



2026 OPEN ENROLLMENT

ELMET
TECHNOLOGIES



2026 CHANGES

- **Slight increase to Medical Premiums: +2.0%**
- **Prescription generic co-pays are reducing from \$10 to \$5 (PPO Plans)**
- **All members will receive new medical ID cards for 2026.**
 - **Provide these to providers/pharmacies at your first 2026 visit.**
- **No Increase to Dental Premiums**
- **Moderate Increase to Vision Premiums: +7%**
- **Switching carriers for Critical Illness & Accident offerings from Chubb to Voya**
- **New program offering: Hospital Indemnity**

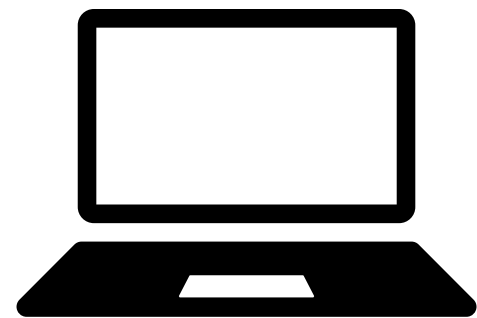
OPEN ENROLLMENT

November 3rd – November 17th, 2025

ELMET
TECHNOLOGIES



**benefits
service center**
powered by totam



ONLINE:

www.elmetbenefits.com



PHONE:

866-833-8915

Mon – Thurs: 8am – 6pm ET

Fri: 8am – 5pm ET

Active enrollment not required, except for Flexible Spending Account (FSA)

Benefits Website: www.elmetbenefits.com

Email: questions@elmetbenefits.com

2026 BENEFITS OVERVIEW

2026 Benefits		
Medical (including Rx)	+	Elmet technologies is offering 3 medical plans for the 2026 Plan Year: PPO Gold Plan, PPO Silver Plan, and HSA Plan
Pharmacy (Rx)	+	HPI Medical plan participants: Elmet's pharmacy benefits manager is Fairos Rx . Mail-order prescriptions are managed by Welldyne Mail Order .
Dental	+	Coverage is available for dental exams, cleanings, and restorative care.
Vision	+	Coverage is available for exams and corrective eyewear (contacts/glasses).
Basic Life Insurance	Employer Paid Benefits	All employees receive FREE term life insurance (1.5x Basic Annual Salary).
Short Term Disability		Up to 25 weeks of income replacement for accident or illness.
Long Term Disability		Income replacement from Day 181 to Normal Social Security Retirement Age.
Voluntary Life Insurance	+	Voluntary life insurance is available to employees, spouses, and children.
Critical Illness	+	Cash benefits in the event of a diagnosis of a covered illness.
Accident	+	Cash benefits in the event of an accidental injury.
Hospital Indemnity	+	Cash benefits in the event of a hospitalization.
Site Specific Benefits	+	See local site HR for additional information regarding these benefits.

2026 MEDICAL PLANS



	HSA Plan	PPO Silver	PPO Gold
	In-Network	In-Network	In-Network
Employer HSA Contribution	\$500	N/A	N/A
Plan Structure			
Deductible*	Individual: \$2,700 Family: \$5,600	Individual: \$1,250 Family: \$2,500	Individual: \$500 Family: \$1,000
Embedded Deductible	No	\$1,250	\$500
Coinsurance (member pays)	25%	20%	20%
Out-of-Pocket Max (OOPM)*	Individual: \$5,600 Family: \$11,000	Individual: \$5,000 Family: \$10,000	Individual: \$3,500 Family: \$7,000
Embedded MOOP	\$5,600	\$5,000	\$3,500
MOOP Combined (Med and Rx)	Yes	Deductible does not apply to Rx	Deductible does not apply to Rx

Retirement Planning: For those nearing retirement or considering Medicare, it's essential to evaluate how each plan aligns with future healthcare needs. It's important to note that all contributions to an HSA must cease six months before enrolling in Medicare if the individual is Medicare-eligible during that period. Contributions made prior to turning 65 do not affect this requirement.

2026 MEDICAL PLANS

Medical Services	HSA Plan	PPO Silver	PPO Gold
Primary Care Provider (PCP) Office Visit	deductible, then 25%	\$25 copay	\$25 copay
Specialist Office Visit	deductible, then 25%	\$60 copay	\$50 copay
Chiropractic Visit (40 visit limit)	deductible, then 25%	\$30 Copay	\$25 Copay
Outpatient Therapies PT/OT/ST/SN (60 combined visit limit)	deductible, then 25%	Outpatient: \$30 Copay Inpatient: deductible, then 20%	Outpatient: \$25 Copay Inpatient: deductible, then 20%
Diagnostic Testing			
Diagnostic Lab Test / X-ray	deductible, then 25%	\$50 copay	\$50 copay
Advanced Imaging MRI, MRA, CAT & PET Scans	deductible, then 25%	deductible, then 20%	deductible, then 20%
Outpatient Surgery			
Facility Fee	deductible, then 25%	deductible, then 20%	deductible, then 20%
Physician Fees and Anesthesia	deductible, then 25%	deductible, then 20%	deductible, then 20%
In-patient Surgery			
Facility Fee	deductible, then 25%	deductible, then 20%	deductible, then 20%
Physician Fees and Anesthesia	deductible, then 25%	deductible, then 20%	deductible, then 20%
Emergency Care			
Emergency Room	deductible, then 25%	\$500 copay, waive if admitted	\$500 copay, waive if admitted
Ambulance	deductible, then 25%	\$150 copay	\$150 copay
Urgent Care	deductible, then 25%	\$45 copay	\$35 copay

Retirement Planning: For those nearing retirement or considering Medicare, it's essential to evaluate how each plan aligns with future healthcare needs. It's important to note that all contributions to an HSA must cease six months before enrolling in Medicare if the individual is Medicare-eligible during that period. Contributions made prior to turning 65 do not affect this requirement.

Understanding Coordination of Benefits and Duplicate Medical Coverage

If you are enrolled in two medical plans, such as coverage through your spouse's medical plan, as well as coverage through an Elmet medical plan, it's essential to understand how they work together. This is known as **Coordination of Benefits (COB)**. While having two plans may seem like an advantage, it does not guarantee that all medical expenses will be covered at 100%. In fact, in most cases, **the costs associated with being enrolled in two plans often outweigh the benefits.**

Key Points:

- **How COB Works:** Both plans will share responsibility for your claims, but the total benefits paid will not exceed your **Eligible Charges**. This means any deductibles, copays, or coinsurance will likely still apply under both plans.
- **Determining Payment Order:**
 - The plan covering you as an employee will pay first. If you're covered as a dependent on another plan, that plan pays second.
 - For dependent children, the "birthday rule" applies, meaning the plan of the parent whose birthday falls earlier in the year pays first.
 - Other rules apply if you are covered under COBRA, are retired, or are part of a separated/divorced family structure.
- **Member Cost Shares:** Even with two plans, you may still have to pay deductibles and other cost shares under both. Coordination of benefits does not eliminate these costs.

