Understanding Your Health Benefits and Options

2027 Annual Open Enrollment Guide



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Price Rite MARKETPLACE

Healthy choices lead to healthier lives.

Open Enrollment begins Monday, October 26, 2026, and ends at midnight on Monday, November 13,2026.

Open Enrollment Is Here!
You have three weeks to make some very important decisions that will impact you for the next 12 months. **We encourage all non-union, full-time Price Rite Team Members to review the benefit options and resources available.**

This is NOT an active enrollment. If you choose not to take action, your current coverage elections will roll over into the following year.

If this is your first year enrolling, take the time to explore your options carefully so you can make the best choices for yourself and your family. If you're currently enrolled, it's still a good idea to review and confirm your current information—your needs may have changed, and so might your plan options.

We will continue to provide four medical plans:

- Aetna Basic Managed Care
- Aetna Managed Care
- Aetna HCRA Plan
- Aetna Premium Managed Care

And you will again have a choice of two provider networks when you enroll:

- Aetna Broad Network
- Aetna Premier Care Network (APCN) Plus

For those associates who continue to choose the Aetna Broad Network, there will be a slight increase in associate contributions for 2027.

The APCN Plus plans' associate contributions are not increasing for 2027. These APCN plus plans feature a simple plan design with a smaller, exclusive network of doctors and hospitals that have met quality and cost standards to adequately fit your needs. Visit **enroll. priceritebenefits.com** to determine if your doctor is in network.

We encourage you to use the this benefit guide to ensure you are making the correct choice for 2027. Learn more about these changes on page 6.

Despite the contribution increase in the Aetna Broad Network, all of our benefits remain competitive, and you will continue to pay less for your benefits than employees from other companies in the region. **In addition:**

- Dental PPO offerings through Aetna will remain the same, with a small increase to your weekly contribution. As of 2027, implants are covered under Major Services, and Orthodontia will be covered for adults.
- We will continue to offer Vision coverage through EyeMed, with NO increase to your weekly contribution. Starting 2027, there will be no copy for out of network exams, and frames will be covered at no copay, $180 allowance + 20% of for balances over $180.

Take Action
Open Enrollment is your time to review, compare, and select the benefits that best support your 2027 goals. If you choose not to take action, your current coverage elections will roll over into the following year. However, reviewing your benefit options and confirming the choices for you and your family is always best practice.

Visit your benefits website and review this guide to explore your options, understand your costs, and make the choices that help you—and your family—stay well in the year ahead.

Your Benefit Options

Understanding your options is the first step in making a decision for the next calendar year.

MEDICAL
Your medical plans are offered through Aetna and in network preventative care is covered at 100%

NETWORKS
For full-time Team Members, when you enroll for medical coverage, you select one of two networks.

PRESCRIPTION DRUGS
When you enroll in one of the medical plans, you also receive prescription drug coverage.

DENTAL
Benefits to help pay for preventive, basic, and major dental services.

VISION
Benefits to help pay for eye exams and glasses/ contacts.

WELL-BEING PROGRAMS
An important part of your medical plan is improving long-term health and managing the cost for both our Team Members and Price Rite. That's why we provide programs and resources that encourage healthy actions at no additional cost to you.

LIFE INSURANCE
Price Rite Team Members are eligible for 1.5 times their annualized salary in basic life insurance. Team Members can also purchase additional financial protection for their family at very competitive prices (subject to the insurance company's underwriting

OPTIONAL LIFE INSURANCE
Optional Life Insurance and AD&D are offered on a Team Member Paid Basis.

SHORT-TERM DISABILITY
Price Rite Team Members are eligible for 100% of their predisability weekly earnings for the first 12 weeks. This is subject to the plan's maximum weekly benefit of $750, and 66-2/3% of their pre-disability weekly earnings for weeks 13-26.

LONG-TERM DISABILITY
Benefits that provide a portion of your salary in the event you become disabled and cannot work.



