primary care including physicals/biometrics
- Minor injuries care
- Treatment for common illnesses and infections
- Disease Management: Diabetes, High Blood Pressure, Asthma, High Cholesterol, COPD
- Adult Immunizations
- Free Rx: Limited to commonly used prescriptions and for conditions treated in the Clinic
- Clinical lab orders from both the clinic and outside providers



Schedule Appointments

in person or by phone:
(317) 530-1811

my.marathon-health.com/login

Clinic Hours (EST)

Mondays Wednesdays & Fridays:

7:00 a.m. – 11 a.m.
11:30 a.m. – 1:30 p.m.

Tuesdays & Thursdays:

10:30 a.m. – 12:30 p.m.
1:00 p.m. – 7:00 p.m.



Health Center Access for Employees and their covered family members (2 years old+) enrolled in the Purple PPO or Yellow HSA medical plan.

You have access to your onsite Healthy Measures Wellness Clinic, plus many nearby Network health centers located in Indianapolis and Charlotte areas, dependent upon your home state. The Networks are comprised of many health centers with hours from 7am – 7pm on weekdays and Saturdays from 8am – 12pm. Locations are strategically placed around each city to provide access close to work, home, and play; all providing you the same level of high-quality care that your onsite clinic has for many years.

Health Measures Onsite Clinic:

2355 Endress Pl., Greenwood IN, 46143
Mon, Wed, Fri: 7am–11am, 11:30am-1:30pm
Tues, Thurs: 10:30am–12:30pm, 1pm–7pm

Primary & Preventive Care

- Health Screenings
- Annual Physicals & Exams (ages 12+)
- Blood Pressure
- Body Mass Index
- Cholesterol
- Glucose (Blood Sugar)
- Camp, School, and Sports Physicals (ages 5+)

Health Coaching

- Chronic Condition Management
- Nutrition
- Physical Activity
- Tobacco Cessation
- Stress Management
- Weight Loss/Gain

Chronic Condition Care

- Arthritis
- Asthma
- COPD
- Depression
- Diabetes
- Heart Health
- Low Back Pain
- Sleep Apnea
- Education Offerings

Acute (Sick) Care

- Bronchitis
- Common cold
- Constipation
- Cough
- Diarrhea
- Eye infections
- Headache
- Joint pain
- Nausea and vomiting
- Nosebleed
- Sinus infections
- Skin infections
- Strep Throat
- All Acute Care provided beginning ages 2+

Labs

Marathon Health offers lab tests and blood work, including but not limited to hemoglobin, A1C, lipid panel, glucose, rapid strep, mono, urinalysis, oxygen saturation, and pregnancy. Certain tests will be sent to an outside lab for processing.

Behavioral Health

- Anxiety
- Depression
- Eating disorders
- Grief
- PTSD
- Relationship issues
- Self-image
- Stress
- Substance Abuse
- Available through the Marathon Health Network locations or via the Marathon Health Anywhere virtual care program, not available at the Healthy Measures onsite clinic (ages 12+)



Visiting Marathon Health is easy!

1. Visit my.marathon-health.com and click **New? Register Now?**
2. Fill in the required form fields, such as contact information, SSN, employer's name, and member type.
3. Click **Finish** – You're ready to start scheduling appointments!

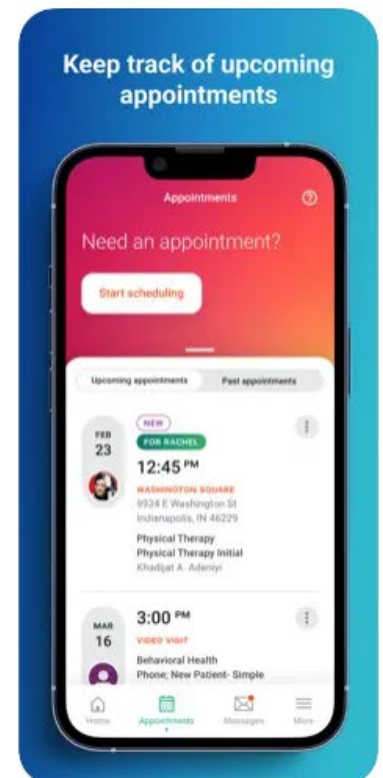
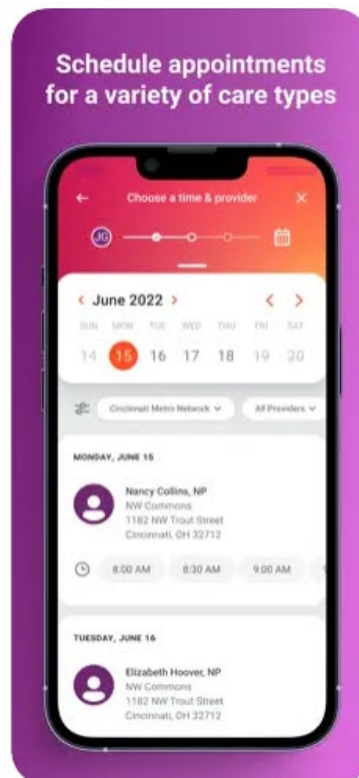
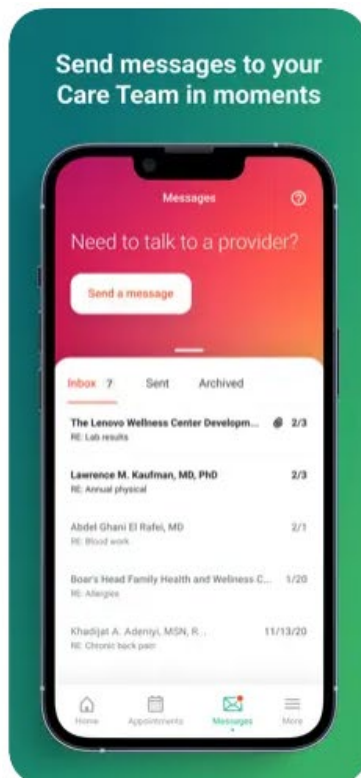
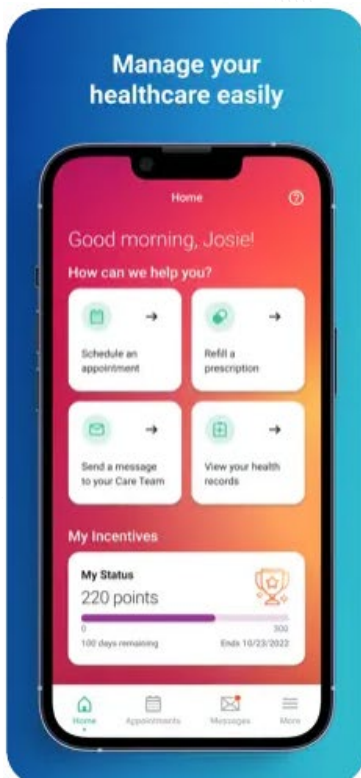
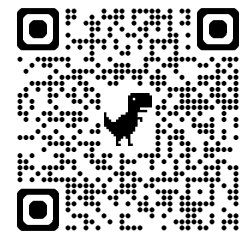
All employees enrolled in the Purple PPO, or the Yellow HSA medical plans and their covered dependents (2 years old+) are eligible. All services are FREE.

