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2027 Benefits Open Enrollment

Your benefits for the plan year beginning January 1, 2027

Open Enrollment: **December 7 – 18, 2026**

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Our 2027 Benefits Objectives

What DG3 set out to do for you and your family this year

Prevent cost increases	• Perform in-line or better than overall market • Took advice from multiple providers • Challenged the entire program with a 29-point review • Lowered administrative fees for the plan
Better tailor plans to our changing workforce to reduce expense	• Low-cost plan • Medicare
Improve the quality of service surrounding healthcare	• Access to national network • Centers of Excellence
Reduce risk of out-of-pocket exposure	• Up front HSA contribution (instead of end of quarter)
Improve quality of support	• Benefits Concierge

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Open Enrollment at a Glance

December 7 – 18, 2026 • Coverage effective January 1, 2027

1

Review your options

Visit www.mydg3benefits.com for the benefit guide, plan summaries, videos and carrier contacts.

2

Make changes, if needed

Only employees making changes need to complete an enrollment form. No changes? No action needed.

3

Re-elect HSA & FSA

HSA and FSA contributions do not roll over – make a new annual election for 2027.

Don't miss the deadline

Open Enrollment is your once-a-year chance to change your benefits. It closes **December 18.**

Life changes during the year?

Marriage, a new baby or a loss of other coverage are qualifying events. Notify HR **within 30 days.**

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What's New for 2027

A new low-cost medical option, more support, earlier HSA funding and higher IRS limits

NEW

Low-cost medical option

The Apex-MEC Plus Advantage plan with Globe Life hospital indemnity – a lower-cost alternative to the Anthem HDHP.

NEW

Oswald Benefits Concierge

Help with claims, providers, preapprovals and plan questions – all year. Every call and email acknowledged within 24 hours.

NEW

HSA funded each quarter

DG3's HSA contribution ($500 single / $1,000 family) is deposited at the beginning of each quarter instead of the end.

UPDATED

Higher IRS limits

HSA limits rise to $4,500 single / $9,000 family, and the Health Care FSA limit rises to $3,500.

The Anthem HDHP, DG3's HRA reimbursement amounts and your dental, vision, life and disability plans continue for 2027.

Medical Option 1 | Anthem HDHP with HSA

Anthem

Anthem Blue Access PPO network • HSA-qualified high-deductible health plan

Benefits	In-network	Out-of-network
Deductible (single / family)	**$6,200 / $12,400**	$18,600 / $37,200
Out-of-pocket max (single / family)	$6,900 / $13,800	$20,700 / $41,400
Coinsurance (you pay)	**0% after deductible**	30% after deductible
DOCTOR VISITS		
Preventive care	**No charge**	30% after deductible
Primary care / Specialist (office or virtual)	0% after deductible	30% after deductible
Virtual care through the Sydney Health app	0% after deductible	—
HOSPITAL & EMERGENCY		
Inpatient / Outpatient	0% after deductible	30% after deductible
Urgent care	0% after deductible	30% after deductible
Emergency room	0% after deductible	Covered as in-network
PRESCRIPTION DRUGS • ESSENTIAL DRUG LIST		
Preventive drugs (PreventiveRx list)	**No charge – no deductible**	—
Tiers 1–4 (retail & home delivery)	0% after deductible (preferred pharmacy) 10% after deductible (other in-network)	50% after deductible (retail only)

Deductible and out-of-pocket max are embedded – no one family member pays more than the single amount. Drugs not on the Essential Drug List are not covered. See your plan summary for details.

Prescription Drug Benefits | Anthem HDHP

Anthem

No change for 2027 – same Anthem pharmacy program, managed by CarelonRx, Anthem's pharmacy benefit manager

What you pay	Your cost
Preventive drugs (PreventiveRx list)	**$0 – no deductible**
Level 1 pharmacy – retail or CarelonRx home delivery	**0% after deductible**
Other in-network retail pharmacy	10% after deductible
Out-of-network pharmacy (retail only)	50% after deductible

Applies to all four tiers of Anthem's Essential Drug List. Drugs not on the list are not covered unless approved.