Should You Enroll in Two Plans?

In most situations, the financial benefits of double coverage are minimal compared to the additional costs you may incur. It's important to weigh the pros and cons before deciding to enroll in two plans.

Reference Your Plan Documents:

For specific details on how your benefits are coordinated, please refer to both the **Elmet HPI Medical Plan SPD** and **the SPD or Certificate of your other medical plan**. Each plan's rules may vary, and this general overview is not a guarantee of benefits.

Tobacco Surcharge and Attestation

Elmet is committed to promoting the health and well-being of all employees. As part of this commitment, a **tobacco surcharge** will apply to all employees who use any form of tobacco or nicotine products. This includes, but is not limited to:

- Cigarettes
- Cigars
- Pipes
- Chewing tobacco
- Snuff
- E-cigarettes or vaping devices
- Any other forms of tobacco or nicotine use, regardless of the delivery method

Employees are required to truthfully attest to their tobacco or nicotine use during the benefits enrollment process. **False attestation** of tobacco or nicotine use may result in disciplinary action, up to and including termination of employment.

Elmet encourages employees to take advantage of the free tobacco cessation program offered through HPI's Achieve Health Program. This program is available to all employees who wish to quit using tobacco or nicotine products and avoid the surcharge.

Tobacco Cessation Program

A tobacco-free life is within reach

Your health goals are unique to you, your tobacco cessation program should be, too. With AchieveHealth, you'll get a coaching approach tailored to you, your life and your health—to help you quit smoking, for good.

The program is:

- Free to you
- Individualized
- Convenient—you'll talk with your coach over the phone when it works best for you.

How we can help

Together, you and your health coach will:

- Create your customized quit plan
- Identify barriers to quitting
- Explore new ways to cope with triggers and cravings

How it works

- Appointments range from 15–30 minutes.
- Your coach will call you at your scheduled appointment time, anytime Monday – Thursday 8:00am to 10:00pm (EST) and Friday 8:00am to 6:00pm (EST).
- Outside of scheduled appointments, you'll be able to contact your coach through a toll-free number.
- Complete a minimum of 6 conveniently scheduled, telephonic coaching sessions to qualify for a premium reduction.

Not quite ready to quit?

That's okay. Give us a call and we'll talk about quitting when and how it works best for you.

We'll be here for you every step of the way along your journey to quit. Give us a call at 866-234-4635 to get started.

Healthcare Excellence Hubs

Pay nothing out of pocket for high-quality care

Ensuring you receive the best possible care is vitally important. Elmet Technologies will waive your Deductible and Out-of-Pocket costs if you get eligible care at one of our Centers of Excellence hospitals or providers.

Here's How:

- **Before you receive care, call Pathways at 888-340-5487 or email them at PathwaysConcierge@urmedwatch.com to see if your care is eligible for this benefit.**
- **Work with a dedicated concierge nurse to coordinate your care at one of these top-quality facilities.**
- **Receive your eligible covered services and pay nothing out of pocket, including your entire deductible.**

Note: If you are enrolled in the HSA Medical Plan, you will need to satisfy the IRS-required minimum deductible before you are eligible to receive free care.

Participating facilities include:

- New England: Beth Israel Deaconess, Boston Children's Hospital, Brigham and Women's, Dana Farber Cancer Institute, Lahey Clinic, Mass Eye and Ear, New England Baptist Hospital, New England Medical Center, Tufts New England
- Ohio: Cleveland Clinic
- Michigan: University of Michigan Health

Don't let distance stop you from receiving the best care! If you live more than 50 miles from a participating provider, Elmet covers you with a travel benefit that includes most, if not all, of your travel expenses.

HPI ONLINE ACCESS: MY PLAN

With HPI's My Plan Portal, you can access your Medical ID Card online and manage your account 24/7

Access all of your account details in one secure location, anytime, anywhere!

- Review your claims
- Check your benefits
- Access your prescription drug plan
- Search your provider network
- Download a report of your claims
- Request claim reimbursements
- View, print or order your member ID card
- View or print applicable tax forms
- Find a Primary Care Provider (PCP)

Register in Minutes!

- Go to the **hpiTPA.com**
- Visit the Members section and click the link to Get Registered
- Enter your information to create your username and password

If you are a dependent, be sure to have the five-digit home Zip code and the last four digits of the employee's (plan subscriber's) social security number

** You will have access to details applicable to your plan. Please note, not all of the items listed above apply for all plans.*

HPI's Pathways Concierge

Healthcare can be confusing – ***we're here to help!***

The concierge team knows all about your benefits and can help you with anything healthcare related. Our services are part of your benefit plan – so we'll never charge you for our help.

Give us a call with any questions you have about:

- Finding a doctor or hospital
- Your benefit plan
- A bill or a claim
- Your co-pay amounts and when you'll pay them
- The cost you'll pay for a procedure
- Assistance with ancillary benefits
- Your medical condition, prescriptions or care plans – you can speak directly to a nurse

We can also help you with things like:

- Scheduling appointments and transportation
- Teaching you about your health condition
- Preparing for your upcoming surgery
- Finding other care options that will cost you less
- Matching you to a provider based on distance from you, cost, and quality

Don't worry, your information is completely confidential and secure, which means we'll never share it with anyone without your permission first.

Just one more thing to know:

MedWatch is the name of the company that provides these services. They're part of the Health Plans, Inc. (HPI) family of companies, and they may reach out to you to help you with your healthcare needs.