Schedule Appointments:

1. Visit my.marathon-health.com and click **Schedule Appointment.**
2. Select appointment type.
3. Select your visit type & provide appointment details.
4. Select the day & time of your appointment
5. Review your contact information & appointment details and click **Confirm Appointment.**

Register or Schedule an Appointment

Scan the QR code to visit the Marathon Health Portal. Download the app for even more convenient access to your Marathon Health benefit.



Hello Heart

Looking for an easy way to make sure your heart is healthy?

Sign up for Hello Heart for free in seconds. Contact your Marathon Health, at my.marathon-health.com/login to see if you qualify.

High blood pressure usually doesn't have symptoms. In fact, it's known as a silent killer, since it can lead to heart attack or stroke. The only way to know if you have high blood pressure is to check it. Plus, regularly tracking your blood pressure can help you protect your heart health and even lower your risk of heart attack. It can be preventable if you take action.

Hello Heart is your free Endres+Hauser health benefit that helps you track and manage your blood pressure anywhere, anytime. By activating your account, you'll receive a free blood pressure monitor that connects to an app on your smartphone.



Get your free Hello Heart blood pressure monitor!

Contact Marathon Health at my.marathon-health.com/login to activate your Hello Heart account today!



Employees and spouses enrolled in the Endres+Hauser medical plan with high blood pressure (readings of 130/90 or above, or those taking blood pressure medication) are eligible to enroll. Each eligible family member should enroll separately.

Hello Heart



Blood pressure, weight and activity tracking technology



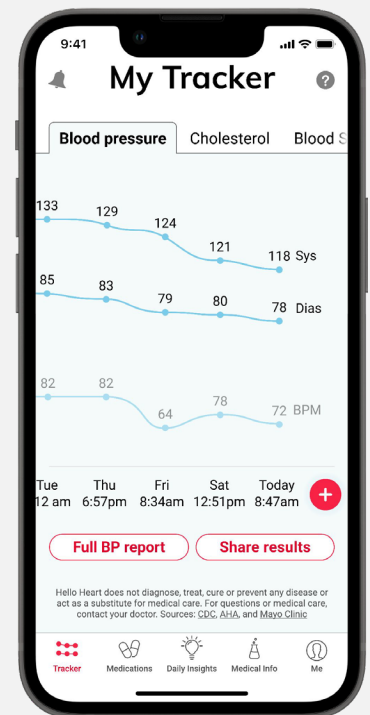
Medication tracking and reminders



Access easy-to-apply, **personalized tips** for improving your health!



Auto-imported **lab results** from clinics, with personalized explanations



support@helloheart.com

(800) 767-3471

Monday - Friday, 8am-8pm EST

Hello Heart does not diagnose, treat, cure, or prevent any disease or act as a substitute for medical care. For questions or medical care, contact your doctor. Sources: CDC, AHA, and Mayo Clinic.



Additional Benefits

- Health Savings Account (HSA)
- Flexible Spending Accounts (FSA)
- Dental
- Vision
- Life and Disability
- Employee Assistance Program (EAP)
- Paid Parental Leave
- Paid Caregiver Leave
- milkstork®
- Voluntary Insurance
 - Accident
 - Critical Illness
 - Group Whole Life
 - Identity Protection
 - Wishbone Pet Insurance

Bi-weekly Premiums

Additional Resources

Carrier Contact Information

Benefits Enrollment Information

Endress+Hauser USA (Sales Center – Greenwood EEs)

Endress+Hauser Level+Pressure USA

Endress+Hauser Flow USA

Endress+Hauser Temperature+System Products USA

Endress+Hauser InfoServe USA

Endress+Hauser USA Holding

2026 Health Savings Account



A Health Savings Account (HSA) is a consumer-oriented, tax-advantaged savings account. HSA earnings grow tax-deferred and qualified withdrawals are tax-free without “use it or lose it”. Money not used in your Health Savings Account can be rolled over to the following year.

HSA funds can be used for all qualified medical expenses, including medical services, as well as eyeglasses, dental procedures, prescription drug coverage and over-the-counter medications provided you submit a prescription from your provider. See *IRS Publication 969* for more information and a listing of *Qualified Eligible Expenses* at www.irs.gov.



Qualifying For An HSA:

Optum Bank HSAs are FDIC insured bank accounts that you can use to pay qualified health expenses for you and your covered dependents, tax-free. To qualify for an HSA, you must meet the following requirements, as defined by the IRS:

- You must be covered under a Consumer Driven Health Plan (CDHP).
- You have no other health coverage except what is permitted by the IRS.
- You are not enrolled in Medicare.
- You cannot be claimed as a dependent on someone else's tax return.

Enrolling For The First Time?:

After enrolling in an Endress+Hauser HSA Plan, a Health Savings Account will automatically be opened on your behalf. You do not need to manually open a Health Savings Account.

After You Open Your Optum HSA, Be On The Lookout:

You will receive a Welcome Kit electronically or by mail. For safety and security purposes, you will receive your Health Savings Account Debit MasterCard® and personal identification number (PIN) in the mail in two separate, unmarked envelopes.

For questions about your Health Savings Account Debit Mastercard®, please contact customer care at 1-866-234-8913, 8am to 8pm EST.



Endress+Hauser Annual HSA Contributions

Participants in an Endress+Hauser HSA Plan can contribute pre-tax dollars through payroll deductions to an HSA. These funds can be used to pay for qualified expenses. Endress+Hauser will also contribute to your HSA when you contribute yourself, through an employer match, if you are enrolled in an Endress+Hauser HSA Plan.

Health Savings Account by: Optum Bank Customer Service: 866-234-8913

Employer Contribution	HSA Employer Match 100% up to:
For Endress+Hauser HSA Plan Participants	\$1,000



IRS 2026 Maximum Contributions

	IRS Max	IRS Post Age 55 "Catch-up"
Employee	\$4,400	\$1,000
Family	\$8,750	\$1,000

** The IRS maximum contribution is per household and includes Employer and Employee contributions.*



Flexible Spending Account (FSA)

Each year you can set aside money on a pre-tax basis to help you offset unreimbursed healthcare and childcare expenses. Elected amounts are fixed for the year and do not roll over from one year to the next.



