Get to Know Your Benefits

DTCC

2026 plan year

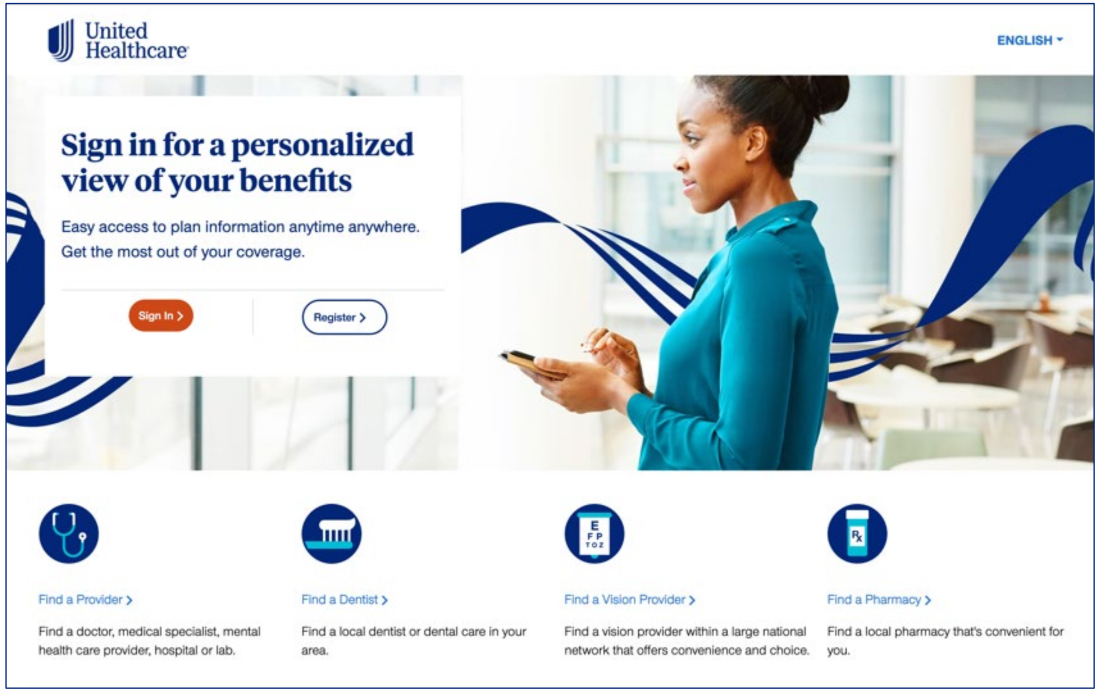
United Healthcare

There for what matters℠

Access your plan easily with myuhc.com

Once you're enrolled, **myuhc.com®** lets you:

- See what's covered
- Find and estimate costs
- Search network providers and pharmacies
- Check on claims and plan balances
- Order prescriptions

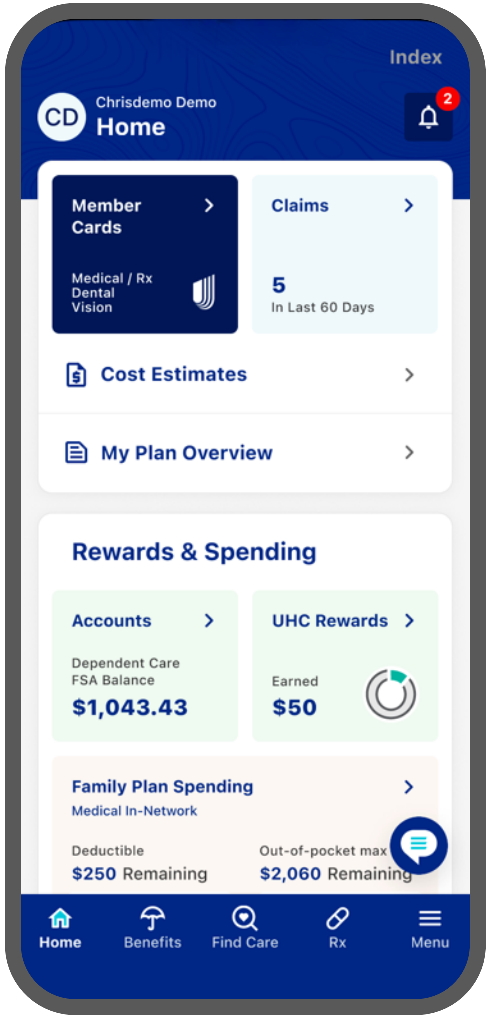


Members can access a cost estimate online or on the mobile app. None of the cost estimates are intended to be a guarantee of your costs or benefits. Your actual costs may vary. When accessing a cost estimate, please refer to the website or mobile application terms of use under Find Care & Costs section.