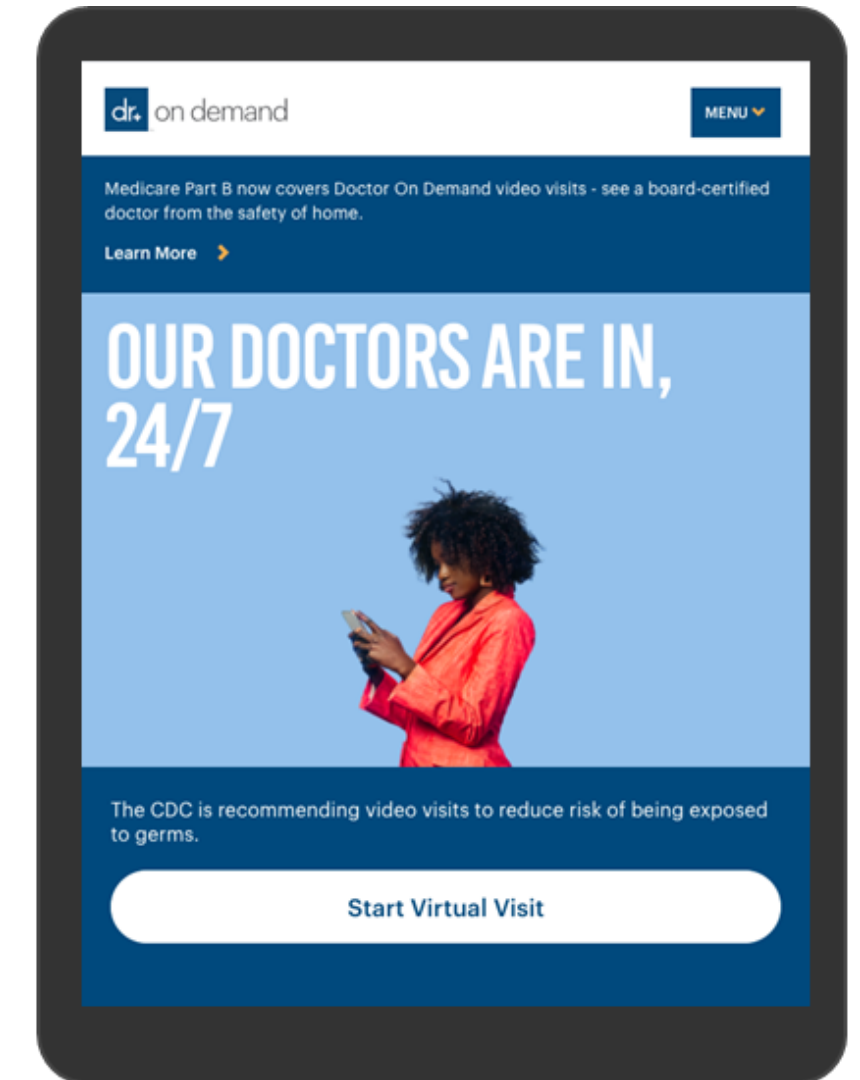
How do I contact my concierge? Call Monday–Friday 8am – 8pm ET – 888-340-5487

Your Doctor On Demand Benefit

ELMET
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Quality medical and behavioral health services any time you need them – right from home

- You can see a doctor right away from your smart phone, tablet or computer
- Available to you and your covered dependents
- Saves you the time and cost of traveling to the ER or Urgent Care
- Treatment for urgent care, behavioral health and everyday care, including:
 - Cold and flu
 - sinus infections
 - Skin conditions
 - Allergies
 - Anxiety & depression



Download the app free from the Apple Store or Google Play, or visit doctorondemand.com/health-plans-inc from a Google Chrome browser

2026 MEDICAL PLANS



PHARMACY BENEFITS

Prescription Drug Coverage	HSA Plan	PPO Silver	PPO Gold
Generic	deductible, then 25%	\$5 copay	\$5 copay
Preferred Brand	deductible, then 25%	\$30 copay	\$30 copay
Non-preferred Brand	deductible, then 25%	\$50 copay	\$50 copay
Specialty	deductible, then 25%	20% coinsurance	20% coinsurance

Please note the following 2026 Medicare Part D Creditable/Non-Creditable status for the Elmet Medical Plans:

- PPO Silver: Creditable
- PPO Gold: Creditable
- **HSA: Non-Creditable**

If you are already Medicare eligible, or will be Medicare eligible soon, we would encourage you to speak with a Medicare advisor, to see what this means for you, discuss any impacts it could have, as well as discuss any next steps you need to take.

2026 MEDICAL PLANS

PHARMACY BENEFITS – FAIROSX NAVIGATOR PROGRAM

Are you or a dependent taking a high-cost medication? You may be eligible for programs to reduce your medication cost.

The FairoRx Navigator program is focused on simplifying the process of obtaining your medication at a lower cost to you and Elmet Technologies.

What should you expect from FairoRx Navigator if you are taking an eligible medication?

- Receive a call from a member of the Navigator team to provide program education and an overview of next steps
- Based on eligibility criteria, the FairoRx Navigator program determines the appropriate program for you and will provide enrollment assistance
- The Navigator team will communicate with your prescriber about your program and request a new prescription
- You are provided with tracking information for your medication and your package is tracked to ensure delivery

Examples of the Top 9 Medications (by volume) that are eligible for the FairoRx Navigator Program:

- Jardiance
- Trulicity
- Eliquis
- Nurtec
- Farxiga
- Mounjaro
- Xarelto
- Trelegy Ellipta
- Humalog Kwikpen

This program has **mandatory** and **non-mandatory** components. Certain medications will be required to participate, and others will be voluntary, but they will provide you with the chance to save money on your prescriptions. Call the Navigator program for additional details and to see if your medications qualify.

Questions? Please call the FairoRx Navigator program at 833-464-9600.
You can also email FairoRx at: ContactUs@FairosRx.com

2026 MEDICAL PLANS

WELLDYNE MAIL ORDER PHARMACY PROGRAM

To transfer prescriptions to the WellDyne Mail Order Pharmacy Program:

- Go to www.fairosrx.com to create a member portal account.
 - Select the My Prescriptions feature and then click on Visit Mail Order under the Mail Order Prescriptions tab.
- The form is also available on the Resources Page of the Elmet Benefits website.
- Print, complete and mail the Mail Order Registration Form to WellDyne Mail Order pharmacy.

Your doctor will need to send a 90-day prescription with refills to WellDyne Mail Order pharmacy.

MEDICAL PLAN COMPARISON

2026 DECISION SUPPORT

You have three health plan to pick from:

- HSA Plan (receive \$500 annual contribution from Elmet, as long as you contribute too)
- PPO Silver Plan
- PPO Gold Plan

Important Considerations:

- Total Cost: Premiums and Out-of-Pocket Expenses
- Ongoing or chronic care needs
- Planned or likely care needs

MEDICAL PLAN SCENARIOS

2026 DECISION SUPPORT

Christine:

- single and healthy with few healthcare needs

Tammy:

- family in overall good health, with unexpected care needs
- Tammy's husband recently broke his leg, and Tammy has a chronic condition needing an MRI

John:

- family with unexpected care needs
- John recently went to the ER with shortness of breath and has an upcoming visit with a Pulmonologist

Bob and Pat:

- married with high medical expenses
- Bob recently had a heart attack, requiring hospitalization, while Pat's Type 2 Diabetes also requires hospitalization

MEDICAL PLAN SCENARIOS

CHRISTINE

Total Costs

Christine will pay \$1,388 per year in total costs if she enrolls in the HSA Plan, \$2,831 if she chooses the PPO Silver, or \$3,448 if she elects the PPO Gold.