You have three plan options under a section 125 for 2026:

1

Healthcare Flexible Spending Account: Allows employees, **who are not enrolled in an HSA-based medical plan**, to set aside pre-tax contributions for qualified health, dental, vision, and eligible over-the-counter expenses:

Annual Maximum Benefit	\$3,400
FSA Debit Card	Included
Rollover*	Up to \$680

2

Limited Purpose Flexible Spending Account: Allows employees, **who are enrolled in an HSA-based medical plan**, to set aside pre-tax contributions for qualified dental and vision eligible expenses:

Annual Maximum Benefit	\$3,400
FSA Debit Card	Included
Rollover*	Up to \$680

Rollover dollars are unused funds that carry over from the previous year. They are available in April of the current calendar and **must be used by December 31st of the current calendar year.*

3

Dependent Care Expense Account: Allows employees to set aside pre-tax contributions for **reimbursement of daycare expenses for children under age 13 and/or dependents incapable of self-care.**

Annual Maximum Benefit – including the Endress+Hauser Employer contribution	\$7,500 (\$3,750 if married filing separate tax returns)
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Dependent Care FSA	
Employer Contribution	DCFSA Employer Match 100% up to:
For Endress+Hauser DCFSA Plan Participants	\$2,000

FSA Reminders:

- Health Care FSA and Limited Purpose FSA dollars remaining in your account (over \$680) in the account at the end of the plan year are forfeited.
- Dependent Care FSA dollars remaining in your account at the end of the plan year are forfeited.
- Claims must be submitted to the plan in a timely manner or FSA dollars will be forfeited.
- If you separate from the company, you have 45 days from separation to file for reimbursement.

HRPro is your flex plan administrator. With all FSA account types, you'll receive access to our secure, easy-to-use website at HRPro.com the website is available 24/7/365. Here you can track your account balance, view your claim history, and submit requests for reimbursements. Manage your FSA "on the go" with our easy-to-use mobile app.

Contact HRPro.com at (800)–989-8776

Dental Benefit Overview

Dentists in your plan network.

Delta Dental offers three levels of benefit coverage: PPO Dentist, Premier Dentist and Non-Participating Dentist. Review summary of benefits for more details.

PPO Coverage - Offers significant discounts, no balance billing, acceptance of processing policies, and 108,000 dentist locations.

Premier Coverage - Negotiated fees, no balance billing; acceptance of processing policies, and 186,000 dentist locations.

Non-Participating Coverage - Balance billing and does not offer discounts.

	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Nonparticipating* Dentist
Deductible			
Individual (Does not apply to most Preventive Services)	\$25	\$25	\$25
Family (Does not apply to most Preventive Services)	\$75	\$75	\$75
Calendar Year Benefit Maximum	\$1,500 per person	\$1,500 per person	\$1,500 per person
Preventive Services	You Pay	You Pay	You Pay
Oral Exams (2x per Calendar Year)	0%	0%	0%
Routine Cleaning (2x per Calendar Year)	0%	0%	0%
Bite Wing X-rays (1x per Calendar Year)	0%	0%	0%
Full Mouth X-ray (1x every 3 years)	0%	0%	0%
Fluoride Treatment (2x per Calendar Year to age 16)	0%	0%	0%
Dental Sealants (to age 16)	0%	0%	0%
Brush Biopsy/Cancer Screen (2x per Calendar Year)	0%	0%	0%
Basic Services	You Pay	You Pay	You Pay
Space Maintainers (to age 16)	10% after Deductible	20% after Deductible	20% after Deductible
Emergency Palliative Treatment	10% after Deductible	20% after Deductible	20% after Deductible
Filling and Crown Repair	10% after Deductible	20% after Deductible	20% after Deductible
Endodontic Services	10% after Deductible	20% after Deductible	20% after Deductible
Extractions and Dental Surgery	10% after Deductible	20% after Deductible	20% after Deductible
Major Services	You Pay	You Pay	You Pay
Relines and Repairs to prosthetic appliances	40% after Deductible	50% after Deductible	50% after Deductible
Crowns	40% after Deductible	50% after Deductible	50% after Deductible
Periodontic Services	40% after Deductible	50% after Deductible	50% after Deductible
Bridges, Implants and Dentures	40% after Deductible	50% after Deductible	50% after Deductible
Orthodontic Services	You Pay	You Pay	You Pay
Braces (to age 19)	50%	50%	50%
Orthodontia Lifetime Maximum	\$1,500	\$1,500	\$1,500

Delta Dental Employee Bi-Weekly Premiums	
Employee Only	\$5.77
Employee + Spouse	\$11.50
Employee + Child(ren)	\$16.63
Family	\$22.46

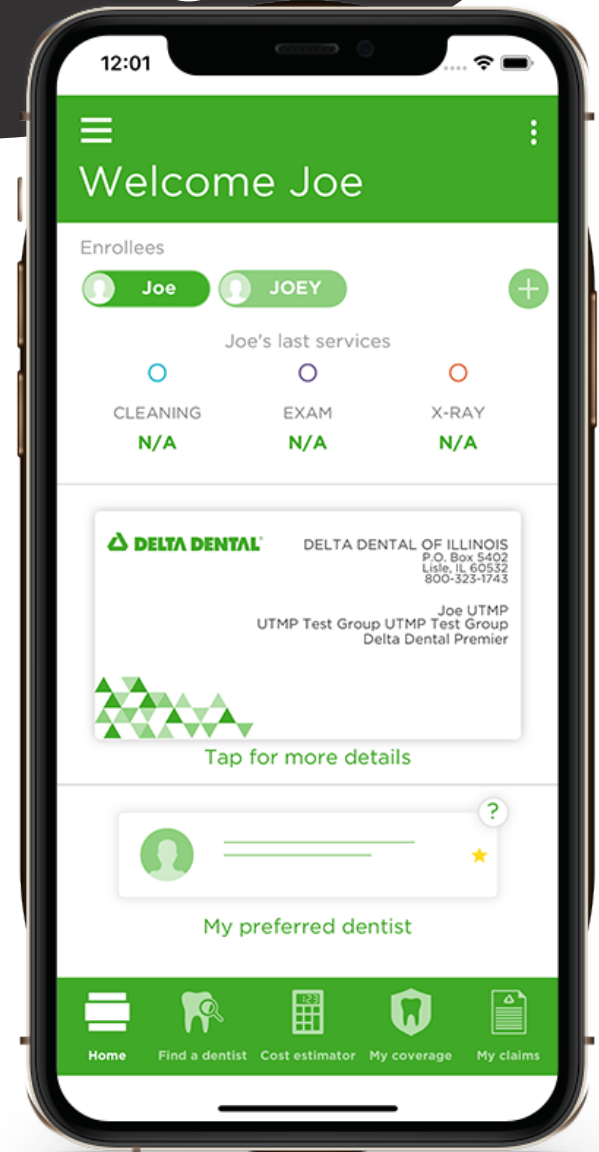
* When you receive services from a Nonparticipating Dentist, the percentages in this column indicate the portion of Delta Dental's Nonparticipating Dentist Fee that will be paid for those services. This amount may be less than what the Dentist charges and you are responsible for that difference.

Dental Benefits for Delta Dental PPO

Your benefits, at your fingertips.

The new Delta Dental mobile app helps you get the most out of your dental benefits anytime, anywhere. Use the dentist search or toothbrush timer without logging in or enter your username and password to securely access your personal benefit information or estimate your dental costs.

- **Coverage and Claims Information** – See your plan type, benefit levels, deductibles, maximums, and more. Check the status of recent dental claims. Add your dependents to your account to be able to access the whole family's coverage in one spot.
- **Dentist Search** - Find a dentist in your plan/network, narrow the list with criteria like 'language spoken' and 'specialty', and even find a dentist nearby using your current location. After you pick a dentist, you can save the contact information and get directions.
- **Mobile ID Card** - No more paper! Provide your dentist with the information he or she needs by accessing your ID card right on your phone using Apple Passbook or Google Wallet.
- **Toothbrush Timer** – Keep up with your oral health routine by using this handy tool. Our time counts down for two minutes while reminding you to brush each tooth.
- **Dental Care Cost Estimator** – This easy-to-use tool provides estimated cost ranges on common dental care needs for dentists in your area. You can even select your dentist for tailored cost estimates.



