

2026 Annual Benefits Enrollment

Questions & Answers

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Introducing your 2026 benefits

We recognize that everyone is unique. That’s why we offer a range of benefits designed to prioritize you and your family’s health, well-being, and financial security. Annual enrollment for 2026 benefits is October 23 through November 7—please review your benefit options and make any updates to your elections during this time.

To get you started, we’re providing these Questions and Answers to help you understand what’s changing in 2026 and other enrollment details. You can find additional information in your Benefits Decision Guide at mytabenefits.com.

What’s changing for 2026?

Q1. What’s changing with my health and welfare benefit options for 2026?

A1. You will still have access to a comprehensive suite of benefits for 2026. Here’s what’s changing:

- **Discontinuing the \$3,300 Deductible Plan:** IRS requirements have led to annual increases in the deductible for this plan. With continued changes expected, we are removing this option from our medical offerings. If you’re currently enrolled in the \$3,300 Deductible Plan, you’ll receive a follow-up message with more information. In the meantime, you can [learn more](#) about your options.
- **Medical carrier change in select states:** In an effort to provide the best coverage at the most competitive cost, we’re switching medical carriers in Arizona, Colorado, Connecticut and New York. If you live in one of these states, you’ll move from Wellmark Blue Cross Blue Shield to United Healthcare effective Jan. 1, 2026.
 - o [Click here](#) for instructions on how to check if your provider is in-network.

For help understanding how the different deductible plans work and finding a new provider, contact [TouchCare](#) at 866-486-8242.

- **Contribution limits for tax-advantaged accounts:**
 - o Health Savings Account (HSA):
 - \$4,400 for individuals
 - \$8,750 for families

- If you're 55 or older, you can contribute an additional \$1,000.
- Health Care Flexible Spending Account (FSA): \$3,300 maximum contribution
- Dependent Care FSA: \$7,500 maximum contribution
- **Your cost of coverage:** There will be a slight increase in medical plan premiums for 2026 due to rising health care costs. [See your 2026 rates](#). Transamerica continues to pay the majority of your medical coverage costs to ensure you have access to quality care.

Q2. What happens if I'm currently enrolled in the \$3,300 Deductible Plan?

A2. If you're currently enrolled in the \$3,300 Deductible Plan, you can choose another medical plan during enrollment, including the \$4,500 Deductible Plan, the \$1,850 Deductible Plan or the \$900 Deductible Plan. [Learn more about your medical plans](#).

If you're currently enrolled in the \$3,300 Deductible Plan **and you do not take action** between October 23 and November 7, 2025, you and your covered dependents will automatically be enrolled in the following plan for 2026:

- **For Wellmark Blue Cross Blue Shield (BCBS) or United Healthcare (UHC):** The \$4,500 Deductible Plan (with a \$9,000 family deductible).
- **For Kaiser:** The \$1,850 Deductible Plan (with a \$3,700 family deductible). *(Kaiser does not offer the \$4,500 Deductible Plan.)*

Q3. Is the cost of employee coverage increasing?

A3. Due rising health care costs, you'll see an increase in the amount you pay for medical coverage. We're doing everything we can to keep what you pay as low as possible, and Transamerica continues to pay the majority of the cost for your medical coverage. [See your 2026 rates](#).

General

Q4. Where can I learn about my health and welfare benefit options for 2026?

A4. Education and resources are available to help you understand your options and the enrollment process.

- **2026 online Benefits Decision Guide** – You should refer to this online guide to get a detailed view of your benefits and the enrollment process. The guide is available at mytabenefits.com. You can view the site from work or from home with no login required.
- **TouchCare** – You can schedule a **free** consultation with an Open Enrollment Specialist (866-486-8242) to discuss your 2026 benefit options. [Learn more about this free benefit](#).

Q5. Who are the medical plan carriers?

A5. You will have either Wellmark Blue Cross Blue Shield or United Healthcare as your medical plan carrier, based on the state where you live. Some states will have additional network options. [Click here](#) for a list of medical plan carrier(s) by state.

Keep in mind: If you live in Arizona, Colorado, Connecticut or New York, your medical plan carrier will change from Wellmark to United Healthcare (UHC) effective January 1, 2026. If you live in Colorado and have Kaiser coverage, you will continue to have coverage through Kaiser unless you elect UHC coverage during annual enrollment.

Q6. Where can I find my benefit costs for 2026?

A6. The online Benefits Decision Guide at mytabenefits.com has everything you need to know about your benefits, including the 2026 premiums for medical, dental and vision coverages. On the homepage, click

the “Your 2026 rates” tile. You’ll also see full coverage details and premiums on the Aptia365 website during Annual Benefits Enrollment.

Q7. Will I receive new medical plan ID cards?