Health Care Services

Under all the plan options, Christine will have no costs for her one preventive annual physical visit. In addition, she will visit her Primary Care Physician (PCP) once and receive laboratory services, which will result in \$600 of medical costs. She will also fill 2 generic prescriptions.

You might relate to Christine if:

- You are in good health
- You need coverage only for yourself
- You use minimal care services during the year
- You need only a couple of prescriptions

Plan	Annual Paycheck	Deductible	Copays	Coinsurance	HSA Dollars from	Annual Cost
HSA	\$1,188	\$700	\$0	\$0	\$500	\$1,388
PPO Silver	\$2,746	\$0	\$85	\$0	N/A	\$2,831
PPO Gold	\$3,363	\$0	\$85	\$0	N/A	\$3,448

MEDICAL PLAN SCENARIOS

TAMMY AND HER FAMILY

Total Costs

Tammy will pay \$14,621 per year in total costs if she enrolls in the HSA Plan, \$14,839 if she chooses the PPO Silver, or \$14,970 if she elects the PPO Gold.

Health Care Services

Under all the options, Tammy and her family will have no costs for in-network preventive care. All 4 family members see their PCP 4x throughout the year. Tammy’s husband’s leg break required surgery, and the complications required hospitalization, resulting in \$17,000 in medical costs. Tammy’s MRI results in a \$1,600 medical cost. Tammy saw a specialist 2x as she continued to manage her chronic condition. The family also needed 24 generic prescriptions and 8 preferred brand prescriptions, filled at a retail pharmacy.

You might relate to Tammy if:

- **You need coverage for your entire family**
- **Your family members are in relatively good health, with average healthcare needs**
- **You need several maintenance prescriptions (some generic and some brand name) throughout the year**

Plan	Annual Paycheck	Deductible	Copays	Coinsurance	HSA Dollars from	Annual Cost
HSA	\$4,121	\$5,600	\$0	\$5,400	\$500	\$14,621
PPO Silver	\$8,239	\$2,500	\$880	\$3,220	N/A	\$14,839
PPO Gold	\$9,590	\$1,000	\$860	\$3,520	N/A	\$14,970

MEDICAL PLAN SCENARIOS

JOHN AND HIS FAMILY

Total Costs

John will pay \$9,334 per year in total costs if he enrolls in the HSA Plan, \$9,464 if he chooses the PPO Silver, or \$10,795 if he elects the PPO Gold.

Health Care Services

Under all the options, John and his family will have no costs for in-network preventive annual physicals and immunizations. All 3 family members see their PCP 3x throughout the year. John’s ER visit resulted in \$1,800 in medical costs. John visited a specialist 2x following his ER visit. The family also needed 14 generic prescriptions and 2 preferred brand formulary prescriptions assumed to be filled at a retail pharmacy.

You might relate to John if:

- You need coverage for your entire family
- Your family members are in good health, with low healthcare needs
- You may need 1 or 2 maintenance prescriptions (some generic and some brand name) and 1 or 2 doctor office visits throughout the year

Plan	Annual Paycheck	Deductible	Copays	Coinsurance	HSA Dollars from	Annual Cost
HSA	\$4,121	\$5,600	\$0	\$113	\$500	\$9,334
PPO Silver	\$8,239	\$0	\$975	\$0	N/A	\$9,214
PPO Gold	\$9,590	\$0	\$955	\$0	N/A	\$10,545

MEDICAL PLAN SCENARIOS

BOB AND PAT

Total Costs

Bob will pay \$13,399 per year in total costs if he enrolls in the HSA Plan, \$15,764 if he chooses the PPO Silver, or \$14,073 if he elects the PPO Gold.

Health Care Services

Under all the options, Bob and Pat will have no costs for their in-network preventive care. They will each visit their PCP 6x and have 4 specialist office visits, each. Bob’s heart attack requires heart surgery and hospitalization resulting in \$25,000 in medical costs. Pat’s diabetes also leads to some hospitalization, resulting in \$10,000 in medical costs. Bob and Pat take 48 generic prescriptions and 24 non-preferred brand prescriptions throughout the year.

You might relate to Bob if:

- You or a member of your family has a chronic condition
- You or a member of your family require a high level of medical services, including prescriptions

Plan	Annual Paycheck	Deductible	Copays	Coinsurance	HSA Dollars from	Annual Cost
HSA	\$2,899	\$5,600	\$0	\$5,400	\$500	\$13,399
PPO Silver	\$5,764	\$2,500	\$2,970	\$4,530	N/A	\$15,764
PPO Gold	\$7,073	\$1,000	\$2,890	\$3,110	N/A	\$14,073

HEALTH SAVINGS ACCOUNT (HSA)



Enrolled in the HSA Plan? Did you know that Elmet contributes \$500 per year to your HSA account, as long as you contribute as well? That’s FREE money for you and your family!

If you have signed up for the company HSA health plan, you are eligible for a free Health Savings Account (HSA). This savings account stays with you even after leaving the company, and Elmet will contribute up to \$500 per year (\$41.67 per month) to the account as long as you contribute each year. The money from this HSA is tax-free and can be spent on qualified medical-related costs, such as over-the-counter medications, prescriptions, medical, dental, or vision expenses. You receive a free debit card with this account and also can reimburse yourself for any eligible costs you pay out of pocket.

Opening a Health Savings Account (HSA) required additional action after your enrollment. You must contact KeyBank to open an account.

To open an account at zero cost, visit www.key.com/keywork/elmet and click “Open Now” or call KeyBank at 207-262-5712. There is no minimum balance, and the account also includes ATM access, free online transfers, and bill pay. Eligibility does require that you are not a dependent on someone else’s tax return and that you’re not covered by Medicare, Tri-Care, or another health insurance plan (other than as permitted in IRS Publication 969).

Already have your own HSA account? Elmet will permit employees to use their own, already existing HSA accounts as well. Whether you use your own pre-existing account, or open a new KeyBank account, you must provide an HSA direct deposit form, to HR, before your HSA contributions can be deposited into your account

Catch-up Contributions for Employees 55 and older

Once you reach 65 years of age, the money in the account can be spent for any purpose. You can contribute up to the below maximum amounts per year to your account:

Plan Year	Individual Maximum	Family Maximum	Over 55 Catch Up
2026	\$4,400	\$8,750	\$1,000



Retirement Planning: For those nearing retirement or considering Medicare, it's essential to evaluate how each plan aligns with future healthcare needs. It's important to note that all contributions to an HSA must cease six months before enrolling in Medicare if the individual is Medicare-eligible during that period. Contributions made prior to turning 65 do not affect this requirement.