Get Started! - Delta Dental's free app is optimized for iOS and Android devices. To download our app on your device, visit the App Store or Google Play and search for Delta Dental.

Delta Dental subscribers can log in using the username and password used to log in to deltadental.com. If you haven't registered for an account yet, you can do so within the app. If you've forgotten your username or password, you can also retrieve these within the app.

Vision Benefit Overview



You have access to the EyeMed Insight Network. To search for in-network vision providers, visits www.EyeMed.com. You can choose complete set of lenses and frames every calendar year or contact lenses in lieu of glasses.

Service	Plus In-Network Provider	In-Network Provider	Out-of-Network Provider*
Routine Eye Exam (Once every 12 Months)	\$0 Copay	\$10 Copay	Reimbursed Up To \$40
Eyeglass Frames (Once every 12Months)	\$230 Allowance: 20% off any remaining balance	\$180 Allowance: 20% off any remaining balance	Reimbursed Up To \$126
Eyeglass Lenses (Once every 12 Months in lieu of contacts)			
Single Vision	\$10 Copay	\$10 Copay	Reimbursed Up To \$30
Bifocal lenses	\$10 Copay	\$10 Copay	Reimbursed Up To \$50
Trifocal or Lenticular lenses	\$10 Copay	\$10 Copay	Reimbursed Up To \$70
Eyeglass Lens Enhancements (Once every 12 Months)			
Photochromic – Non-Glass	\$0 Copay	\$0 Copay	Reimbursed Up To \$38
Standard Polycarbonate (under age 19)	\$0 Copay	\$0 Copay	Reimbursed Up To \$20
Factory Scratch Coating	\$0 Copay	\$0 Copay	Reimbursed Up To \$8
Contact Lenses (Once every 12 Months in lieu of glasses)			
Elective - Conventional	\$150 Allowance: 15% off any remaining balance	\$150 Allowance: 15% off any remaining balance	Reimbursed Up To \$105
Elective - Disposable	\$150 Allowance	\$150 Allowance	Reimbursed Up To \$105
Non-Elective (Medically Necessary)	Covered In Full	Covered In Full	Reimbursed Up To \$300
Elective Contact lens fitting and evaluation fees	Standard – Up to \$40 Copay Premium – 10% off retail price		Not Covered

EyeMed Vision Employee Bi-Weekly Premium

Coverage Type	Employee Bi-Weekly Premiums
Employee Only	\$1.75
Employee + Spouse	\$3.25
Employee + Child(ren)	\$3.25
Employee + Family	\$5.00

*Out-of-Network

If you choose to, you may instead receive covered benefits outside of the Insight Network. Just pay in full at the time of service, obtain an itemized receipt, and file a claim for reimbursement up to your maximum out-of-network allowance.



EyeMed

Your Vision Benefits



Member Web On Eyemed.com

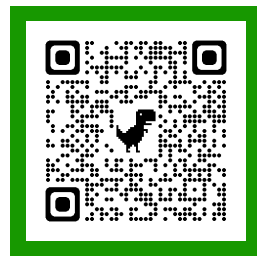
Your vision plan is like a friendly smile — it doesn't do any good if it's hidden away. Member Web at eyemed.com is here, there and everywhere. It's your vision plan control center. A place to manage the details of every visit and every claim. Instantly. Easily. Smile-ly.

Start Managing Your Benefits in a Few Easy Steps:

1. Visit eyemed.com and click on **Member Login**.
2. If you're a new user, click on **Create an Account**.
3. Register using your member ID or the last four digits of your social security number (you'll get an email asking to confirm your account).
4. Finish setting up your new account with your email address and a password.
5. Come back anytime to change your password, email address and billing preferences (it's all under **Manage Profiles**).

Members-Only Special Offers

You deserve special savings just for being an EyeMed member. So, there's a page on eyemed.com/member that only registered members like you can see. It's a mix of the latest discounts and extra savings that give your benefits a boost. So, you can keep your eyes healthy and save some cash while you're at it.



Register today at:
eyemed.com



Life Insurance & Disability Insurance



Basic Life

A Life insurance policy is a contract with an insurance company. In exchange for premium payments, the insurance company provides a lump-sum payment, known as a Death Benefit, to beneficiaries upon the insured's death.

Eligible Employees Include: Full-Time Employees	
Employer pays 100% of premium for Basic Life	
Benefit: 2x W2 earnings up to \$400,000	
Coverage decreases incrementally beginning at age 70	

Basic Accidental Death & Dismemberment

The rider covers the unintentional death or dismemberment of the insured. Dismemberment includes the loss of, or the loss of use of body parts or functions (e.g., limbs, speech, eyesight, or hearing).

Eligible Employees Include: Full-Time Employees	
Employer pays 100% of premium for Basic AD&D	
Benefit: 2x W2 earnings up to \$400,000	
Coverage decreases incrementally beginning at age 70	

Short-Term Disability

Disability benefits protect your income during a period in which you are unable to work because of an illness or accident not related to your job. New Hires are eligible for Short-Term Disability beginning on the 91st day of employment.

Income Benefit	66.67% of Weekly Earnings
Benefits Begin	1 st day accident, 1 st day illness
Maximum Weekly Benefit	Social Security Wage Base
Maximum Benefit Period	26 weeks
Employer pays 100% of premium for Short-Term Disability	

Long-Term Disability

Disability benefits protect your income during a period in which you are unable to work because of an illness or accident not related to your job. New Hires are eligible for Long-Term Disability beginning on the 91st day of employment. Disability benefits are received tax-free to a Long-Term Disability claimant.

Income Benefit	60% of Monthly Earnings
Benefits Begin	181 st day of disability
Maximum Monthly Benefit	\$15,000
Maximum Benefit Period	Until the Social Security Normal Retirement Age (age 65-67)
Employer pays 100% of premium for Long-Term Disability	

Voluntary Life and Accidental Death & Dismemberment

Voluntary Life and AD&D coverage is available to you and your eligible dependents. Employee and Spouse rates are calculated based on Employee's age. **Evidence of Insurability will be required for elections exceeding the Guarantee Issue (GI) amount, late applicants or enrollment changes of more than 2 increments (not to exceed the GI).**

EMPLOYEE BENEFIT	Benefit Increments	\$10,000
	Benefit Maximum	\$500,000
	Guarantee Issue	\$200,000
SPOUSE BENEFIT	Benefit Amount	\$5,000 increments up to \$500,000 (not to exceed Employee's coverage amount)
	Guarantee Issue	\$50,000
CHILD(REN) BENEFIT	Benefit Amount	\$2,000 increments up to \$10,000 (not to exceed Employee's coverage amount)
Employee pays 100% of the premiums for Voluntary Benefits		
Coverage decreases incrementally beginning at age 70		
<i>Current amounts can be viewed in PlanSource. PlanSource will display the per pay deduction based on your age and desired benefit.</i>		

How can EAPs help?