DG3 HELPS PAY FOR PRESCRIPTIONS

- Rx costs count toward your deductible and out-of-pocket max
- DG3's HRA reimburses eligible Rx claims, just like medical
- Pay the rest with your HSA – tax-free

Ways to save

- Fill at a Level 1 pharmacy or by home delivery to pay 0% after the deductible
- Home delivery: 90-day supplies with free shipping
- Use Price a Medication in the Sydney Health app to compare costs and find generics

2027 drug list updates

Anthem reviews the list quarterly. On January 1, lower-cost generic versions replace some brand-name hepatitis C drugs, and a lower-cost insulin glargine is added. Anthem will let you know if a drug you take changes.

Medical Option 2 | Apex-MEC Plus Advantage

NEW low-cost option • Minimum Essential Coverage with Globe Life hospital indemnity and group term life

Apex-MEC Plus Advantage	You pay	Limit
PREVENTIVE & VIRTUAL CARE		
Preventive care (in-network, non-hospital facility)	**$0 – covered at 100%**	ACA preventive services
MDLive 24/7 telemedicine (multilingual)	**$0**	Unlimited – you & family
MDLive behavioral health (multilingual)	**$0**	Unlimited
PHCS NATIONWIDE NETWORK		
Primary care visit	$20 copay	3 visits per year
Specialist visit	$50 copay	3 visits per year
Urgent care	$50 copay	3 visits per year
Diagnostic X-ray and lab	$50 copay	5 tests per year
CT scan / MRI (outpatient only)	$200 copay	1 scan per year
CIGNA PRESCRIPTION DRUGS		
Generic medications	$0 copay	—
Tier 1 medications (FDA-approved)	10% coinsurance	—

Also includes member advocacy (MedWatch) and identity theft protection. Plan administered by Tres Health; GLI and life underwritten by Globe Life.

GLOBE LIFE • INCLUDED

Hospital indemnity

$250 per day in the hospital or ICU, up to 60 days per year – paid to you

Group term life: Employee $10,000 • Spouse $5,000 • Child $2,500

Important to know

- A limited benefit plan – not major medical coverage
- Hospital stays and surgery are not covered like the Anthem plan
- Not HSA-eligible – no DG3 HSA or HRA dollars

Which Medical Plan Is Right for You?

Compare the Anthem HDHP with HSA and the Apex-MEC Plus Advantage plan

	Anthem HDHP with HSA	Apex-MEC Plus Advantage
Type of coverage	**Major medical**	Limited benefit (not major medical)
Network	Anthem Blue Access PPO	PHCS nationwide network
Preventive care	No charge	No charge (non-hospital facility)
Office visits	0% after deductible – unlimited	$20 / $50 copay – 3 visits each per year
Hospital stay or surgery	**0% after deductible**	$250/day hospital indemnity – you pay the rest
Prescriptions	0–10% after deductible; preventive drugs $0	Generics $0; Tier 1 10%
Most you'd pay in-network (single / family)	**$2,200 / $4,400 effective deductible; up to $2,900 / $5,800 with Rx at non-Level 1 pharmacies**	No out-of-pocket maximum for uncovered costs
DG3 HSA + HRA dollars	**Yes – up to $4,000 single / $8,000 family**	No
Your semi-monthly cost	**From $122.87 (employee only)**	**From $14.76 (employee only)**

Choose the Anthem HDHP for full protection against large or unexpected medical bills.

Consider Apex-MEC if you mainly need preventive and virtual care and want the lowest premium.

Turning 65? Know Your Medicare Options

For employees and spouses who are 65 or older, or approaching 65

It's your choice

Stay on DG3's plan
Your DG3 coverage continues on the same terms at 65. DG3's plan pays first; Medicare pays second if you also enroll.

Or choose Medicare
Depending on your health needs and prescriptions, Medicare (with a supplement and drug plan) may cost you less. Compare before you decide.

Thinking about a change? Talk to the Benefits Concierge first – timing matters.