FLEXIBLE SPENDING ACCOUNT (FSA)

A Healthcare Flexible Spending Account allows you to pay for out-of-pocket costs with pre-tax dollars. Your FSA election will not automatically continue into the following plan year. **You must actively elect to participate by completing your benefits enrollment each year.**

Healthcare FSA

You can contribute up to \$3,400 during 2026 into a Healthcare FSA. Eligible Healthcare FSA expenses include deductibles, copays, coinsurance, prescription drugs, over-the-counter drugs (no prescription required), dental, and vision expenses. Participants in the FSA receive a debit card so that many expenses can be paid at the time of service.

Limited Purpose FSA

A limited purpose Healthcare FSA is available for HSA plan participants. The limited purpose FSA can only be used for dental and vision expenses for members with a Health Savings Account.

Dependent Care FSA

The Dependent Care FSA enables you to pay for certain dependent care expenses using before-tax dollars. You may contribute up to \$7,500 during 2026 in a Dependent Care FSA. Eligible dependent care expenses include day care / after-school / program fees for children up to age 13 and certain adult day care expenses. It's important to note that expenses are only tax-deductible if both parents are working, actively looking for work, a full-time student, or disabled.



The IRS will allow Healthcare and Limited Purpose FSA plan members to roll over up to \$680 of unused 2026 funds for future use.

2026 DENTAL PLANS

With Northeast Delta Dental, you can see any dentist of your choosing. If you choose a dentist in the Delta Dental PPO or Delta Dental Premier network, you will ensure lower out-of-pocket costs. You can locate in-network providers by visiting www.nedelta.com and selecting “Find a Dentist” – You can select either Delta Dental PPO or Delta Dental Premier as the network. While you have the option to choose between providers in both the PPO and Premier networks, your discount will be greater when using a provider in the PPO network. Premier Network providers can balance bill members up to the maximum allowable fee.





Delta Dental PPO + Premier Network	
Calendar Year Deductible	\$50 Individual/\$150 Family
Calendar Year Maximum	\$1,500
Orthodontia Lifetime Maximum	\$1,500
Coverage	
Type A Services (Preventive)	
Exams – Two in a 12 month period	100%, no deductible
Cleanings – Two in a 12 month period**	
Bitewing x-rays – Once in a 12 month period	
X-rays of individual Teeth as necessary	
Flouride – Once in a 12 month period for children to age 19	
Sealant – Once in a 3 year period per permanent molar for children to age 19	
Type B Services (Basic Restorative)	
Amalgam Fillings (silver)	80%, after deductible
Composite Fillings (white)	
Endodontics (root canal therapy)	
Periodontal Maintenance (cleaning) – Two in a 12 month period**	
Denture Repair (removable dentures repaired to original condition)	
Emergency Palliative Treatment	
Oral Surgery (surgical and routine extractions)	
Type C Services (Major Restorative)	
Crowns	50%, after deductible
Onlays	
Implants	
Removable and fixed partial dentures (bridge)	
Dentures	
Dentures (rebases and relines	
Orthodontia Services (Adults & Children)	
Orthodontia	50%, no deductible

2026 VISION PLANS

TWO NETWORK OPTIONS:

vsp vision™

eye
Med

Elmet offers Vision insurance through Ameritas, which allows you to choose whether to participate in the VSP Focus vision network or the EyeMed Insight vision network. Choose carefully, as the network you choose will remain your network for the entire 2026 plan year.



Using participating network providers will help you maximize your benefits. You can find participating providers by going to www.ameritas.com, selecting "Find a Provider," scrolling down to "Vision," and selecting either VSP or EyeMed, depending on your plan choice. This link will take you to the appropriate VSP or EyeMed provider search.

Ameritas® 



Ameritas Vision Options				
	VSP Focus		EyeMed Insight	
	In Network	Out of Network Reimbursement	In Network	Out of Network Reimbursement
Eye Exam	\$10	Up to \$45	\$10	Up to \$52
Contact Lens Fitting and Follow-up	Up to \$60	Not Reimbursable	Standard: Up to \$40 Premium: 10% off retail	Not Reimbursable
Frames Allowance	\$130 Allowance <i>Costco and Walmart amount will be wholesale equivalent</i>	Up to \$70	\$130 Allowance	Up to \$104
Lenses				
Single	\$10	Up to \$30	\$10	Up to \$68
Bifocal	\$10	Up to \$50	\$10	Up to \$96
Trifocal	\$10	Up to \$65	\$10	Up to \$130
Lenticular	\$10	Up to \$100	20% Discount	Not Reimbursable
Progressive	Cost will vary by option	Not Reimbursable	Cost will vary by option	Not Reimbursable
Lens Treatment	Additional costs and copays may apply. Refer to benefits summary for complete details.		Additional costs and copays may apply. Refer to benefits summary for complete details.	
Contacts Allowance				
Conventional and Disposable	Up to \$130	Up to \$105	Up to \$130	Up to \$104
Medically Necessary	Covered in Full	Up to \$210	Covered in Full	Up to \$200
Lasik and PRK Vision Correction	N/A	N/A	Average discount of 15% off retail price or 5% off promotional price at US Laser Network participating providers.	N/A
Frequencies				
Exam	Every 12 months		Every 12 months	
Frame Allowance	Every 12 months		Every 12 months	
Lenses	Every 12 months		Every 12 months	
Contacts	Every 12 months		Every 12 months	

LIFE INSURANCE

EMPLOYER PAID

Basic Life/AD&D Insurance	
All Benefits Eligible Employees	1.5x your Annual Base Salary, up to a maximum of \$500,000

AGE REDUCTIONS:

Basic Life

- Age 65: 65%; Age 70: 40%; Age 75: 25%

Voluntary Life

- Age 70: 40%; Age 75: 25%
- Spouse age reductions are based on the employee age



EMPLOYEE PAID

Voluntary Life AD&D Insurance	
Employees	\$1,000 increments Max of 5x Annual Earnings \$10,000 Min \$750,000 Max New Hires: \$200,000 Guaranteed Issue Open Enrollment: Can Increase up to another \$10,000, without EOI
Spouse	Lesser of 100% of Employee Election, or \$250,000 Max New Hires: \$30,000 Guaranteed Issue Open Enrollment: Any increase requires EOI
Child	\$5,000 or \$10,000 \$10,000 Guaranteed Issue

Rates will be calculated in Zevo, during Open Enrollment.

In order for a spouse or child to be eligible, the employee must also be enrolled in Voluntary Life.