Summary of Benefits and Coverage (SBC)
As part of the Patient Protection and Affordable Care Act (PPACA), SBCs are designed to help you understand and compare the key features of your Price Rite medical plan options. Each includes coverage examples, a glossary of common health insurance terms, and contact information for each medical plan. They are available for all individual plans through the Marketplace. The SBCs for the medical plans available to you can be found on your benefits website.

Your network options

Consider the APCN option. It has a proven track record with excellent outcomes at a lower cost.

When you enroll for medical coverage during Open Enrollment, you'll select your plan (choice of four Aetna plans) and your network (choice of two networks). For all four plans, the network options include:

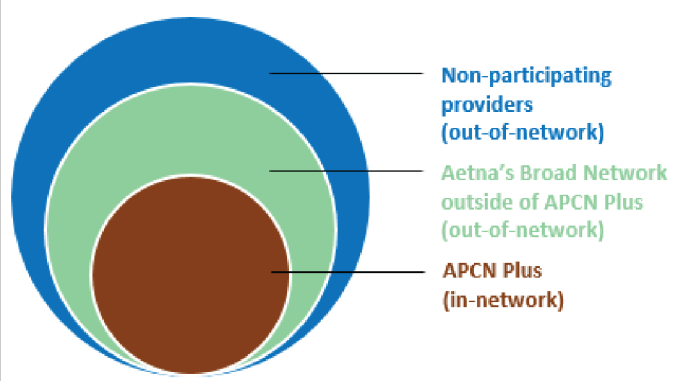
Aetna Premier Care Network (APCN) Plus is a smaller group of providers chosen from the Aetna Broad network. These providers have a proven track record with **excellent health outcomes** at a **lower cost**. If you select this network when you enroll, your weekly contributions will be lower.

Once you select your network during Open Enrollment, you may not change it until next year's Open Enrollment.

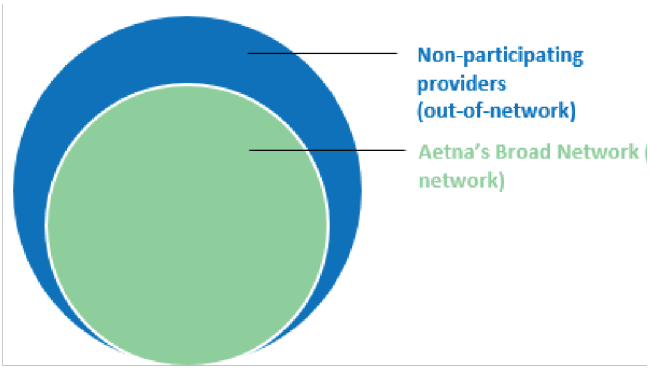
Important: If you choose APCN Plus when you enroll, you must use providers in the APCN Plus network, or benefits will be paid at the out-of-network level (even if **Aetna Broad Network** is all of the providers that participate with Aetna. If you see a non-participating provider, benefits will be paid at the out-of-network level. Your weekly contributions if you choose the Aetna Broad Network will be higher than if you choose APCN Plus.



If you choose **Aetna Premier Care Network (APCN) Plus**



If you choose **Aetna's Broad Network**



How the Plans Work

Benefits	Basic Managed Care (You Pay)	Managed Care (You Pay)	HCRA Plan (You Pay)	Premium Managed Care (You Pay)
Comparison to Marketplace plans	Bronze	Silver Plus	Gold	Gold Plus
In-network preventive care covered at 100%	Yes	Yes	Yes	Yes
Well-being resources & special programs	Yes	Yes	Yes	Yes
Provider network	Broad or APCN Plus	Broad or APCN Plus	Broad or APCN Plus	Broad or APCN Plus
Use of in- and out-of-network providers	Yes	Yes	Yes	Yes
Must select a Primary Care Physician (PCP)	No	Yes	No	Yes
PCP referrals needed for specialty care	No	No	No	No
HCRA Funded	No	No	Yes	No
In-network deductible	Yes	Yes	Yes	Yes

How the Plans Work

Your medical plans are offered through Aetna and in-network preventative care is covered at 100%.