Marriage



Divorce or Separation



Grief



Stress



Financial Worries



Alcohol/Drug Problems



Child/Adolescent Issues



Communication Problems

EAPs FOR EMPLOYEES & FAMILIES

Employee Assistance Programs

We believe the health and wellbeing of our employees is of critical importance. Our employee assistance program is available **to ALL employees and their immediate family members**. It is not required to be enrolled in our health plan to take advantage of these EAP services available to you.

Our EAPs are **FREE** to all employees and eligible dependents. Sessions are completely confidential. Each employee and family member received **five** free visits per contract year, per EAP.

24/7/365

Access



(800) 731-6501

Call for more information.

allonehealth.com/newavenues

Password: Endresshauser

(877) 533-2363

Call for more information.



GuidanceResources.com

Web ID: My5848i

Paid Parental Leave

California residents are eligible for the CA Paid Family Leave Program

As part of its commitment to family-friendliness and to assist with work-family balance, Endress+Hauser provides its eligible employees with paid Parental Leave. This policy provides eligible employees with a period of paid time off for the purposes of caring for and bonding with their new child.

An employee may take up to eight (8) work weeks of 100% paid parental leave if they meet one of the following criteria:



Legal Parent of Newborn

Is the legal parent of the newborn child to be cared for during the Parental Leave



Adoption

Has adopted a child or have had a child placed for foster care with the intention to adopt or other legal custody (in each case, the child must be under the age of 6).

A week is defined as the employee's standard worked schedule over the course of a calendar week. Paid Parental Leave may also be granted prior to an adoption when deemed necessary to fulfill the legal requirements for an adoption. Adoption of a spouse's or partner's child(ren) is excluded from this policy except in certain limited cases.

Eligibility for paid parental Leave begins concurrently with eligibility for Family Medical Leave Act (working for the company for one (1) year and working a minimum of 1,250 hours during the 12 months prior to the start of leave). Eligible employees must be considered a regular full-time employee in good standing as of the last day worked prior to the leave to be approved.

Employees working for the company for less than one (1) year may be eligible for up to four (4) weeks of paid Parental Leave, at the discretion of the company. An employee must notify the company at least eight (8) weeks in advance, when practicable, of his or her intention to use paid Parental Leave, even if the exact start date of leave is not known. This gives the company the opportunity to plan appropriately for the absence and fully support the employee's time away from work. Failure to give adequate notice may jeopardize the company's ability to grant the full requested leave time.

The leave may be taken anytime within a six (6) month window following the birth or placement of the child within the employee's care. For new employees, the six-month window begins upon their eligibility date. The leave may be taken in week-long increments over the course of the six-month window or used consecutively, as requested by the employee, and at the discretion of the company.

Birth mothers may elect to have paid Parental Leave run concurrently with Short-Term Disability (STD) coverage. However, if an employee elects to have the paid Parental Leave and the STD coverage run concurrently, the combination of Short-Term disability benefits and paid Parental Leave benefits will not exceed 100% of the employee's regular wages. In other words, during the time that both STD and paid Parental Leave apply and run concurrently, the employee will receive 66.67% of her wages from the STD program and 33.33% of her wages from paid Parental Leave. In addition, running the two concurrently does not extend the number of weeks for which paid Parental Leave is available to the employee.

To the extent any State or Local leave law also applies, then an employee is expected to apply for the State or Local leave and run all applicable leaves concurrently. In addition, if this results in more than one paid leave benefit running concurrently with this paid Parental Leave benefit, this paid Parental Leave benefit will be reduced so that the employee does not receive more than 100% of the employee's regular wages, unless otherwise prohibited by applicable law.

If a holiday falls within the paid Parental Leave payment period, the employee will be compensated for that day as paid Parental Leave pay and not holiday pay. When an employee elects to use paid Parental Leave, it will run concurrently with Family and Medical Leave (FMLA). If the employee is eligible for both paid Parental Leave and FMLA leave, the company's FMLA policy will govern use of paid Parental Leave, including the requirement to provide a return-to-work authorization form prior to returning to work, as applicable.

While on leave, an employee will not continue to accrue paid time off. Standard deductions and taxes will still apply to all earnings. Benefits will be maintained for employees during Parental Leave subject to regular employee premium payments and in accordance with terms of the applicable benefit plan.

Every parent has individual needs. Therefore, each leave request will be considered on an individual basis by Human Resources and/or Leadership. Please direct questions and leave requests to your Human Resources representative.

Paid Caregiver Leave

California residents are eligible for the CA Paid Family Leave Program

As part of its commitment to family-friendliness and to assist with work-family balance, Endress+Hauser provides its eligible employees with paid Caregiver Leave.

To be eligible for paid Caregiver Leave, an employee must meet the following criteria:



Employment Length

Have been employed by company for at least one (1) year



Hourly Fulfillment

Have worked at least 1,250 hours in the 12 months immediately preceding the leave



Employment Status

Be a full-time employee

Eligible employees may take a maximum of four (4) weeks paid Caregiver Leave per rolling twelve months to care for his/her/their spouse, child, or parent with a serious health condition requiring hospitalization or ongoing treatment by a medical provider as defined by the FMLA. Employees may take paid leave intermittently (i.e., periodically) only when such leave is medically necessary and approved at the discretion of the Company.

Caregiver Leave shall be based upon the Employee's base salary determined by the Employee's regularly scheduled work hours. Each week of Caregiver Leave shall be paid at 66.7% of the Employee's regular weekly pay. Employees may elect to use two (2) PTO days per week to supplement the 66.7% benefit when taken in week-long increments.

When an employee elects to use paid Caregiver Leave, it will run concurrently with FMLA if applicable.

To the extent any State or Local leave law also applies, then an employee is expected to apply for the State or Local leave and run all applicable leaves concurrently. In addition, if this results in more than one paid leave benefit running concurrently with this paid Caregiver Leave benefit, this paid Caregiver Leave benefit will be reduced so that the employee does not receive more than 100% of the employee's regular wages, unless otherwise prohibited by applicable law.

While on leave, an employee will not continue to accrue paid time off. Standard deductions and taxes will still apply to all earnings. Benefits will be maintained for employees during Caregiver Leave subject to regular employee premium payments and in accordance with terms of the applicable benefit plan.

An employee must notify the company at least two (2) weeks in advance, when practicable, of his or her intention to use paid Caregiver Leave, or if the leave is not foreseeable, as soon as possible. This gives the company the opportunity to plan appropriately for the absence and fully support the employee's time away from work. Failure to give adequate notice may jeopardize the company's ability to grant the full requested leave time. Employees must complete necessary forms and provide documentation as required by the company to substantiate the request.



Parenting shouldn't mean choosing between your career and breastfeeding.

Meet Milk Stork. Your company benefit for stress-free business travel + breastfeeding.

WHY MILKSTORK?

Need to travel for work and feed your baby? Milk Stork ensures your breast milk gets home safely, so you can keep breastfeeding without compromise.