DISABILITY INSURANCE

EMPLOYER PAID

Short-Term Disability (STD)	
All Benefits Eligible Employees	60% of Weekly Earnings to \$2,500/week Max
Benefit Period	Up to 25 weeks (roughly 6 months)
Elimination Period	7 day wait for Accident and Illness

Long-Term Disability (LTD)	
All Benefits Eligible Employees	60% of Monthly Earnings to \$11,000/month Max
Benefit Period	Up to Normal Social Security Retirement Age
Elimination Period	180 days (roughly 6 months)

Union Members are not eligible for STD or LTD benefits until after they have completed 3 months of employment.

ACCIDENT INSURANCE

EMPLOYEE PAID

Accident	
Accident Plan	Benefit varies by injury and treatment provided
Sports Package	Pays 25% more when accident is due to organized sports
Initial Care: ER/Urgent Care/PCP	\$150 / \$150 / \$60
Hospital: Admission / ICU	\$750 / \$1,050
Ambulance: Ground / Air	\$250 / \$1,000
Benefits Schedule Based on Injury	

\$100 Health Screening Benefit

Accident Rates		
	Weekly	Biweekly
Employee Only	\$1.49	\$2.99
EE + Spouse	\$2.72	\$5.44
EE + Child	\$2.84	\$5.68
Family	\$4.06	\$8.13



CRITICAL ILLNESS INSURANCE



EMPLOYEE PAID

Elmet Technologies offers voluntary Critical Illness coverage which provides a flat dollar benefit in the event of a diagnosis of a covered illness. The intention of this plan is to cover diagnoses while the coverage is in force.

Benefit Amount

- Employees: \$5,000 to \$30,000
- Spouses: 50% of the employee coverage amount
- Child(ren): 50% of the employee coverage amount

No Pre-Existing Coverage Exclusion

Benefits	
Benign Brain Tumor	100%
Cancer • Cancer (except skin cancer) • Carcinoma In Situ • Skin Cancer	100% 25% 10%
Coronary Artery Obstruction	25%
Coma	100%
Heart Attack	100%
End Stage Renal Failure	100%
Major Organ Failure	100%
Multiple Sclerosis	100%
Stroke	100%



THE FOLLOWING CHILDHOOD CONDITIONS ARE COVERED AT 100% OF THE CHILD FACE AMOUNT:
CEREBRAL PALSY; CONGENITAL BIRTH DEFECTS; CYSTIC FIBROSIS; DOWN SYNDROME; TYPE 1 DIABETES;
GAUCHER DISEASE TYPE 2 OR 3; INFANTILE TAY SACHS; SICKLE CELL ANEMIA; TYPE 4 GLYCOGEN
STORAGE DISEASE; NIEMANN-PICK DISEASE; POMPE DISEASE; ZELLWEGER SYNDROME

HOSPITAL INDEMNITY INSURANCE

ELMET

TECHNOLOGIES

EMPLOYEE PAID

Elmet Technologies offers voluntary Hospital Indemnity coverage which provides a daily fixed indemnity benefit for eligible hospital confinements. The fixed indemnity benefits may be used as you choose to help offset deductibles, coinsurance, and other expenses.

Low Plan		
	Weekly	Biweekly
Employee Only	\$3.07	\$6.15
EE + Spouse	\$6.15	\$12.30
EE + Child	\$6.61	\$13.21
Family	\$9.68	\$19.36

High Plan		
	Weekly	Biweekly
Employee Only	\$6.06	\$12.11
EE + Spouse	\$12.12	\$24.23
EE + Child	\$13.02	\$26.04
Family	\$19.08	\$38.16



Benefits		
	Low Plan	High Plan
Admission Benefits		
Initial Hospital Confinement	\$1,100	\$2,200
Daily Benefit Amount	\$100	\$200
Facility Confinement Benefit		
Daily Hospital Confinement Benefit	\$100/day, up to 31 days per confinement	\$200/day, up to 31 days per confinement
Daily Critical Care Unit Confinement Benefit	\$200/day, up to 30 days per confinement	\$400/day, up to 30 days per confinement
Inpatient Rehabilitation Facility	\$100/day, up to 30 days per confinement	\$200/day, up to 30 days per confinement
Observation Unit Daily Benefits	\$250/day, up to a max of 1 day per calendar year	\$250/day, up to a max of 1 day per calendar year
Dependent Benefits		
Spouse	100% of employee amount	100% of employee amount
Child(ren)	100% of employee amount	100% of employee amount

EMPLOYEE PERKS PROGRAM

START SAVING TODAY...

Electronics – Appliances – Apparel – Cars – Flowers – Fitness
Memberships – Gift Cards – Groceries – Hotels – Movie Tickets –
Rental Cars – Special Events – Theme Parks – And More!

SCAN ME



VISIT

<https://elmettech.savings.workingadvantage.com>

EMPLOYEE ASSISTANCE PROGRAM (EAP)

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Confidential Emotional Support

Our highly trained clinicians will listen to your concerns and help you or your family members with any issues, including:

- Anxiety, depression, stress
- Grief, loss and life adjustments
- Relationship/marital conflicts



Financial Resources

Our financial experts can assist with a wide range of issues. Talk to us about:

- Retirement planning, taxes
- Relocation, mortgages, insurance
- Budgeting, debt, bankruptcy and more



Work-Life Solutions

Our specialists provide qualified referrals and resources for just about anything on your to-do list, such as:

- Finding child and elder care
- Hiring movers or home repair contractors
- Planning events, locating pet care



Online Support

GuidanceResources® Online is your 24/7 link to vital information, tools and support. Log on for:

- Articles, podcasts, videos, slideshows
- On-demand trainings
- "Ask the Expert" personal responses to your questions



Legal Guidance

Talk to our attorneys for practical assistance with your most pressing legal issues, including:

- Divorce, adoption, family law, wills, trusts and more

Need representation? Get a free 30-minute consultation and a 25% reduction in fees.



Free Online Will Preparation

EstateGuidance® lets you quickly and easily create a will online.

- Specify your wishes for your property
- Provide funeral and burial instructions
- Choose a guardian for your children

EMPLOYEE ASSISTANCE PROGRAM (EAP)

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Contact Us... Anytime, Anywhere

No-cost, confidential solutions to life's challenges.

**Contact Your
GuidanceResources® Program**

Call: 855.387.9727

TDD: 800.697.0353

Online: guidanceresources.com

App: GuidanceResources® Now

Web ID: ONEAMERICA3



Your ComPsych® GuidanceResources® program offers someone to talk to and resources to consult whenever and wherever you need them.

Call: 855.387.9727

TDD: 800.697.0353

Your toll-free number gives you direct, 24/7 access to a GuidanceConsultant™, who will answer your questions and, if needed, refer you to a counselor or other resources.