Benefits	Basic Managed Care (Bronze) (You Pay)	Managed Care (Silver Plus) (You Pay)	HCRA Plan (You Pay)	Premium Managed Care (You Pay)
Preventative Services	$0	$0	$0	$0
Office Visits Primary Care Physician (PCP) Specialist (SPC)	$30 PCP copay (after deductible) $45 SPC (after deductible)	$30 PCP copay $45 SPC	Deductible and Coinsurance	$30 PCP copay $45 SPC copay
Emergency Room	$150 copay (after deductible)	$150 copay	Deductible and Coinsurance	$150 copay
Urgent Care Facility	$45 copay (after deductible)	$40 copay	Deductible and Coinsurance	$45 copay
Deductible	$2,750 single $5,500 family	$1,000 single $2,000 family	$2,250 single $4,500 family	$1,000 single $2,000 family
HCRA Fund	N/A	N/A	$1,500 single $3,000 family	N/A
Deductible after HCRA Fund	N/A	N/A	$750 single $1,500 family	N/A
Coinsurance	35%	10%	10%	10%
Annual OutofPocket Maximum (Includes deductible)	$6,500 single $13,000 family	$4,000 single $8,000 family	$3,750 single $7,500 family	$2,000 single $4,000 family

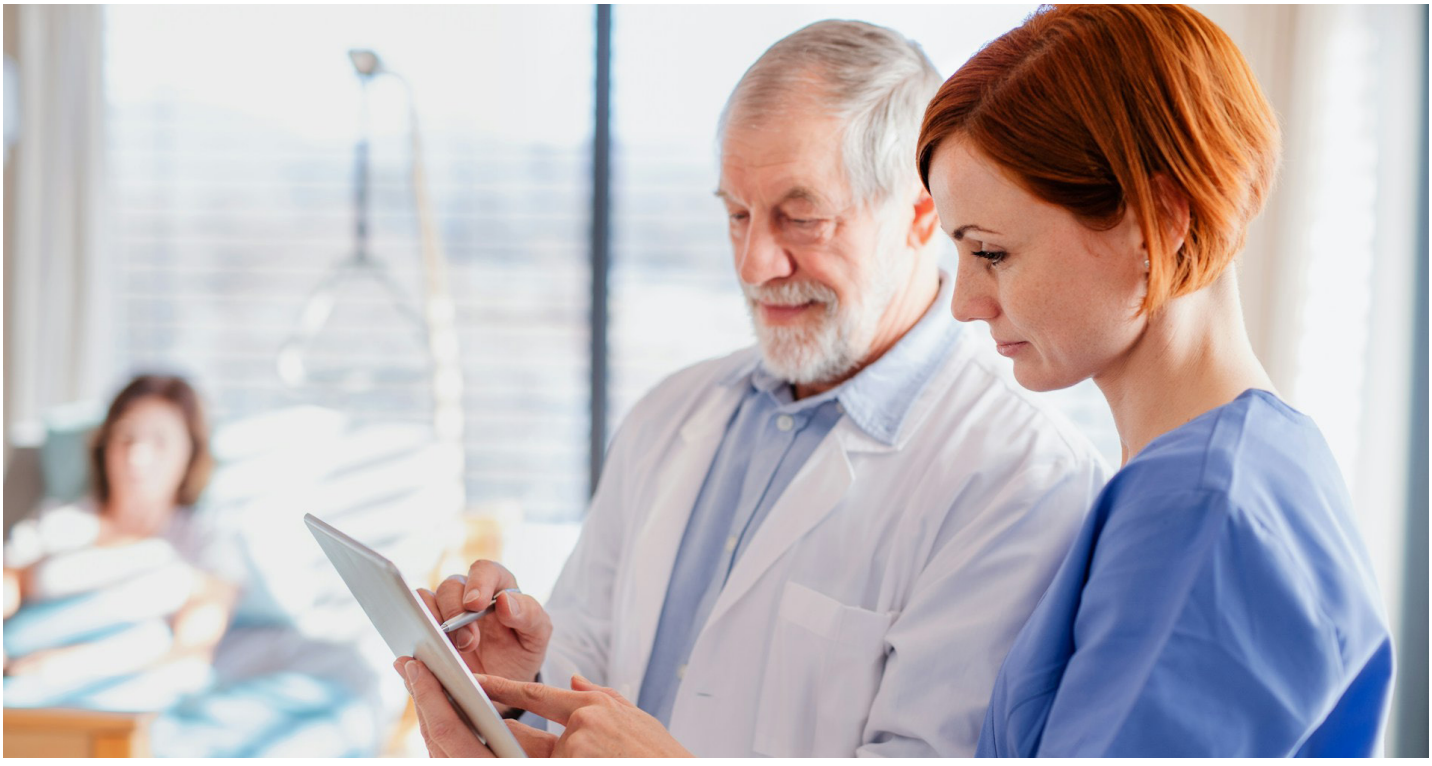
Note: Prescription drug coverage, described later in this guide, is included in the medical plan. Prescription drug expenses are not subject to the medical plan deductible.