A7. If your medical plan election is staying the same in 2026, you will **not** receive a new ID card. If you change to a different deductible, medical plan carrier or add new dependents, you will receive updated cards.

Q8. Will I receive a new debit card for my HSA or FSA?

A8. You will only receive a new debit card if you were not previously enrolled in an HSA, FSA or the Commuter Benefits Program with Transamerica.

Enrollment

Q9. When is Annual Benefits Enrollment?

A9. This year’s Annual Benefits Enrollment begins **Thursday, October 23** and continues through **Friday, November 7, 2025**.

Q10. How do I enroll?

A10. You will enroll on the Aptia365 website.

Enter benefits.transamerica.com in your browser window.

- If you are connected to the network, it won’t be necessary to enter additional credentials.
- If you’re not connected to the network, you’ll need to enter your network username, password and domain. Most employees will enter “US” as the domain (Corporate Center will use “DS”).

Important:

Once you’ve finished enrolling, make sure to save a copy of your benefit summary for your records. Review your benefit summary carefully to ensure your elections are what you intended, and any dependents are listed with applicable coverage. You will not be able to make any changes or add/remove dependents after the annual enrollment period ends on Friday, November 7.

Q11. What happens if I don’t enroll?

A11. Most of your current benefits will automatically carry over for 2026 with the exception of the Health Savings Account (HSA) and Flexible Spending Accounts (FSAs). Here are some things to keep in mind:

- If you have a high-deductible health plan, you may wish to elect an HSA. To receive Reward Dollars for wellness activities, you must elect an HSA—even if you choose not to contribute (you can make a \$0 election).
- If you want an FSA in 2026, you must elect one and set your contribution amounts during annual enrollment.
- **If you’re currently enrolled in the \$3,300 Deductible Plan and you do not make an election during Annual Benefits Enrollment, you and your covered dependents will automatically be enrolled in the following plan for 2026:**
 - **For Wellmark Blue Cross Blue Shield (BCBS) or United Healthcare (UHC):** The \$4,500 Deductible Plan (with a \$9,000 family deductible).
 - **For Kaiser:** The \$1,850 Deductible Plan (with a \$3,700 family deductible). (Kaiser does not offer the \$4,500 Deductible Plan.)

If you want to make any changes to your current benefit elections—including adding or dropping benefits or electing an HSA or FSA—you must make these elections between **October 23 and November 7, 2025**.

Even if you don't plan to make changes to your medical benefits, it's still a good idea to review your elections, confirm your dependent(s) coverage, check that your providers are in-network, and make sure your beneficiary information is up to date.

Q12. Will I need to verify my dependents?

A12. If you add a new dependent to your medical, dental or vision benefits, you will need to submit dependent verification to Aptia. You must submit verification within 31 days from the date you submit your elections, or your dependents will be removed from benefits.

Q13. Should I review my beneficiaries each year?

A13. You should review your primary and contingent beneficiary elections regularly, and annual benefits enrollment is a good time to do this. Find your elections on the Aptia365 website at benefits.transamerica.com.

Q14. What are the differences between an HSA and FSA?

A14. HSAs are savings accounts that you can contribute to if you elect a high-deductible health plan, either the \$1,850 Deductible Plan or the \$4,500 Deductible Plan. FSAs are spending accounts that will only allow you to carry over a certain amount (if any) each year. Each of these accounts have different eligibility requirements. [Learn more here](#).

Q15. What if I enroll on the Aptia365 site and need to make a change to my elections before November 7?

A15. You can return to the site and make changes to your elections any time up until 11:59 p.m. ET on Friday, November 7.

Q16. What if I need to make changes to my 2026 elections after November 7?

A16. No changes will be allowed after the November 7 enrollment deadline unless you experience a qualifying life event. **Please review your elections carefully.** It's a good idea to ensure your dependents have the coverage you intended as they cannot be added or removed after enrollment ends.

Q17. What if I have a qualifying life event?

A17. If you have a qualifying life event (i.e., you have a baby or get married) either later in 2025 or in 2026, you can make changes to your benefit elections at benefits.transamerica.com. Remember, benefit changes must be submitted within 30 days of qualifying life events.

Questions

If you have additional questions, please contact the Aptia dedicated Transamerica Benefits Center at 866-891-4274. Benefits counselors are available from 6 a.m. to 8 p.m. CT Monday through Friday. During Annual Benefits Enrollment, extended hours will be available on Saturdays from 9 a.m. to 1 p.m. CT.

The information is intended to provide highlights for 2026 Annual Benefits Enrollment. In the event of any conflict or inconsistency between this information and the actual Plan documents, the provisions of the Plan documents, including applicable insurance contracts, will govern. The receipt of this information does not entitle you to benefits under the Plan. In order to be entitled to benefits, you must meet all of the applicable eligibility requirements.