Before you decide, know this:

HSA contributions stop

Once you enroll in any part of Medicare – even Part A – you and DG3 can no longer contribute to your HSA. Your balance stays yours to spend.

Plan your timing

Part A can be backdated up to 6 months, so stop HSA contributions 6 months before you apply for Medicare or Social Security.

No penalty for waiting

While covered by DG3 as an active employee, you can delay Part B. You get 8 months to enroll after your job or coverage ends.

Keep your Rx notice

DG3's annual Medicare Part D notice tells you if its drug coverage is "creditable" – this matters if you join a Part D plan later.

Questions? Call the Benefits Concierge at 216-206-6798, or visit medicare.gov / 1-800-MEDICARE.

DG3 Invests in Your Health Coverage

Three ways DG3 helps pay for your medical care

79%

of your medical premium

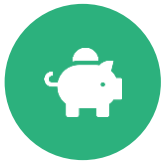
DG3 pays 79% of the cost of your medical coverage. You pay only 21% through payroll deductions.



Health Reimbursement Arrangement

DG3 reimburses up to **$3,500 single / $7,000 family** of your deductible, after you pay the first $2,700 / $5,400.

Details on the next slides



HSA contribution

$500 — **Employee only**
$125 each quarter

$1,000 — **Employee + dependent(s)**
$250 each quarter

Deposited at the beginning of each quarter

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What You Actually Pay: Your Effective Deductible

With DG3's HRA and HSA dollars, your real deductible is much lower than the plan's stated deductible

Employee only

Plan's stated deductible	**$6,200**
DG3 HRA pays	**– $3,500**
DG3 HSA contribution	**– $500**
Your effective deductible	**$2,200**



Who pays the $6,200 deductible

Employee + dependent(s)

Plan's stated deductible	**$12,400**
DG3 HRA pays	**– $7,000**
DG3 HSA contribution	**– $1,000**
Your effective deductible	**$4,400**



Who pays the $12,400 deductible

After the deductible, covered in-network medical care is paid at 100%. Prescriptions at a non-Level 1 pharmacy are 10% until you reach the $6,900 / $13,800 out-of-pocket max – so the most you'd pay in-network is $2,900 single / $5,800 family.

How the DG3 HRA Works

DG3's Health Reimbursement Arrangement covers the middle of your deductible, including prescriptions

STEP 1

You pay the first part

$2,700 single / $5,400 family

Pay with your HSA or out of pocket.

STEP 2

DG3's HRA reimburses you

Next $3,500 single / $7,000 family

Submit eligible medical and Rx claims for reimbursement.

STEP 3

The plan pays 100%

After $6,200 single / $12,400 family

Covered in-network care is paid in full for the rest of the year.

To get reimbursed

- Complete the HRA claim form – find it at www.mydg3benefits.com or ask Human Resources
- Email it with your Anthem Explanation of Benefits (EOB) to the address on the form
- Questions or a claim that doesn't look right? Call the Oswald Benefits Concierge

Health Savings Account (HSA)

Your money, your account – it's yours to keep, even if you leave DG3

Triple tax savings

- Contributions are pre-tax
- Earnings and growth are tax-free
- Withdrawals for qualified medical expenses are tax-free

No use-it-or-lose-it

- Your balance rolls over every year
- Contribute up to the annual maximum
- Invest your balance and save for retirement

Who is NOT eligible

- Covered by a non-HDHP plan (including a spouse's plan or health FSA)
- Entitled to Medicare
- Claimed as a dependent on someone else's tax return

Use your HSA for qualified medical expenses, such as:

Deductibles • Prescriptions • Doctor and hospital bills • Dental treatment and orthodontia • Eye exams, glasses and contacts • Hearing aids • Lab tests and X-rays • Chiropractic care • Mental health services

2027 HSA Contribution Limits

IRS annual maximums – DG3's contribution counts toward these limits

$4,500

Employee only

Includes DG3's $500

$9,000

Employee + dependent(s)

Includes DG3's $1,000

+$1,000

Catch-up, age 55+

If not enrolled in Medicare

NEW: DG3 funds your HSA up front each quarter

- $125 (single) or $250 (family) at the beginning of January, April, July and October
- Must be enrolled in the HDHP and HSA-eligible to receive deposits
- Make your own pre-tax contributions through payroll – change them anytime

Contributions above the annual limit are subject to income tax and a 20% penalty.