With Milk Stork, you can:

- **Ship breast milk overnight** within the U.S. and internationally.
- **Travel with confidence** with TSA-approved coolers designed specifically for breast milk storage.
- **Save time and hassle.** We've got the logistics covered. No more pumping and dumping.

14M+

OUNCES SHIPPED

183

COUNTRIES SERVED

225K+

DELIVERIES COMPLETED

850+

EMPLOYERS SUPPORTED

HOW IT WORKS

- ✓ **Access your benefit**
Go to milkstork.com/endress to create an account. Remember, Milk Stork is fully covered* by your employer.
- ✓ **Get your Milk Stork kit**
Order your Milk Stork kit to your home, office, or hotel. We recommend ordering 7 days in advance.
- ✓ **Pump, pack, and ship/carry**
Sit back. Milk Stork takes care of the rest.

*Yes, this benefit is **free** to you! Your company offers Milk Stork because they support you as a working parent.

"Incredible program for working moms! ...I just can't imagine how I would have traveled for work while breastfeeding without this program." - Emily N.

To get started, create your account

at: www.milkstork.com/endress

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Voluntary Accident



Accidents happen. Treatment can be vital to recovery, but it can also be expensive. If an accident keeps you away from work during recovery, the financial worries can grow quickly. This coverage pays a cash payout if you have any of the covered accidents. Use this benefit to help pay for cost of care. The plan is designed to cover accidents that occur on and off the job. Coverage is portable at the same rate.

Covered Benefits	Low Plan	High Plan
Hospital Admission	\$1,125	\$1,750
Daily Hospital Confinement (Pays Daily)	\$250	\$325
Intensive Care Admission/Daily Stay up to 30 Days per Accident	\$1,250/ \$400	\$1,750/ \$450
Ambulance Ground/ Air	\$300/ \$1,250	\$550/ \$2,000
Medical Imaging Tier 1 - X-ray	\$60	\$90
Tier 2 - Bone Scan/CAT/CT/EEG/MRI Medical Imaging Incident Covered Accident Per Tier	\$200	\$300
Durable Medical Equipment	\$125	\$275
Outpatient Surgical Facility	\$200	\$250
Knee Cartilage Meniscus Exploratory Without Repair/With Repair	\$175 /\$650	\$250 /\$900
Concussion	\$200	\$350
Fractures (non-surgical)	\$200 - \$5,600	\$300 - \$10,00
Lacerations	\$25 - \$400	\$50 - \$750
Eye Injury	\$80 - \$275	\$110 - \$400

Covered Benefits	Low Plan	High Plan
Coma Induced (up to 14 days) Non-Induced (duration of 14 or more days)	\$125 \$14,500	\$200 \$18,500
Emergency Room	\$200	\$325
Prosthetic Device 1 Device or Limb/ 2 or more Devices or Limbs	\$625/ \$1,000	\$1,250/ \$2,000
Dislocation Surgical Repair	\$250- \$6,400	\$300-\$8,000
Ruptured or Herniated Disc (1 Disc or More Discs)	\$650	\$900
Burns	\$1,125 - \$12,500	\$1,500 + \$20,000
Accident Dismemberment	\$1,250 - \$28,000	\$1,500 - \$40,000
Accidental Death Employee Spouse Child	\$50,000 \$25,000 \$10,000	\$100,000 \$50,000 \$20,000
Wellness Benefit (1 benefit per covered person per calendar year)	\$50	\$50

Coverage Level	Low Plan	High Plan
Employee Only	\$2.01	\$3.41
Employee + Spouse	\$4.02	\$6.81
Employee + Child(ren)	\$4.32	\$7.32
Employee + Family	\$6.33	\$10.72

Voluntary Critical Illness



This insurance pays fixed cash benefits directly to you upon diagnosis of a covered critical illness after the coverage effective date. These benefits can help pay for out-of-pocket medical and non-medical expenses your medical insurance doesn't cover. You are able to choose the benefit amounts that best meet your needs and your budget. Employee's must be enrolled in order to elect coverage for eligible spouse and dependent children. The cost of the plan will be in your PlanSource portal.

Cost is determined based on the Employee's and Spouse's age. Eligible dependent children can be covered at no additional cost.

Rates can be found on the PlanSource portal. Coverage is portable at the same rate. Full benefit summaries can be found on the PlanSource portal and SMBO site.

Members may submit claims for diagnosis made after the Critical Illness coverage becomes effective.

The Schedule of Benefits includes a list of covered conditions. There is no total maximum benefit amount or limit to the number of payments you may receive for each covered condition under your plan, except for skin cancer.

You may receive a benefit payment for each different diagnosis of a covered condition shown on your Schedule of Benefits. (a definition of "different diagnosis" is provided in the certificate of coverage). For skin cancer, the benefit is payable up to 1 time per calendar year, 10 times the lifetime maximum limit. Once the maximum for skin cancer has been reached, no further benefits are payable

Benefit Options	Employee	Spouse	Child
Plan 1	\$10,000	\$5,000	\$5,000
Plan 2	\$20,000	\$10,000	\$10,000
Plan 3	\$30,000	\$15,000	\$15,000

Initial Critical Illness Benefit	All Plans
Heart Attack/Stroke/Major Organ Transplant/End-Stage Renal Failure	100% of Benefit Amount
Coronary Artery bypass	25% of Benefit Amount
Invasive Cancer/Noninvasive Cancer	100%/25% of Ben. Amount
Skin Cancer	10% of Benefit Amount
Coma	100% of Benefit Amount
Loss of Sight	100% of Benefit Amount
Loss of Hearing	100% of Benefit Amount
Permanent Paralysis	100% of Benefit Amount
Dementia (Including Alzheimer's Disease)	100% of Benefit Amount
Parkinson's Disease	100% of Benefit Amount
Wellness Benefit (1 benefit per covered person per calendar year)	\$50

Voluntary Group Whole Life



Group Whole Life Insurance

Life is unpredictable. Let Allstate Benefits help you prepare for the unexpected with Group Whole Life Insurance. Now you can provide your family with financial peace of mind for the future and the journey to get there. Not only do you get protection for your lifetime, but you also have the ability to build cash value as you go. Give yourself and your loved ones a gift of love with Good Hands® protection from Allstate Benefits. Benefit Summaries are

Full benefit summaries can be found on the PlanSource portal and SMBO site.