Know on-the-go with the UnitedHealthcare app

With the **UnitedHealthcare® app**, you'll easily have access to:

- Claim details, benefit info and account balances
- Cost comparisons for up to 4 care providers at a time
- One-click cost estimates for frequently searched services
- Your health plan ID card — and the ability to add your health plan details to your smartphone's digital wallet



Download the app on any device

The UnitedHealthcare® app is available for download for iPhone® or Android®.
iPhone is a registered trademark of Apple, Inc. Android is a registered trademark of Google LLC.

Prioritizing care that helps you stay healthy

Preventive care — like checkups, screenings and immunizations — is 100% covered by most of our plans when you stay in the network.

A preventive care visit may be a good time to:

- Build a relationship with your primary care provider (PCP)
- Find guidance for future medical needs
- Check up on your health when you're symptom-free

For more information, check your plan documents.

Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

Three ways to find a network provider

Once you're a member, you have 3 ways to search:

Look for the
Find a Provider
button on **myuhc.com®**

Call the number on your health plan ID card

Search using the **UnitedHealthcare® app**

Get primary care from virtually anywhere

Virtual primary care lets you reach your primary care provider (PCP) remotely — giving you more ways to access and manage your care.

- Connect with care from home, work or anywhere
- Maintain your PCP and care team relationship with ease
- Get guidance for future care and helpful follow-ups

Virtual primary care is applied to primary care benefits — it is not applied to 24/7 Virtual Visits benefit. Not available with all health plans. Due to physician licensing restrictions, virtual primary care is only available within the member's state of residence. If the member's location is outside of their state of residence, virtual visits for primary care will be provided as a 24/7 Virtual Visit provided by Optum Virtual Care.

Virtual primary care are services available with a provider via video, chat, email, or audio-only where permitted under state law. Virtual primary care services are only available if the provider is licensed in the state that the member is located at the time of the appointment. Virtual primary care is not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times, or in all locations, or for all members. Certain prescriptions may not be available, and other restrictions may apply.

Members covered by HMO plans may have the option to receive virtual care through their Primary Care Provider. Check your benefit plan to determine if virtual care services are covered.

Point of Service Plan (PSP)

- Option to choose a primary care provider (PCP).
- No need to get referrals to see a specialist.
- Preventive care is covered 100 percent in our network.
- There's out-of-network coverage.

If you go out-of-network, your costs may be higher.

Please read your plan documents and check your Summary of Benefits for additional information.

In-Network care costs.		Out-of-Network care costs.	
Copayment		**Copayment**	
PCP		PCP	Plan pays 60% after deductible
Tier 1	$25		
UHC Network	$35		
Specialist		Specialist	
Tier 1	$45		
UHC Network	$55		
Urgent Care	$40	Urgent Care	
Virtual Visit	$30	Virtual Visit	
Deductible		**Deductible**	
Individual	$500	Individual	$5,000
Family	$1,000	Family	$10,000
Coinsurance		**Coinsurance**	
Plan Pays	80%	Plan Pays	60%
You Pay	20%	You Pay	40%
Out-of-pocket limit		**Out-of-pocket limit**	
Individual	$2,700	Individual	$15,000
Family	$5,400	Family	$30,000

Consumer Choice Plan (CCP) with HSA

With the Consumer Choice Plan with HSA, you can use any doctor, clinic, hospital or health care facility. You can save money when you use a health savings account (HSA) and the network.

- **Save money by staying in our network.**
- **There's no need to choose a primary care provider (PCP) or get referrals to see a specialist.** Consider a PCP; they can be helpful in managing your care.
- **Preventive care is covered 100% in our network.**
- **Family Deductible is required if coverage includes a dependent.**

If you go out-of-network, your costs may be higher. Out-of-network providers can even bill you for amounts higher than what your plan will cover. For **COVERAGE DETAILS**, see your official health plan documents.

Paying for in-network care

Deductible	
Self	$1,750
Family	$3,500
Co-insurance	
Tier 1 Provider	15%
UHC Network	20%
Out-of-pocket limit	
Self	$3,500
Family	$6,850

Who is eligible to have an HSA?

