

Life and disability

Unum provides term life, disability, and other voluntary benefits, to support you and your family during unexpected events (eg., illness, accidents, or death) that can lead to a loss of income.

COMPANY-PROVIDED GROUP LIFE AND AD&D — The company provides you with Term Life Insurance and accidental Death & Dismemberment (AD&D) coverage, each valued at one times your annual base salary (up to \$50K) at no cost to you. AD&D provides additional benefits if you lose your life, sight, hearing, speech, or limbs in an accident. The company also provides you with term life in the amount of \$5K (for your spouse) and \$2.5K (for your dependent children) at no charge. Children under 6 months have a reduced benefit. The benefit for children birth to 14 days is \$1,000, and the benefit for 14 days to 6 months is \$2,000.

VOLUNTARY LIFE INSURANCE — You may purchase additional life insurance for yourself, your spouse and your dependent children. Premiums are paid through post-tax payroll deductions. If you currently have this coverage, you may increase your coverage by up to five increments at open enrollment (subject to guaranteed issue) with no evidence of insurability.

VOLUNTARY LIFE EMPLOYEE — You may purchase life insurance for yourself in increments of \$10K (not to exceed 7x your annual salary) up to \$250K. Evidence of Insurability may be required:

- By electing coverage above the \$150K guaranteed issue
- By electing coverage after waiving
- By electing additional coverage in amounts exceeding \$50K during annual enrollment

VOLUNTARY LIFE SPOUSE — You may purchase life insurance for your spouse in \$10K increments up to of \$150K not to exceed 100% of the employee's benefit. Evidence of Insurability may be required:

- By electing coverage above \$30K
- By electing coverage after waiving

VOLUNTARY LIFE CHILD — You may purchase life insurance for your dependent children up to age 26 (or longer if dependent is disabled) in increments of \$2.5K up to \$10K.

Children under 6 months have a reduced benefit of \$1,000.

Additional benefits

Accident, Critical Illness, and Hospital Indemnity

Accident, critical illness, and hospital indemnity insurance are moving to Unum. If you currently have these coverages with Trustmark, you will receive a letter from Trustmark informing you of your ability to port your coverage. Otherwise, you may enroll in the Unum benefits during the open enrollment period.

Identity Protection & Pet Insurance

Be ready for the unexpected. Schupan offers identity theft protection through Allstate and pet insurance through Nationwide. You can add, change or drop these benefits at any time during the year. For more information visit oneschupan.com.

How to enroll

Instructions for Open Enrollment: 11/06–11/25



Scan to access enrollment material at oneschupan.com

REVIEW YOUR BENEFIT

- Review your current benefit elections
- Consider your 2026 coverage needs
- Schedule a 1:1 meeting if you need assistance — see your manager or email tmr@schupan.com for details.

PREPARE TO ENROLL

- Ensure you have current access to Paycom. If you've forgotten your login credentials, you can find assistance on the login page.
- Gather dependent and beneficiary SSN & DOB information if adding or making changes to your plan.

SELECT YOUR BENEFITS

- Open the Paycom mobile app or log in to Paycom on a computer to enroll in your benefits.
- From the dashboard, navigate to the "Benefits" section and choose "Benefits Enrollment"
- Select "2026 Benefits Enrollment" to get started

Please note: your current benefit elections have been automatically carried over for the 2026 plan year (some exclusions apply*). We've assumed you'd like to keep the same benefits you had in 2025. You can view your current selections at the top of each benefit section and make changes.

*Exclusions: FSA Medical, FSA Dependent Care, Accident, Critical Illness, Hospital Indemnity. To elect you must enroll in these benefits regardless of your 2025 elections.

ADDITIONAL REQUIREMENTS TO COMPLETE ENROLLMENT

- Be sure to complete all required documents in Paycom
- Some benefits require additional steps. Be sure to read the information carefully
- If you are enrolling your spouse in medical, additional documentation may be required.

Here's a checklist of items you may need to review and complete your enrollment. Some documents may be required based on your specific situation

WHAT YOU NEED FOR DEPENDENTS

- Names of all dependents (add/delete)
- Their Date of Birth (DOB)
- Their Social Security Number

DOCUMENTS NEEDED (AS APPLICABLE)

- Privacy Practices
- ERISA Consent Form
- Evidence of Insurability (E of I)
- Spouse Medical Eligibility form and other required documents

You must complete both the required forms in Paycom and additional documentation (based on your selections) prior to the end of the enrollment period.

2026 OPEN ENROLLMENT

PLAN YEAR: JAN. 1, 2026–DEC. 31, 2026



SCHUPAN



Medical

BCBS of Michigan offers preventive care and access to a wide provider network. Visit bcbsm.com or download the BCBSM app for plan info, your ID card, and more. Complete your biometrics/preventive service to SAVE up to \$1,000 annually on your medical premium!