Get the Most from Anthem

Preventive care and Centers of Excellence



Preventive care

No charge in-network – no deductible

- Annual physicals and well-woman visits
- Well-child visits and immunizations
- Recommended screenings, such as mammograms and colonoscopies
- Preventive drugs on Anthem's PreventiveRx list
- Preventive care for chronic conditions, per IRS guidelines

Tip: Schedule your annual physical – it's free and can catch problems early.



Centers of Excellence

Top-quality care for major procedures

Blue Distinction® Centers
Hospitals recognized for better results and fewer complications in knee and hip replacement, spine surgery, cardiac care, cancer care, bariatric surgery, maternity care and transplants.

Anthem Centers of Medical Excellence
Facilities meeting strict criteria for transplants, ventricular assist devices (VAD) and CAR-T cell therapy.

Tip: Facing a major procedure? Ask the Concierge to help you find a Center of Excellence.

Anthem Member Perks & Wellness

Anthem

Tools and programs included with your medical plan

Sydney Health app

Your digital ID card, claims, a cost estimator and a Find Care search – all in one place.

Virtual care

See a doctor by video or chat through the app for primary, urgent and mental health care.

24/7 NurseLine

Talk to a registered nurse any time, day or night, to decide where to get care.

Find in-network care

Search the Blue Access PPO network at anthem.com or in the app to avoid out-of-network costs.

SpecialOffers discounts

Save on Active&Fit Direct gyms, LASIK, hearing aids, Glasses.com and 1-800 CONTACTS, fitness trackers and more.

Health & wellness programs

Support for chronic conditions, healthy pregnancies and building healthier habits.

NEW: Your Oswald Benefits Concierge

Real people to help you use your benefits – any time throughout the year

CONTACT US ANYTIME

216-206-6798

mybenefits@oswaldccompanies.com

24-hour acknowledgment
Every call and email is acknowledged within 24 hours or less.

Se habla español
Spanish-speaking support available by appointment.

We can help with:

- **Preapproval / authorization support**
- **Finding in-network providers**
- **Claim coding errors**
- **Denied claims**
- **Claim reimbursement support**
- **HRA claims (deductible and Rx)**
- **Plan explanations**

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Keep Your Concierge Card Handy

Every employee will receive this wallet card from DG3

FRONT

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Benefits Concierge

Questions about your benefits? We're here all year.

216-206-6798
mybenefits@oswaldcompanies.com

BACK

Call or email us for help with:

- ✓ Preapproval / authorization support
- ✓ Provider search assistance
- ✓ Claim code errors
- ✓ Denied claims
- ✓ Claim reimbursement support
- ✓ Health Reimbursement Account (deductible and Rx)
- ✓ Plan explanations

Acknowledged within 24 hours • Se habla español (by appointment)

Save the number in your phone today: 216-206-6798. You can also find it at www.mydg3benefits.com.

Dental Options

Three plans to choose from: Anthem High, Anthem Low or UHC DHMO

Benefits	Anthem High Plan		Anthem Low Plan		UHC DHMO
	In-network	Out-of-network	In-network	Out-of-network	In-network only
Deductible (single / family)	$25 / $75	$25 / $75	$50 / $150	$50 / $150	$0
Preventive care	100%	100%	100%	100%	Fixed copays – see DHMO schedule
Basic care (fillings, root canals)	90%	80%	80%	70%	
Major care (crowns, dentures, bridges)	60%	50%	50%	50%	
Child orthodontia (through age 18)	50%	50%	50%	50%	
Orthodontia lifetime max	$1,500	$1,500	$1,500	$1,500	
Annual maximum (per person)	$1,500	$1,500	$1,500	**$1,000**	
Network	Anthem Dental Complete				UHC National Select

Percentages show what the plan pays. Anthem plans: deductible waived for preventive care; out-of-network dentists may bill the difference. DHMO: you must use a UHC network dentist – see the DHMO benefit schedule at www.myuhc.com or www.mydg3benefits.com.