- ✔ You must be enrolled in a qualifying high-deductible health plan (HDHP)
- ✘ You cannot be covered by any other health coverage
- ✘ You cannot be enrolled in Medicare, TRICARE or TRICARE for Life
- ✘ You cannot be claimed as a dependent on someone else's tax return

DTCC will contribute
Employee only $500
Family $1000

2026 IRS contribution limits

The IRS limits how much you and your employer can contribute to your HSA each year. The 2026 limits are:

$4,400 for individual coverage	**$8,750** for family coverage	**$1,000** extra if you're 55 years or older

Please read your plan documents. Additional information such as benefit details, plan limitations and exclusions, and the costs of coverage can be found in the Summary of Benefits.

The UnitedHealthcare plan with Health Savings Account (HSA) is a qualifying high deductible health plan (HDHP) that is designed to comply with IRS requirements so eligible enrollees may open a Health Savings Account (HSA) with a bank of their choice or through Optum Bank, Member FDIC. The HSA refers only and specifically to the Health Savings Account that is provided in conjunction with a particular bank, such as Optum Bank, and not to the associated HDHP.

An easier way to manage your HSA

Optum Financial®

- Track your HSA with the Optum Bank® mobile app
- Connect your Google Home or Alexa-enabled device to Optum Financial
- Link your Optum Bank and HSA information at **myuhc.com®**
- Convenient payment options including: Optum Financial® debit Mastercard®, online bill payment and reimbursement
- Contribute by:
  – Payroll deduction
  – Electronic deposits

All trademarks are the property of their respective owners.

Health savings accounts (HSAs) are individual accounts offered by Optum Bank, and are subject to eligibility and restrictions, including but not limited to restrictions on distributions for qualified medical expenses set forth in section 213(d) of the Internal Revenue Code. State taxes may apply. Fees may reduce earnings on account. This communication is not intended as legal or tax advice. Please contact a competent legal or tax professional for personal advice on eligibility, tax treatment and restrictions. Federal and state laws and regulations are subject to change.

CCP with HSA

It's your money
There's no "use it or lose it" rule, and you get to keep it even if you change plans, change employers or retire

Set savings goals
Check with your employer to see if you can set up regular, pretax deposits through payroll deduction

Open your account
Make sure you get the money DTCC is giving you

Qualified expenses:

- Doctor office visits
- Prescriptions
- Eyeglasses and contacts
- Dental care and braces
- Chiropractic services
- And more

Please read your plan documents. Additional information such as benefit details, plan limitations and exclusions, and the costs of coverage can be found in the Summary of Benefits.

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CCP with HSA

Using your HSA to pay for network care

Your deductible	Your coinsurance		Your out-of-pocket limit
Pay with your HSA or another way	Your plan pays 80% (85% if Tier 1 Provider)	+ You pay 20% (15% if Tier 1 Provider)	You are done paying

* Until maximum has been reached.

Please read your plan documents. Additional information such as benefit details, plan limitations and exclusions, and the costs of coverage can be found in the Summary of Benefits.

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FSAs vs. HSA

Use pre-tax money contributed via convenient payroll deductions to pay for eligible expenses!

Health Care FSA	Limited Purpose FSA	HSA
• PSP medical plan or no medical plan • Can be used for eligible health care expenses	• CCP Medical Plan Only • Can be used for dental and vision expenses only	• CCP medical plan only • Can be used for eligible health care expenses
• “Use it or lose it”		• Carries over year to year

• No employer contributions		• Annual employer contributions:
		  • $500 for individual coverage
		  • $1,000 for family coverage

• Contribution limits:
  • Minimum: $100
  • Maximum: $3,050
 	
Grace Period Deadline to use remaining funds: March 15
		• Contribution limits:
		  • Individual: $4,400 ($3,900 employee limit with $500 employer contribution)
		  • Family: $8,750 ($7,750 employee limit with $1,000 employer contribution)
		  • Additional $1,000 if you will be 55+

Health care FSA

Use a health care FSA for medical, dental and vision expenses such as:

- Doctor visits and procedures, including copays, coinsurance and deductibles
- Eyeglasses, contact lenses and vision exams
- Dental treatments, including X-rays, cleanings, fillings and orthodontic treatment
- Covered prescriptions
- Over-the-counter (OTC) supplies and equipment

OTC medications require a valid prescription. Remember to keep your receipts for reimbursement.