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App: GuidanceResources® Now

Web ID: ONEAMERICA3

Log on today to connect directly with a GuidanceConsultant about your issue or to consult articles, podcasts, videos and other helpful tools.

24/7 Support, Resources & Information

2026 MEDICAL PREMIUMS



Weekly Deductions				
	PPO Gold	PPO Silver	HSA Plan	Allegiant Care Union
Employee	\$64.68	\$52.82	\$22.85	The Allegiant Care plan is a closed grandfathered plan. No new enrollees are allowed. For current members, please reference the Teamsters Local 340 for rates and offerings.
Employee + Spouse	\$136.03	\$110.84	\$55.74	
Employee + Child(ren)	\$118.16	\$92.86	\$45.36	
Family	\$184.42	\$158.45	\$79.25	

Bi-weekly Deductions			
	PPO Gold	PPO Silver	HSA Plan
Employee	\$129.35	\$105.63	\$45.69
Employee + Spouse	\$272.05	\$221.68	\$111.49
Employee + Child(ren)	\$236.31	\$185.73	\$90.72
Family	\$368.84	\$316.90	\$158.49

Tobacco Surcharge - Weekly Deductions			
	PPO Gold	PPO Silver	HSA Plan
Employee	\$71.36	\$59.50	\$29.53
Employee + Spouse	\$149.40	\$124.21	\$69.11
Employee + Child(ren)	\$124.84	\$99.55	\$52.05
Family	\$197.79	\$171.82	\$92.61

Tobacco Surcharge - Bi-weekly Deductions			
	PPO Gold	PPO Silver	HSA Plan
Employee	\$142.72	\$119.00	\$59.06
Employee + Spouse	\$298.79	\$248.41	\$138.23
Employee + Child(ren)	\$249.68	\$199.09	\$104.09
Family	\$395.58	\$343.63	\$185.23

Dental Deductions

	Weekly	Biweekly
Employee	\$2.89	\$5.79
Employee + 1	\$5.49	\$10.99
Family	\$9.97	\$19.94



Vision Deductions

	Weekly	Biweekly
Employee	\$1.62	\$3.23
Employee + 1	\$3.21	\$6.42
Family	\$4.31	\$8.62



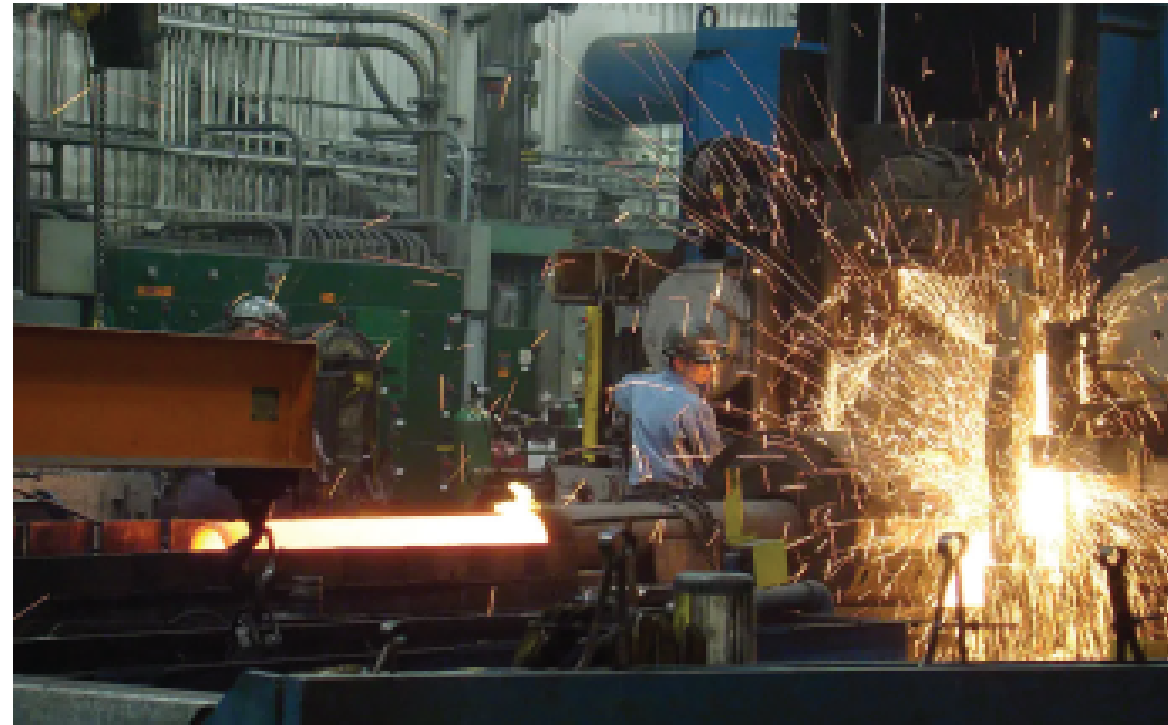
LOCATION-SPECIFIC BENEFITS

401(k)

Please see your local site Human Resources representative for information regarding 401(k) and retirement options that are available to you.

Gym Membership/Discounts

For additional information regarding possible Gym Membership/Discounts available to you, please consult your local HR Team.



WELCOME TO THE ELMET TECHNOLOGIES BENEFITS WEBSITE

Elmet Technologies provides an extensive benefits portfolio for you and your family.

This website provides an overview of your benefits, general eligibility information, important insurance company contact information, and access to forms and documents.

ENROLL NOW!



Finish Later

1 Verify Your Info

2 Customize Your Benefits

3 Confirm & Submit

 Cost Per Pay Period: \$338.09

Show Tutorial Again

Finalize My Elections 

Medical

Health Plans, Inc. (HPI) Medical
Coverage : HSA ES

Waived Health Savings Account (HSA)