Employee per-pay contributions	Coverage type	With preventive visit credit	With Biometric Credit	With All Credits
Signature HSA Compatible Plan	Employee	\$16.87	\$9.18	\$9.18
	Employee + spouse*	\$44.30	\$36.61	\$36.61
	Employee + child(ren)	\$40.29	\$32.60	\$32.60
	Family*	\$53.31	\$45.62	\$45.62
Traditional Plan	Employee	\$57.19	\$49.50	\$49.50
	Employee + spouse*	\$125.71	\$118.02	\$118.02
	Employee + child(ren)	\$113.38	\$105.69	\$105.69
	Family*	\$151.28	\$143.59	\$143.59
				\$135.89

*Receive an additional \$3.85 off of your premium each week if your spouse completes his/her preventive form

Medical	Signature HSA compatible plan In-network	Traditional plan In-network
Deductible		
Yourself only	\$2,000	\$1,500
Your family	\$4,000	\$3,000
Coinsurance maximum		
Coinurance	20%*	20%*
Yourself only	N/A	\$2,500
Your family	N/A	\$5,000
Out-of-pocket maximum (includes deductible)		
Yourself only	\$5,000	\$8,150
Your family	\$10,000	\$16,300
Office visit		
PCP	20%*	\$30 copay
Specialist	20%*	\$50 copay
Preventive care	100%	100%
Virtual care	\$0 copay	\$0 copay
Emergency room	20%*	\$250 copay
Urgent care	20%*	\$60 copay
Inpatient care	20%*	20%*
Outpatient care	20%*	20%*

*After deductible

Flexible savings accounts

FSAs are a great way to save pre-tax dollars on healthcare and dependent care expenses. **These are use-it-or-lose-it accounts** (based on IRS regulations); meaning you must use all funds during the plan year. Exception: the healthcare FSA has a \$680 annual rollover. Please note the Healthcare FSA is not compatible with the HDHP — see HSA information.

Annual contribution limits (2026)		
Healthcare flexible spending account		\$3,400
Dependent care flexible spending account	\$7,500 filed jointly (\$3,750 if filing separately)*	

Pharmacy

Navitus is your pharmacy benefit manager for 2026. **You will receive a separate ID card for your pharmacy benefits.**

Prescription drugs	Signature HSA Compatible Plan	Traditional Plan
Retail (30-day supply)		
Tier 1 — generics	\$10 copay after ded.	\$10 copay
Tier 2 — preferred	\$40 copay after ded.	\$40 copay
Tier 3 — nonpreferred	\$80 copay after ded.	\$80 copay
Tier 4 — preferred specialty	20% to \$150 max after ded.	20% to \$150 max
Tier 5 — non-preferred specialty	20% to \$250 max after ded.	20% to \$250 max
Mail order (90-day supply)		
	Tiers 1-3 2x 30-day copay after ded.	Tiers 1-3 2x 30-day copay

Note: Prescription drugs — HSA plan has 100% coverage for preventive generics before the deductible applies. The full list is available on oneschupan.com

Dental

Delta Dental offers a wide network of dentists. Oral health is key to overall well-being, helping prevent conditions like heart disease and pneumonia. You can also add your spouse and dependents for a low weekly premium!

Weekly rates	PPO/Premier Network
Yourself only	\$0.00
You + one	\$2.99
You + your family	\$4.99
Is the deductible waived for preventive services?	
Annual plan maximum — per individual (basic and major services only)	\$1,000
Diagnostic and preventive	
Oral exams, X-rays, cleanings, fluoride, space maintainers, sealants	100%
Basic	
Oral surgery, fillings, endodontic treatment, periodontic treatment, repairs of dentures and crowns	80%
Major	
Crowns, jackets, dentures, bridge implants	50%
Orthodontia	
Adults and dependent children	50%
Lifetime orthodontia plan maximum (per individual)	\$1,000

HealthJoy

HealthJoy simplifies your benefit experience and helps you get the most out of your coverage 24/7. **This service is free for you and your dependents!** Just download the HealthJoy app and register! Call 877.500.3212 for assistance.

Vision

EyeMed vision benefits provide you and your dependents with a full-range of coverage beyond your eye exam. You have access to independent providers, top optical retailers, and online options. In addition, Schupan pays 100% of the Core Plan premium for you and your dependents.

Weekly rates	Core	Buy-up
Yourself only	\$0.00	\$1.04
You + one	\$0.00	\$1.98
You + your family	\$0.00	\$2.91

Note: You can elect this vision plan regardless of whether you are enrolled in the medical or dental plan.

Core In-network	Buy-up In-network
Exam	Once per 12 months
Eye exam with dilation as necessary	\$10 copay
Frames	Once per 24 months
Frames	\$120 allowance, 20% off balance over \$120
Standard lenses	Once per 12 months
Single vision	\$25 copay
Bifocal	\$25 copay
Trifocal	\$25 copay
Lenticular	20% off retail
Contact lenses	
Plan allows the member to receive either contacts and frame, or frame and lens services.	
Medically necessary	Covered in full
Elective	\$135 allowance, 15% off balance over \$135
	\$175 allowance, 15% off balance over \$175

Health savings accounts

Manage healthcare spending with an HSA — tax-free contributions roll over yearly and can be used for eligible medical, dental, and vision expenses. Available with the Signature HSA medical plan only. Check IRS guidelines with UMB. **Schupan contributes to your HSA account, based on eligibility and month your account is opened.**

Schupan contribution	Employee only	Employee + family
01/01/2026	\$500	\$1,000
07/01/2026	\$250	\$500
Annual contribution	\$750	\$1,500