For 2026, you can set aside **$3,400**

Flexible spending accounts (FSAs) are administered by UnitedHealthcare and are subject to eligibility and restrictions. A flexible spending account is not insurance. It may also be referred to as a flexible spending arrangement. This communication is not intended as legal or tax advice. Please contact a competent legal or tax professional for personal advice on eligibility, tax treatment, and restrictions. Federal and state laws and regulations are subject to change.

Dependent care FSA

Use a dependent care FSA for:

- Before- and after-school programs, including extended care
- Babysitter expenses
- Childcare, nanny or au pair costs
- Nursery school and preschool
- Adult daycare
- Elder care
- Travel costs to and from eligible care if provided by your care provider

*There is no carryover from year to year.
*Remember to keep your receipts for reimbursement.

Amounts you can set aside for 2026:

$3,750 if married and filing separately

or

$7,500 if a married couple filing jointly or a single parent filing as head of household

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Limited-purpose FSA

You can set aside **$3,400** for 2026 to help pay for eligible dental and vision expenses.

To do so, you:

- Must be enrolled in a high deductible health plan (HDHP) or health savings account (HSA)-eligible plan
- Can only use funds for eligible dental and vision expenses
- May be allowed to use funds for eligible dependent care expenses

*Remember to keep your receipts for reimbursement.

More reasons to enroll in an FSA

- All health care FSA dollars are available the first day of plan year
- Health care FSAs can help pay for hundreds of medical, dental and vision expenses
- The Health Care Spending Card is an easier way to pay
- Claims can be paid automatically from the FSA
- You can submit and pay bills online at **myuhc.com®**
- Get your money faster with direct deposit

Pharmacy and Prescription Benefits

How We Cover Prescriptions

- OptumRx® is your pharmacy benefits provider
- Medications are placed into tiers that represent the cost you pay out of pocket

PLAN	TIER 1	TIER 2	TIER 3
Point of Service Plan (PSP) **Plan pays 80%, No Deductible**	• Lower-cost medications • Highest overall value • Mostly generics	• Mid-range cost • Good overall value • Mix of brands and generics	• Higher-cost medications • Lowest overall value • Mostly brands
Consumer Choice Plan (CCP) **Plan pays 80% After Deductible**	**Generic Medications** **Retail**: 30 day supply $10 Minimum $25 Maximum **Mail order:** 90 day supply $20 Minimum $50 Maximum	**Brand (no generic available)** **Retail**: 30 day supply $25 Minimum $50 Maximum **Mail order:** 90 day supply $50 Minimum $100 Maximum	**Brand (generic available)** **Retail**: 30 day supply $50 Minimum $100 Maximum **Mail order**: 90 day supply $100 Minimum $200 Maximum