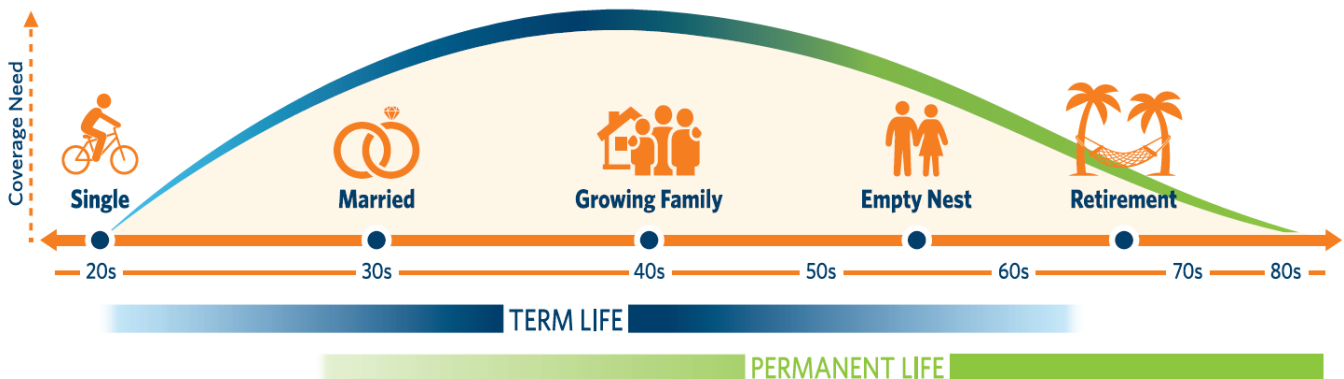
Here's How It Works

With Group Whole Life Insurance from Allstate Benefits, you get simplified and straightforward coverage. You decide how much coverage and who to cover. You get guaranteed rates for the life of the policy and a guaranteed death benefit to be paid to your beneficiaries. As the policy builds cash value, you can achieve your financial goals or borrow against it should you need to.

- You choose a fully-guaranteed death benefit (premiums payable to age 95) to leave behind, or if you live to age 121, a lump-sum maturity benefit is paid
- A rider is included to allow you to use your benefit to pay for long-term care. If you use the Whole Long-Term Care benefit, the Whole Life benefit is restored to the full benefit. This rider includes a monthly advance of up to 4% of the death benefit for up to 25 full months while receiving qualified long-term care services, when certified chronically ill by a licensed health care practitioner. The restoration provision restores the death benefit and cash value to the pre-acceleration amounts
- Spouse may be covered
- Premiums are affordable and conveniently payroll deducted
- Coverage may be continued if you leave employment; refer to your certificate for details

Coverage for all stages of life

As people move through the stages of life, certain factors dictate the type of life insurance they need. During working years, an employer may provide Term Life insurance, but the wraparound coverage of our Group Whole Life product can help give peace of mind because the money you spent builds cash value that you can use later in life or add to the term benefit payout. The graph below illustrates the need for term and permanent whole life insurance throughout the various stages of life.



The examples above detail fictional thought processes and needs; your individual needs and reasons for coverage may vary.

Take Back Control of Your Identity!



Find Out More
Norton.com/BenefitPlans

Essential	\$2.76 Employee Only	\$5.53 Employee +Family
Premier	\$3.69 Employee Only	\$7.01 Employee +Family
Pricing displayed is	Per Bi-weekly Paycheck	

You get this (and so much more)



Identity & Credit Monitoring¹

We monitor for new accounts being opened in your name and for key changes to your credit file at one or all three of the leading credit bureaus and alert you to potential fraud.



1B2



3B3



Identity Restoration Support

If your identity is compromised, a US-based Identity Restoration Specialist will personally handle your case and help restore your identity.



Device Security w/ Secure VPN

Protects your mobile devices, tablets, and computers from hackers and vulnerable websites in addition to keeping your browsing private.



3 devices
family gets 6



5 devices
family gets 10



Genie Scam Detection

AI-powered alerts help detect and navigate suspicious texts, emails, and calls in real time. Offers advice if you think you're being scammed.



Financial + Credit Insights

Empowers you with valuable insights into your finances, guiding you on the path to greater, more insightful, financial well-being.



Already a member?

Don't forget to cancel your existing membership just prior to your benefit effective date by calling [800-607-9174!](tel:800-607-9174)

¹Credit features require setup, identity verification and sufficient credit history by TransUnion and/or Equifax. Credit monitoring features may take several days to activate after enrollment.

²The credit score provided is a VantageScore 3.0 credit score based on Equifax data. Third parties use many different types of credit scores and are likely to use a different type of credit score to assess your creditworthiness.

³The credit scores provided are VantageScore 3.0 credit scores based on data from Equifax, Experian and TransUnion respectively. Third parties use many different types of credit scores and are likely to use a different type of credit score to assess your creditworthiness.

wishbone

YOUR BEST FRIEND.
THEIR BEST LIFE.



Endress+Hauser

Endress+Hauser is offering Wishbone Pet Health Insurance to employees.

Nobody wants to imagine their pet getting sick or injured - but when it comes to your pet's health, it's best to expect the unexpected.

Wishbone is accepted at any vet in the U.S., including emergency hospitals. Our simple online claims process means you get your money back fast, whether it's for routine care or an accident.

Rates are based on age and zip code

- 5% discount for multi-pet families.
- Any condition, diagnosis, or treatment during the waiting period is considered pre-existing and not covered.
- Short waiting periods begins the date after coverage becomes effective.
 - 1 day for accidents
 - 14 days for illness
 - 180 days for orthopedic events

Protecting your pet's health and your finances has never been easier!

Get a quote & enroll at www.wishboneinsurance.com/endress

*70% reimbursement rate applies to out-of-network veterinary practices; 80% reimbursement rate applies to in-network veterinary practices.

Wishbone Pet Insurance is a pet health insurance program offered by Pet Assure Corp., dba Pet Benefit Solutions, a licensed agency (NJ License Number 1677880). Insurance coverage is administered by Pet Assure Corp., dba Pet Benefit Solutions and underwritten by Everspan Insurance Company or Providence Washington Insurance Company. Please visit <https://www.wishboneinsurance.com/terms-and-conditions> for more information. Wishbone's wellness plans are not insurance and are administered by Pet Benefit Solutions. WBPS-EE-BTH-B-073025

AVAILABLE WISHBONE PLANS

Wishbone offers different plan options to fit your budget. Enroll in both for maximum benefits.

Advantage Plan

For unexpected accidents and illnesses
dogs & cats only

- Up to 70%/80% reimbursement on claims *
- \$250 deductible; \$10,000 annual limit
- Show your in-network ID card at an in-network vet to receive the higher reimbursement rate
- Plus, get an instant 25% discount on eligible in-house medical services at in-network vets
- Includes 24/7 pet telehealth

Rates based on your pet's age, breed & zip code.

Wellness Plan

For regular routine visits
all pets, including exotics

ESSENTIAL PLAN

Up to a \$300 value
\$14/month

PREMIUM PLAN

Up to a \$575 value
\$25/month

Reimbursements are based on a schedule of benefits outlined during enrollment

2026 Bi-Weekly Premiums

Surest Purple PPO Plan, Employee & Employer Bi-Weekly Premiums

Coverage Type	Wellness Participant Non-Tobacco	Wellness Participant Tobacco	Non-Wellness Participant	Employer Contribution*	Total Premium
Employee Only	\$29.27	\$60.17	\$91.07	\$363.72	\$392.99
Employee + Spouse	\$115.17	\$146.07	\$176.97	\$672.98	\$788.15
Employee + Child(ren)	\$41.42	\$72.32	\$103.22	\$646.84	\$688.26
Employee + Family	\$135.27	\$166.17	\$197.07	\$885.57	\$1,020.84