Find an Anthem dentist: anthem.com/find-doctor → Dental → select the "Dental Complete" network.

Vision | Anthem Blue View Vision

One of the nation's largest vision networks

Services	In-network	Out-of-network	How often
Routine eye exam	$20 copay	Up to $42	Every calendar year
Single / bifocal / trifocal lenses	$20 copay	Up to $40 / $60 / $80	Every calendar year
Frames	$150 allowance, then 20% off the balance	Up to $45	Every other calendar year
Elective contact lenses (instead of glasses)	$150 allowance	Up to $105	Every calendar year
Medically necessary contacts	Covered in full	Up to $210	Every calendar year

Bonus: your Anthem medical plan also covers one routine eye exam per year at no charge with a Blue View Vision provider.



Shop your way

Use private-practice doctors, LensCrafters, Target Optical or most Pearle Vision locations, or order online at Glasses.com and ContactsDirect.com. Find a provider at anthem.com/find-care.

2027 Employee Contributions | Semi-Monthly

Your cost per paycheck (24 pay periods) • DG3 pays 79% of your medical premium

Medical	Anthem HDHP	Apex-MEC
Employee only	$122.87	$14.76
Employee & spouse	$296.12	$29.78
Employee & child(ren)	$210.85	$29.07
Employee & family	$381.89	$43.57

Dental	Anthem High	Anthem Low	UHC DHMO
Employee only	$23.45	$26.60	$5.05
Employee & spouse	$41.71	$29.33	$10.15
Employee & child(ren)	$39.64	$24.33	$8.73
Employee & family	$72.62	$54.06	$18.12

Vision	Anthem Blue View
Employee only	$1.88
Employee & spouse	$3.58
Employee & child(ren)	$3.78
Employee & family	$5.89

79%

DG3 pays 79% of your medical premium
Your share is just 21%, deducted pre-tax from each paycheck.

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Flexible Spending Accounts

Administered by WEX • Set aside pre-tax dollars for eligible expenses

Health Care FSA

$3,500

2027 annual maximum

- Full election available January 1
- Carryover: up to $680 of 2026 funds into 2027; up to $700 of 2027 funds into 2028
- Not available with the HSA

Limited Purpose FSA

$3,500

2027 annual maximum

- For dental and vision expenses only
- Can be paired with your HSA
- Carryover: up to $680 of 2026 funds into 2027; up to $700 of 2027 funds into 2028

Dependent Care FSA

$7,500

Per household

- Day care, preschool and before/after-school care
- Child under 13 or a dependent who can't care for themselves
- Funds available as deducted

Life & AD&D Insurance

Guardian

Protect your family's financial future through Guardian

DG3-PAID • NO COST TO YOU

Basic Life and AD&D

1.5x your annual salary, up to $500,000

- AD&D coverage included
- Accelerated benefit if diagnosed with a terminal illness
- Convert to an individual policy if you leave DG3
- Benefit reduces 35% at age 70 and 50% at age 75

EMPLOYEE-PAID

Voluntary Life and AD&D

Who	Coverage	Guarantee issue
Employee	$10K increments up to $500,000	$200,000
Spouse	$5K increments up to $200,000	$30,000
Child(ren)	$10,000 (birth to age 26)	$10,000

Update your beneficiaries during Open Enrollment or anytime during the year.

Amounts shown are for non-union employees; executive coverage differs. Spouse coverage ends at age 70. Benefits reduce 35% at 70 and 50% at 75.