Discover the advantages of home delivery

Get no-cost standard shipping

Receive a 3-month supply of a maintenance medication

Save on medication costs

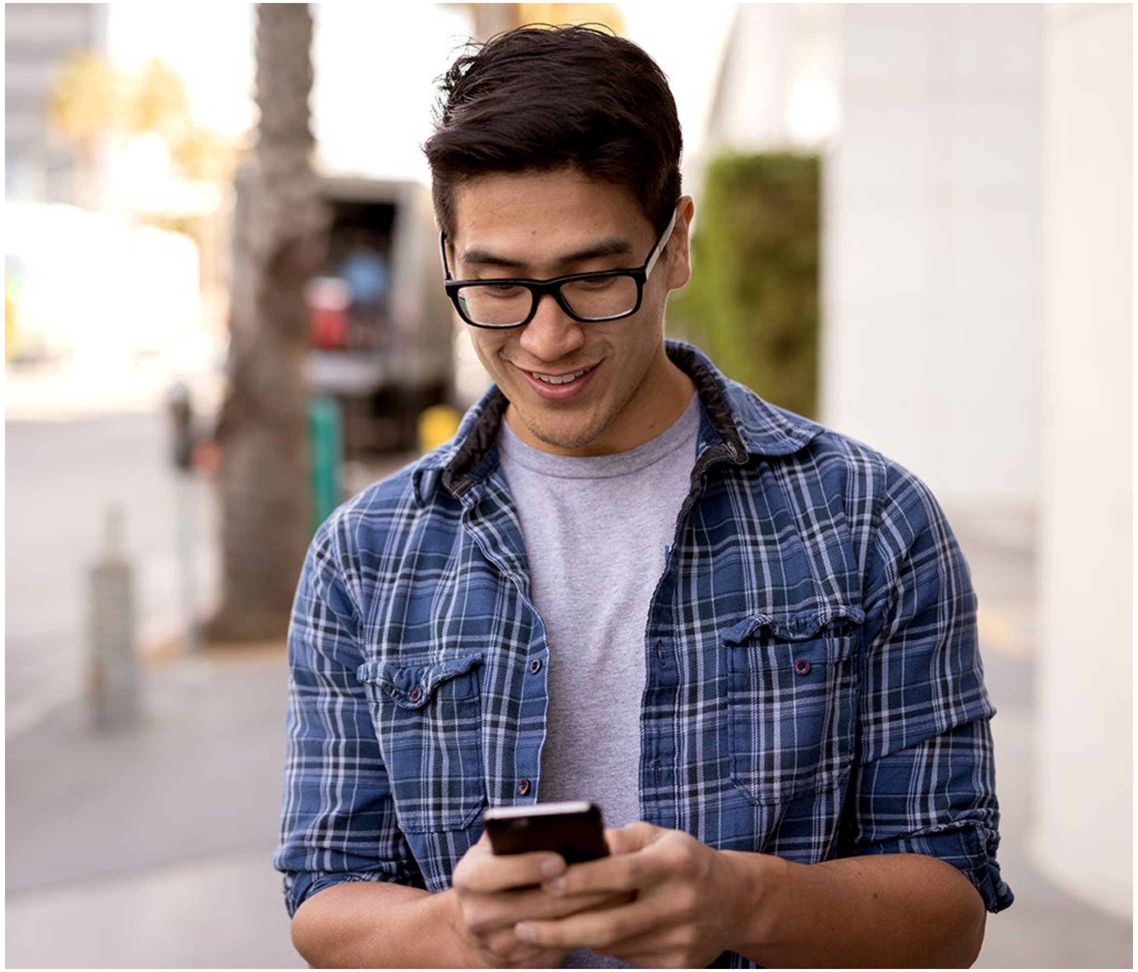
Set up refill reminders

Access a pharmacist 24/7 for questions about medications

Manage your pharmacy benefits on the go

Through **myuhc.com®** and the **UnitedHealthcare® app**, you can:

- Enroll in home delivery
- Find network pharmacies
- Refill prescriptions and set up reminders
- Estimate and compare medication costs
- Confirm medication coverage and find cost-saving options



Which Plan is Right For You?

Consider these questions:

- Do you see the doctor often? Or do you usually only go for your annual physical and an occasional sick visit?
- Are you comfortable with a potential high out of pocket expense if you use medical services? Or would you prefer paying more for premiums so that you only need to pay a co-pay and meet a lower in-network deductible if you incur medical expenses?

Point of Service Plan (PSP)	Consumer Choice Plan (CCP)
Eligible for Health Care FSA	Eligible for HSA with employer contribution + Limited Purpose FSA
Lower in-network deductible	Higher in-network deductible
Higher payroll deductions	Lower payroll deductions

Both plans cover preventive care visits at 100%

Health and Wellness

Benefits powered by care

The Employee Assistance Program (EAP)

Someone you can talk to, 24/7

Connect to caring, confidential support anytime to help you:

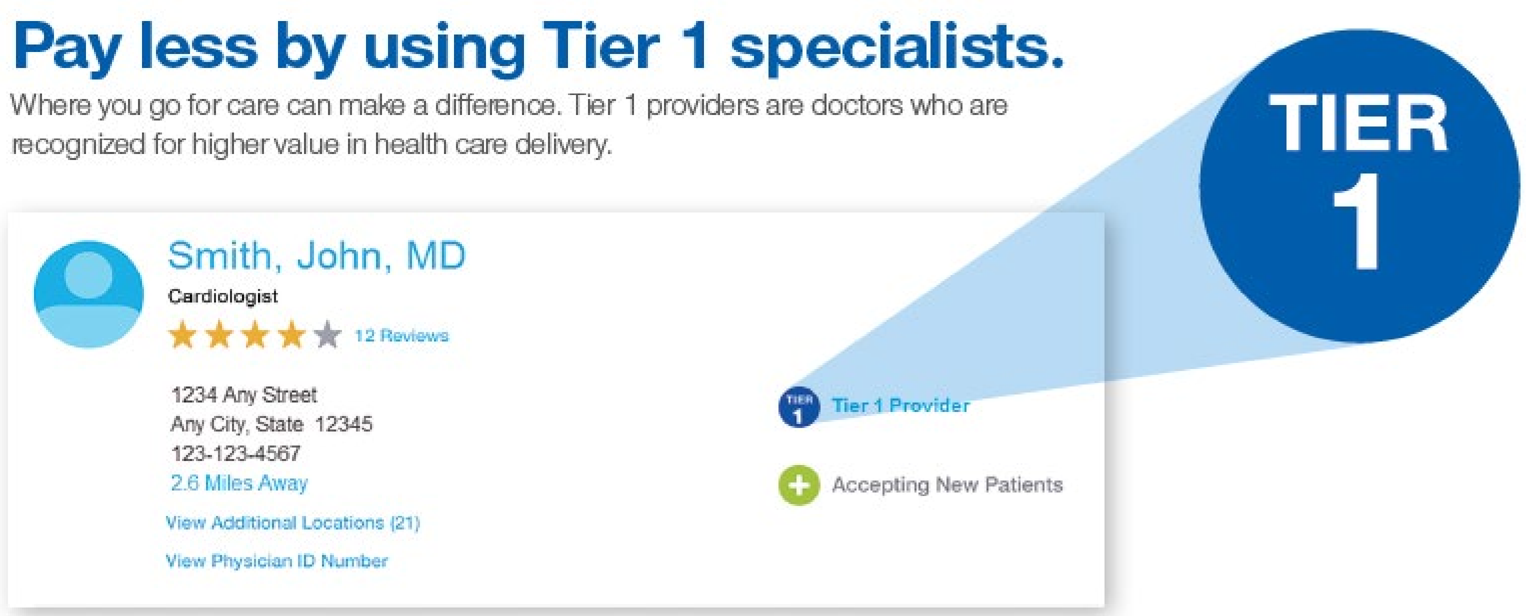
- Improve relationships
- Find support for child and elder care
- Seek recovery for substance use issues

Learn more at **uhc.com/eap** or call the member phone number on your health plan ID card

The material provided through the Employee Assistance Program (EAP) is for informational purposes only. EAP staff cannot diagnose problems or suggest treatment. EAP is not a substitute for your doctor's care. Employees are encouraged to discuss with their doctor how the information provided may be right for them. Your health information is kept confidential in accordance with the law. EAP is not an insurance program and may be discontinued at any time. Due to the potential for a conflict of interest, legal consultation will not be provided on issues that may involve legal action against UnitedHealthcare or its affiliates, or any entity through which the caller is receiving these services directly or indirectly (e.g., employer or health plan). This program and its components may not be available in all states or for all group sizes and is subject to change. Coverage exclusions and limitations may apply.

Choose smart. Look for Tier 1 doctors first

- ❖Check for the Tier 1 symbol when searching for a doctor/specialist on myuhc.com or the Health4Me app.
  - ❖Your doctor's Tier status may change at the end of the calendar year. Verify their status before you schedule your next appointment!



Quit For Life

Tools and coaching to help you kick tobacco for good

- Live Tobacco-Free course and Quit For Life® app
- Personalized action plan from your Quit Coach®
- 24/7 urge management support
- Text2Quit® encouragement texts

The Quit For Life Program provides information regarding tobacco cessation methods and related well-being support. Any health information provided by you is kept confidential in accordance with the law. The Quit For Life Program does not provide clinical treatment or medical services and should not be considered a substitute for your doctor's care. Please discuss with your doctor how the information provided is right for you. Participation in this program is voluntary. If you have specific health care needs or questions, consult an appropriate health care professional. This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room.

Real Appeal

Healthier habits for a healthier you

Our proven online weight management support program offers:

- **Online coaching** – Encouragement to help create healthy, lasting change
- **Success Kit** – Scales, recipes and fitness equipment delivered to your door
- **Motivational resources** – Set achievable nutrition, exercise and weight management goals