UMR Yellow HSA Plan, Employee & Employer Bi-Weekly Premiums

Coverage Type	Wellness Participant Non-Tobacco	Wellness Participant Tobacco	Non-Wellness Participant	Employer Contribution*	Total Premium
Employee Only	\$29.27	\$60.17	\$91.07	\$363.72	\$392.99
Employee + Spouse	\$115.17	\$146.07	\$176.97	\$672.98	\$788.15
Employee + Child(ren)	\$41.42	\$72.32	\$103.22	\$646.84	\$688.26
Employee + Family	\$135.27	\$166.17	\$197.07	\$885.57	\$1,020.84

*Employer contribution based off Wellness Non-Tobacco premiums

Kaiser Medical HMO Plan, Employee & Employer Bi-Weekly Premiums

Coverage Type	Employee Contribution	Employer Contribution	Total Premium	You must live in a Kaiser Permanente coverage area to enroll in this plan
Employee Only	\$93.51	\$310.87	\$404.37	
Employee + Spouse	\$185.31	\$744.07	\$929.37	
Employee + Child(ren)	\$160.20	\$606.08	\$766.28	
Employee + Family	\$255.97	\$968.31	\$1,224.28	

Delta Dental Plan, Employee & Employer Bi-Weekly Premiums

Coverage Type	Delta Dental PPO Plan (Available in all States)			You can use your HSA dollars to pay for dental expenses, such as copays.
	Employee Contribution	Employer Contribution	Total Premium	
Employee Only	\$5.77	\$8.65	\$14.42	
Employee + Spouse	\$11.50	\$17.24	\$28.74	
Employee + Child(ren)	\$16.63	\$24.95	\$41.58	
Employee + Family	\$22.46	\$33.70	\$56.16	

EyeMed Vision Plan, Employee & Employer Bi-Weekly Premiums

Coverage Type	Employee Contribution	Employer Contribution	Total Premium	You can use your HSA dollars to pay for vision expenses, such as photochromic lenses and gradient tint. Corrective eye surgery is not a covered benefit but is HSA eligible.
Employee Only	\$1.75	\$2.85	\$4.60	
Employee + Spouse	\$3.25	\$5.48	\$8.73	
Employee + Child(ren)	\$3.25	\$5.94	\$9.19	
Employee + Family	\$5.00	\$8.51	\$13.51	

2026 E+H Company HSA Contribution

Endress+Hauser 2026 Company Health Savings Account (HSA) Contributions

Employee Contribution (Minimum per pay required to maximize E+H Funding)	Employer Contribution (Maximum per pay)	Total Employee HSA Deposit to maximize employer funding	2026 IRS Maximum (Includes Company Funding)
\$38.46	\$38.46	\$76.92	\$4,400 single / \$8,750 family (Employees age 55+ may contribute an additional \$1,000 annually)

Contact Information

Important Contact Information:

Benefits Call Center

(888) 598-2040

Monday-Friday 7am to 5pm CST

Please utilize the website resources for provider information, pharmacy information, and general claims information.

The Customer Service phone numbers can assist you with benefits and specific claims questions.

01

Medical

Yellow Plan

UMR Customer Service: (800) 826-9781

www.UMR.com

Purple Plan

Surest Customer Service: (866) 683-6440

Join.Surest.com/EH

HMO Medical Plan

Kaiser Customer Service: (800) 464-4000

healthy.kaiserpermanente.org

02

Dental

Delta Dental PPO

(800) 524-0149

www.DeltaDentalIN.com

03

Vision

EyeMed Vision

(866) 939-3633

www.EyeMed.com

04

Health Savings Account

Optum Bank

(866) 234-8913

www.optumbank.com

05

Flexible Spending Account

HRPro

(800) 989-8776

www.hrpro.com/login

06

Life, AD&D and Long-Term Disability

Voya

(800) 955-7736

www.voya.com

07

Short-Term Disability

AskHR@peoplesolution.endress.com

08

Employee Assistance Program

AllOne Health

(800) 731-6501

allonehealth.com/newavenues

Password: Endresshauser

Voya

(877) 533-2363

guidanceresources.com/

Web ID: My5848i

09

Voluntary Benefits –

Voya – Accident and Critical Illness

(877) 236-7564

www.voya.com

Allstate – Group Whole Life

Customer Service: (800) 521-3535

Website: AllStateBenefits.com

Norton's LifeLock

Customer Service: (800) 607-9174

Website: Norton.com/BenefitPlans

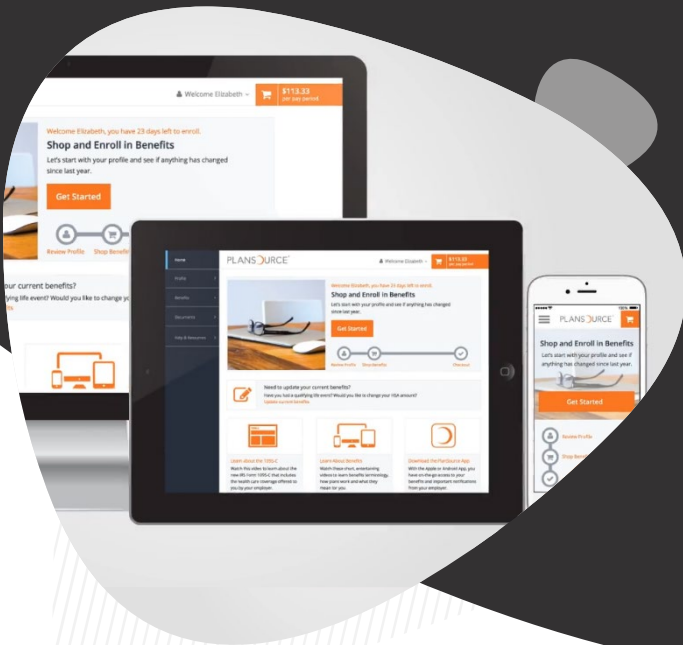
Wishbone Pet Insurance

Customer Service: (800) 887-5708

Website: Wishboneinsurance.com/endress

Enrollment

Enroll In Your Benefits Via the Call Center,
or Self-Enroll Online



01

LOGIN

Step 1: Phone the Call Center at **888-598-2040** Monday through Friday 7 a.m. to 5 p.m. CST. or, to self-enroll online, [click here](#) or paste the link below into your web browser's search bar: <https://benefits.plansource.com/logon>

USERNAME: Last four (4) numbers of your SSN, your first initial and the first six (6) letters in your last name. If you don't have six (6) letters in your last name, use your last name.

Examples: John Employee: SSN – 000-00-1234
Username is 1234jemploy. Janie Doe: SSN- 000 00-1234
Username is 1234jdoe.

PASSWORD: The first time you log in, your password will be your birth date in the format YYYYMMDD.

Example: February 7, 1975 would be 19750207.

First time users will be prompted to change their password. Enter the new password and click **Save**.

Learn about your benefits at
endressbenefits.com



**Scan To Enroll In Benefits
On PlanSource**

02

ENROLL

Complete the enrollment steps to shop for benefits. After completing each screen, click **UPDATE CART**.

CHECKOUT

03

Review all your personal, dependent, and enrollment information closely, and make changes if necessary. You can print or email the enrollment form if you choose. click **CHECKOUT**.