How the Plans Work

Out-of-network Medical Services

Benefits	Basic Managed Care (You Pay)	Managed Care (You Pay)	HCRA Plan (You Pay)	Premium Managed Care (You Pay)
Office Visits and Preventative Care	Deductibles and Coinsurance	Deductibles and Coinsurance	Deductibles and Coinsurance	Deductibles and Coinsurance
Emergency Room	$150 copay (after deductible)	$150 copay	Deductibles and Coinsurance	$150 copay
Deductible	$7,500 single $15,000 family	$1,500 single $3,000 family	$4,000 single $8,000 family	$2,000 single $4,000 family
Coinsurance*	50%	30%	40%	40%
Annual Out-of-Pocket maximum	$12,500 single $25,000 family	$6,000 single $12,000 family	$8,000 single $16,000 family	$5,000 single $10,000 family

*The plan pays out-of-network benefits based on Medicare reimbursement levels of 140% of Medicare replacement. In addition to your coinsurance, you are responsible for amounts that exceed these levels.



Prescription Drugs

When you use a ShopRite pharmacy or Spotswood mail order for maintenance prescriptions, you'll get a three-month supply for the cost of one!

When you enroll in a PriceRite medical plan, you receive prescription drug coverage. Your copays are based on the type of drug and where you purchase your prescription. To lower your costs, request generic drugs and use a ShopRite pharmacy or Spotswood mail order for maintenance medications (for conditions that usually require regular use, such as high blood pressure, heart disease, asthma, and diabetes).

Prescription Drug Benefits — Managed Care, HCRA, and Premium Managed Care*

Type of Drug	Definition	Retail Pharmacy (Non ShopRite)	ShopRite Pharmacies or Spotswood Mail Order
		For a 30-day supply	For a 90-day supply
Generic	Drug with same active ingredients as brand name, with lower cost	$10	$10
Preferred Brand**	Drug marketed under a specific trademark or name by specific drug manufacturer and included on Aetna's drug list	$30	$30
Non-Preferred Brand (no generic available)**	Drug marketed under a specific trademark or name by specific drug manufacturer and NOT on Aetna's drug list	$50	$50
Specialty Brand***	High-cost prescription medications used to treat complex, chronic conditions	$100	Contact your local pharmacy for more information.

*The cost of prescriptions under the Basic Managed Choice uses coinsurance. You pay 30% of the cost for Generic and Preferred Brand and 50% of the Non-Preferred Brand (not subject to the medical plan deductible).

**If you or your physician requests a brand-name medication when a generic is available, you will pay the applicable copay plus the difference between the cost of the generic and brand-name drug.

***Specialty Brand drugs must be filled at CVS Specialty Pharmacy.

Dental

Preventative oral care can prevent unexpected costs and pain that often come with oral surgery and emergency procedures.

Active PPO with PPOII and Extend℠ Networks will once again be offered through Aetna. There will be a small increase increase in your weekly contribution. If you do not take action, your current election will automatically roll over for 2027.