Health Savings Account (HSA):
Employee \$3440



\$223.59 / pay period



Dental

Northeast Delta Dental: Dental EF



\$21.99 / pay period



Vision

Anthem Blue View Vision: Vision Plan
EF



\$7.09 / pay period



1 Verify Your Info

2 Learn & Select

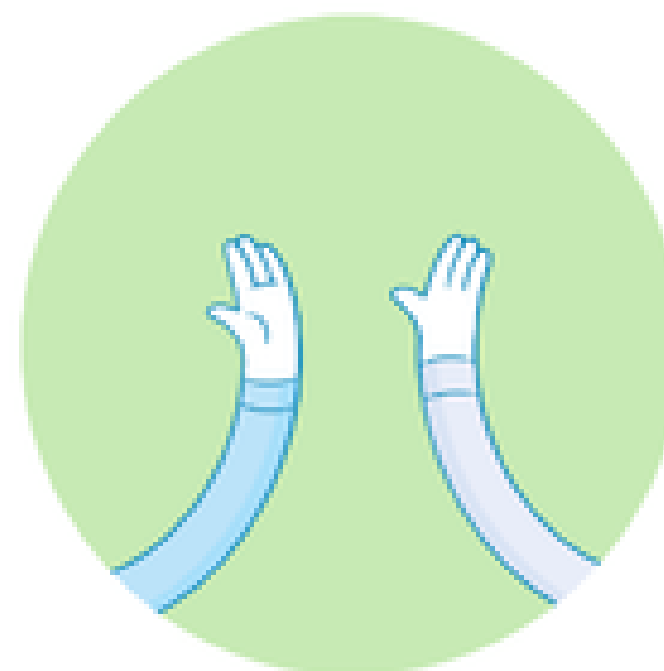
3 Confirm & Submit

[← Make changes to your benefits](#)

[Preview my confirmation](#)

All done! That wasn't so hard was it?

We have sent you an email of your confirmation (#8VuxbR) for your reference. You can also [preview your confirmation](#). You have until 12/04/2020 to [make changes](#).



Dental

Waived Northeast Delta Dental

\$0.00 / pay period



Northeast Delta Dental

Elmet Technologies offers a comprehensive dental plan through Northeast Delta Dental with a generous \$1,500 calendar year maximum. You are encouraged to visit in-network dentists to reduce your out-of-pocket costs and avoid getting balance billed. Please refer to the Benefits Summary for complete details about the Northeast Delta Dental dental plan.

Make a selection:



Dental
Employee + Family

\$21.99 / Bi-weekly

Waive

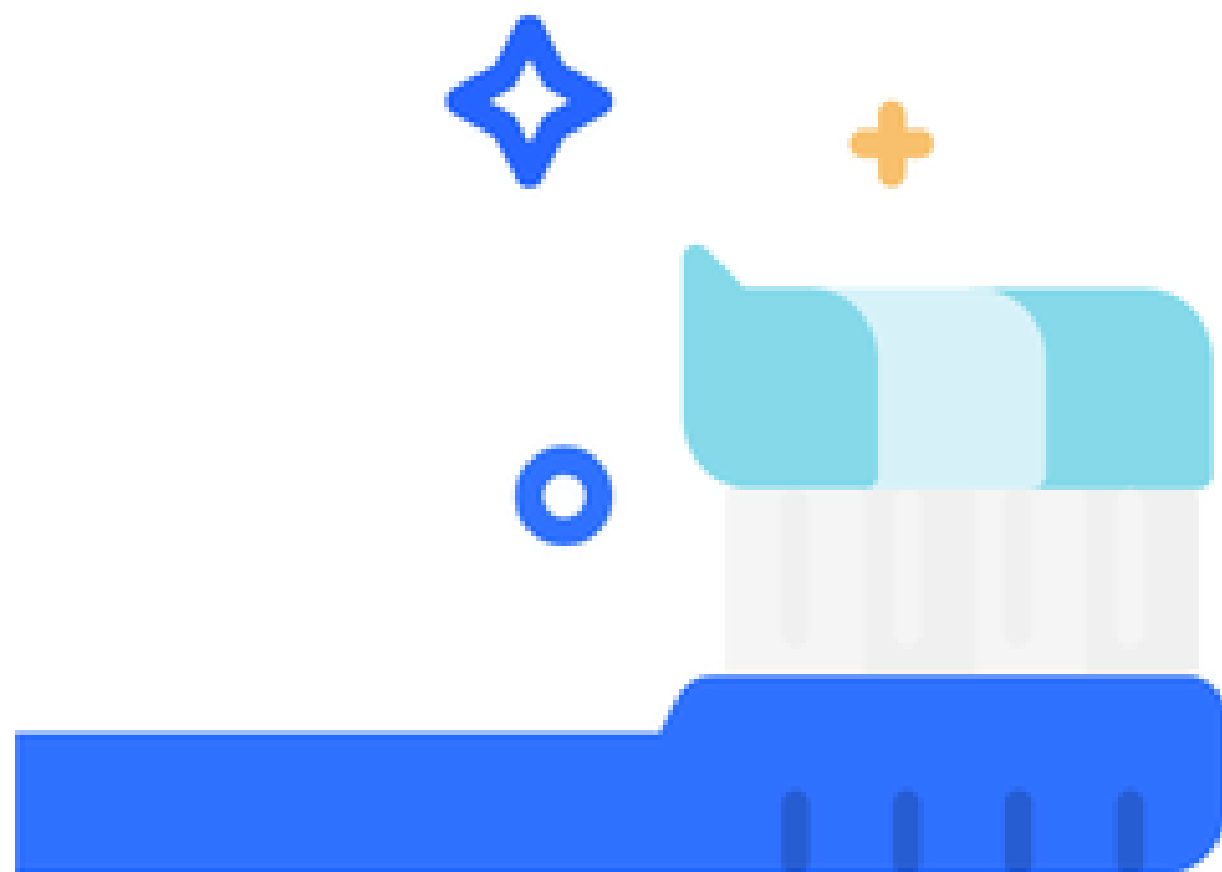
\$0.00 / Bi-weekly

[Return to Benefit Bundle](#)

 Dental: \$0.00 / Total \$0.00

Confirm Selections





Make a selection:

Dental

Employee + Family

\$21.99 / Bi-weekly

Waive

\$0.00 / Bi-weekly

Who to Cover

Just You

You + Claire

You + Family

Select Dependents

You

+

Brian

Claire

[← Return to Benefit Bundle](#)

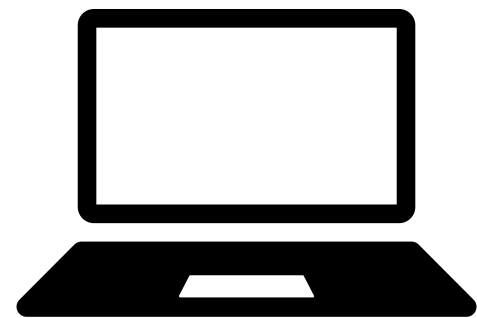
 Dental: \$21.99 / Total \$21.99

Confirm Selections



OPEN ENROLLMENT

November 3rd – November 17th



ONLINE:

www.elmetbenefits.com



PHONE:

866-833-8915

Mon – Thurs: 8am – 6pm ET

Fri: 8am – 5pm

Active enrollment not required, except for Flexible Spending Account (FSA)

Benefits Website: www.elmetbenefits.com

Email: questions@elmetbenefits.com