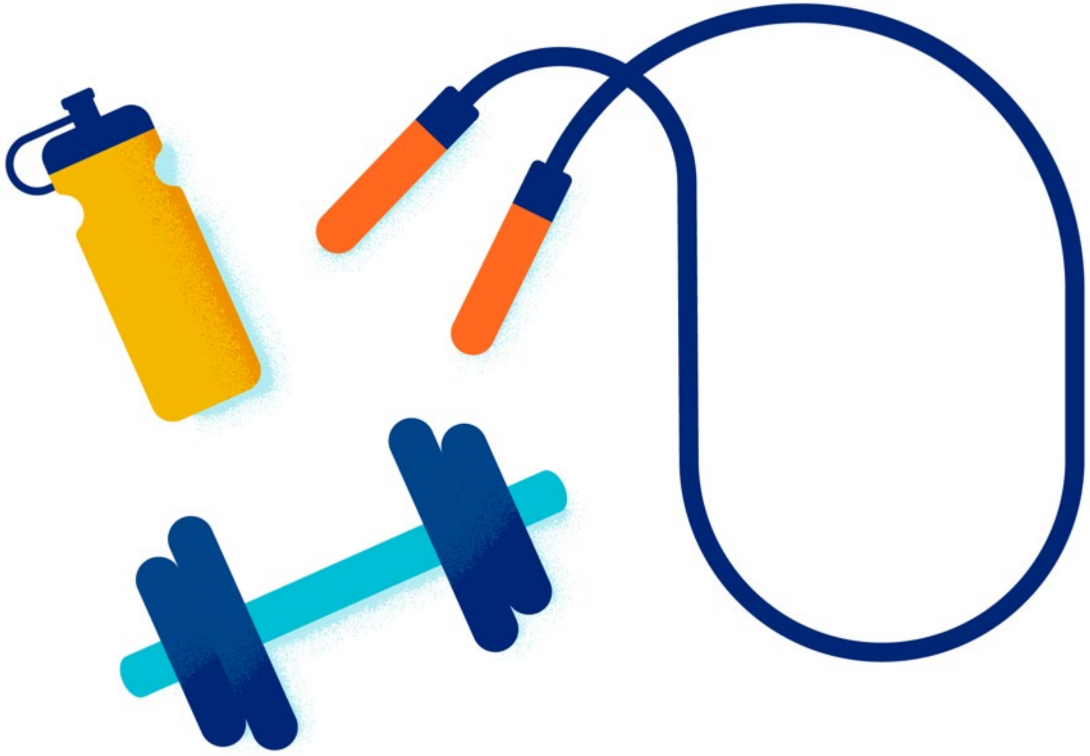
Real Appeal is a voluntary weight management program that is offered to eligible members at no additional cost as part of their benefit plan. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them. Results, if any, may vary. Any items/tools that are provided may be taxable and participants should consult an appropriate tax professional to determine any tax obligations they may have from receiving items/tools under the program.

One Pass Select

Flexible fitness options starting at less than $1 per day

One Pass Select® is designed to help make fitness fun, with:

- 5 membership tiers to fit your lifestyle — with the option to change tiers or cancel monthly
- Access to a large gym network — any location in your membership tier
- Add unlimited friends and family members (18+) to an existing account



One Pass Select is a voluntary program. For fully insured participants (not available in HI, KS, VT and Puerto Rico) it features a subscription-based nationwide gym network and digital fitness. For self-funded participants nationally, it features 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 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. One Pass Select is a program offered by Optum. Subscription costs are payable to Optum.

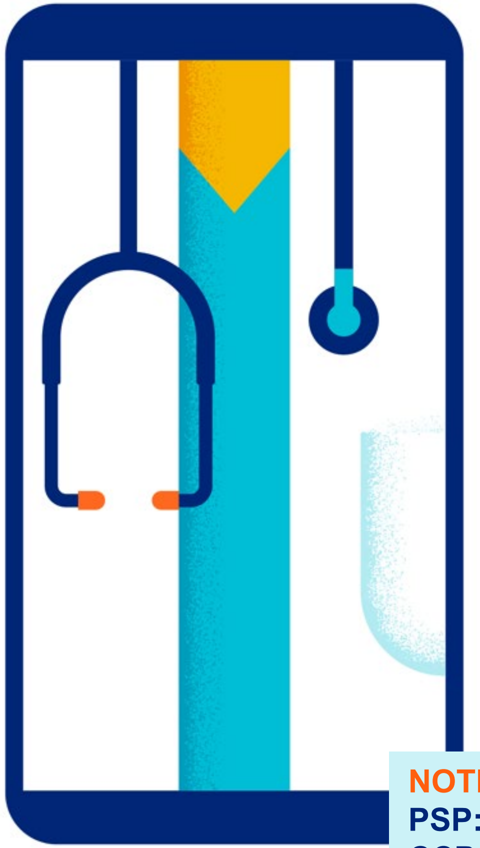
24/7 Virtual Visits

Quality care from anywhere

Choosing to see a provider by phone or video* may save you the time and cost** of a visit to the emergency room or urgent care.

Get virtual help for common concerns like:

- Cough
- Headache
- Sore throat
- Prescription needs***



Average cost is less than $54**

NOTE: There is a cost for this service
PSP: $30 copay
CCP: Plan pays 80% after deductible

*Data rates may apply. **The Designated Virtual Visit Provider's reduced rate for a 24/7 Virtual Visit is subject to change. ***Certain prescriptions may not be available and other restrictions may apply.