Voluntary Long-Term Disability

Guardian

Protect your paycheck if you can't work due to a long-term illness or injury

60%

of your salary

Up to $10,000 per month

Day 91

Benefits begin

After a 90-day waiting period

SSNRA

Benefit duration

Up to Social Security normal retirement age

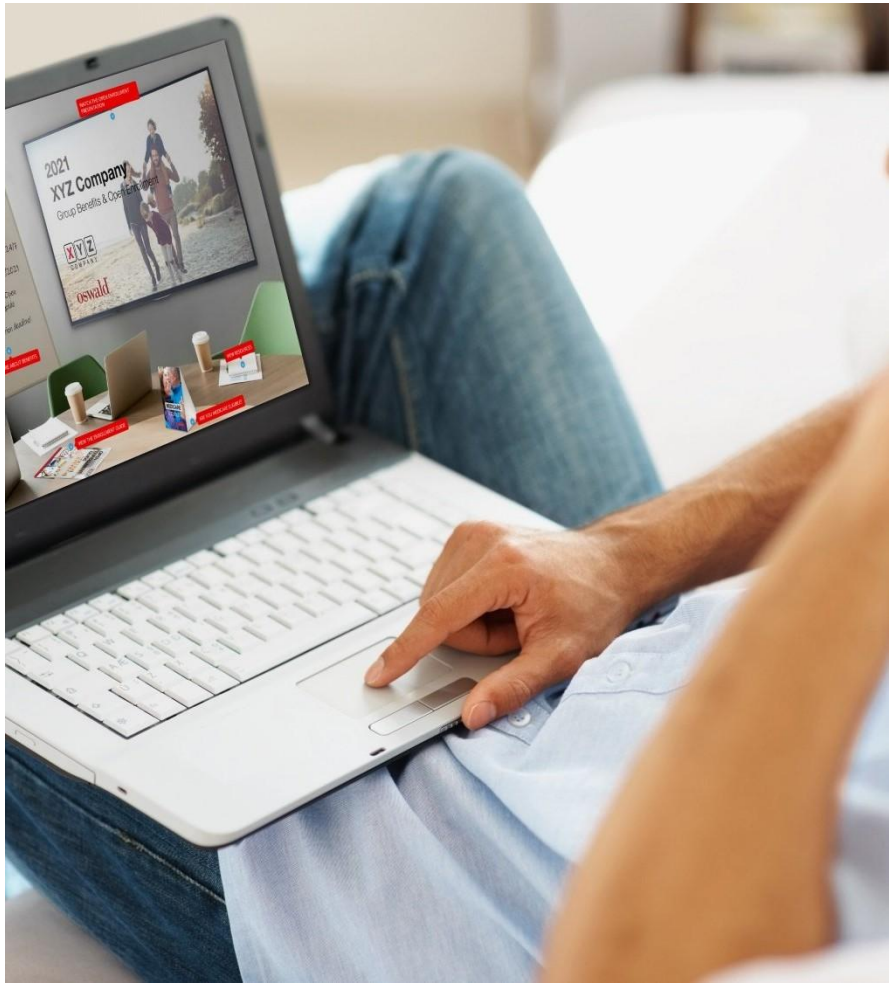
Evidence of Insurability (EOI)

If you previously waived Voluntary Life or LTD and enroll now, or increase your coverage, you'll need to answer health questions. Guardian notifies you and HR of its decision, and premiums begin after approval.

Guardian EAP

Confidential counseling, legal and financial guidance, 24/7.
1-855-239-0743 • guidanceresources.com (web ID: Guardian)

What Do I Need to Do Now?



1 **Review your options**
Visit www.mydg3benefits.com for the benefit guide, plan summaries and videos.

2 **Making changes? Complete an enrollment form**
No changes? No action needed – except for the HSA and FSA.

3 **Re-elect your HSA and FSA contributions**
These elections do not roll over from year to year.

4 **Submit by December 18, 2026**
Open Enrollment runs December 7 – 18. Changes take effect January 1, 2027.

5 **Questions? Call the Benefits Concierge**
216-206-6798 • mybenefits@oswaldccompanies.com

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Questions?

Thank you for attending DG3's 2027 Open Enrollment meeting.

OSWALD BENEFITS CONCIERGE

216-206-6798
mybenefits@oswaldccompanies.com

Open Enrollment ends **December 18, 2026**

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