24/7 Virtual Visits is a service available with a Designated Virtual Network Provider via video, or audio-only where permitted under state law. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times, or in all locations, or for all members. Check your benefit plan to determine if these services are available.

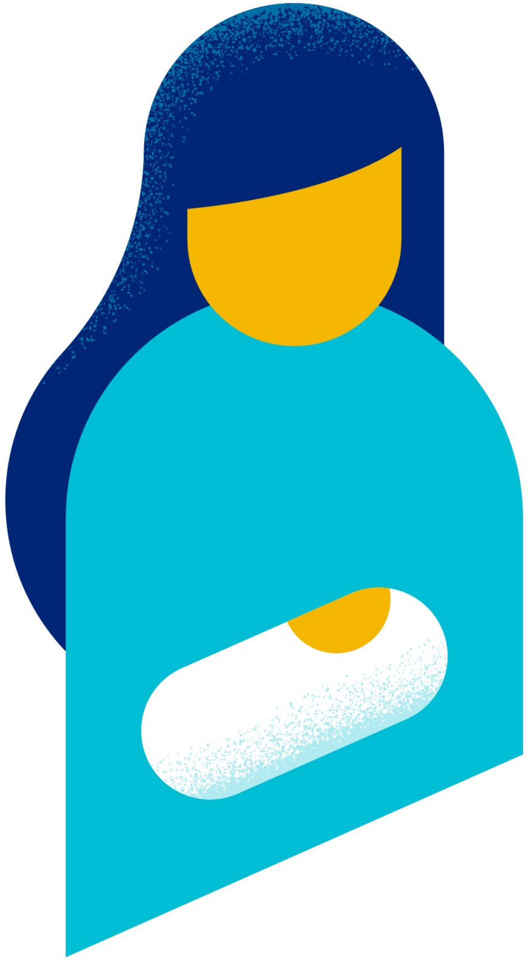
Maven

Virtual maternity support for precious deliveries

Maven provides a bundle of resources and 24/7 virtual support throughout pregnancy and postpartum — and it's included in your plan at no additional cost.

With Maven, you can:

- Book virtual appointments
- Message with specialty providers
- Join groups or on-demand classes
- Read articles and resources



level2

Do type 2 differently.

When you choose to improve your type 2 diabetes instead of just manage your condition you can work to feel better. You can do it and Level2 is here to help.

Here's what members experience with **Level2** Specialty Care:

Insights

With a continuous glucose monitor members see and understand glucose changes.

Care Team

Access to a virtual care team of type 2 diabetes experts helps members build new habits.

Level2 Method

An evidence-based approach to help members work to improve their glucose control.

Access to Level2 is **included** in your health plan at **no additional cost**.

Included with select UHC health plans

Learn more and join at
mylevel2.com/care

or talk to an expert at
1-844-302-2821 (TTY 711)

Calm Health

Mental health support at your pace

Designed to help you find your path to a happier, healthier you, the Calm Health app provides plans to help support your mental and physical well-being. The app is self-guided, so you can go at your own pace and work toward goals such as:

- Better sleep
- Building skills to manage stress
- Developing resiliency
- Starting and building a mindfulness habit

Calm Health is not intended to diagnose or treat depression, anxiety, or any other disease or condition. The use of Calm Health is not a substitute for care by a physician or other health care provider. Any questions that you may have regarding the diagnosis, care, or treatment of a medical condition should be directed to your physician or health care provider. Calm Health is a mental wellness product.

Calm Health is not available to UnitedHealthcare E&I Fully insured customers/members in District of Columbia, Maryland, New York, Pennsylvania, Virginia, West Virginia until a later date due to regulatory filings.

Other UHC Services

Cancer Resource Services	• Personal support from an experienced cancer nurse. • Help understand your diagnosis. • Information to help you make decisions about your care.	
Transplant Resource Services Program	• Get connected to transplant Centers of Excellence. • Experienced nurses work with you and your doctors throughout your care.	
Maven Maven provides a bundle of resources and 24/7 virtual support throughout pregnancy and postpartum — and it's included in your plan at no additional cost.	• Book virtual appointments • Message with specialty providers • Join groups or on-demand classes • Read articles and resources	
Bariatric Resource Services Program	• Get education and support before and after weight-loss surgery. • Our nurse care managers will be there to help you along the way.	