Highlights of the Plan

- When you use a dentist participating in Aetna's network, you are only responsible for the difference between the in-network fee for the service provided and the plan's payment for the approved service.
- When you use out-of-network providers, your cost is based on the Reasonable and Customary (R&C) cost,instead of a discounted fee. You are responsible for any amounts that exceed the R&C, in addition to the deductible and coinsurance.
- As of 2027, implants will be covered under Major Services, and Orthodontia is available for adults.

For more information or to locate in-network dental providers, visit **www.aetna.com** or call **1-877-467-0933**.

Active PPO with PPOII and Extend℠ Networks	**In-Network** (You Pay)	**Out-of-Network** (You Pay)
Annual Deductible - Individual[1]	$25	$25
Annual Deductible - Family[1]	$75	$75
Preventive Services	100%	100%
Basic Services	85%	80%
Major Services	65%	60%
Annual Benefit Maximum	$2,500	$2,500
Office Visit Copay	N/A	N/A
Orthodonic Services	50%	50%
Orthodonic Deductible	None	None
Orthodonic Lifetime Maximum	$2,500	$2,500

[1] The deductible applies to Basic and Major Services only.

Vision

Vision benefits are so much more than an eye exam. They help you save money, stay healthy and see everything life has to offer.

EyeMed is the vision provider for Price Rite. With this plan, you pay less when you visit a provider that participates in the EyeMed Select network.

Annual eye exams not only help correct vision problems, but comprehensive exams can also reveal the warning signs of more serious undiagnosed problems, such as high blood pressure, heart disease, and diabetes.

Highlights of the Plan

- When you visit an EyeMed network provider, you pay a copay for eye exams and materials.
- When you visit an out-of-network provider, you generally pay the provider directly and submit an itemized bill to EyeMed. You will receive reimbursement up to the scheduled amount for each service covered and supply.

For more information or to locate EyeMed vision providers, visit **www.eyemedvisioncare.com** or call **1-866-939-3633**.

Benefit	In-Network Member Cost	Out-of-Network Reimbursement
Exam (one every 12 months)	No copay	No copay
Frames (one every 24 months)	No copay; $180 allowance + 20% off balance over $180	No copy; $180 allowance + 20% off balance over $180
Lenses (one every 12 months)		
Single Vision	No copay	Up to $25
Bifocal	No copay	Up to $39
Trifocal	No copay	Up to $63
Contact Lenses (one order every 12 mos.)		
Conventional	No copay; $180 allowance + 15% balance over $180	Up to $144
Disposable	No copay; $180 allowance	Up to $144
Medically Necessary	No copay; Paid in Full	Up to $200

Long Term Disability

Long-term disability insurance pays a portion of your income if you're unable to work due to illness or injury.

MetLife is the benefits provider for LTD
LTD benefits provide you with a portion of your salary in the event you become disabled and cannot work. If you are rendered disabled by a licensed physician, for 90 days or more, you can apply and be considered for the LTD benefit. If approved, you would be eligible to receive 60% of your monthly earnings, up to $15,000 depending on the class defined.

Team Members are provided with two LTD tax options:

Option 1 — Employee Paid/Weekly Contribution
If you pay the LTD premium with after-tax dollars, and you become disabled, the benefit of 60% (of your pre disability wages) is NOT subject to Federal Tax. Therefore, you would receive the full 60% benefit.

Option 2 — Company Paid
If you become disabled, any disability benefit paid to you would be subject to Federal taxes. So, if the benefit paid is 60% of your pre-disability wages, and you are in the 21% tax bracket, your net benefit check would be about 48% of your normal gross wages.



During Open Enrollment, you have the opportunity to review your current participation in LTD and can make changes to your current LTD tax election.

Note: LTD contributory plans are governed by IRS regulations. The IRS has a three-year "look back" on LTD plans. If you contribute from the inception of the policy and continue to contribute throughout the policy years, any benefit paid to you will not be subject to Federal Tax. If, however, you change your mind during the policy period, you will have to pay the premium for 3 full years before the benefit is not subject to tax. If you pay the premium for 1 or 2 years in the 3-year period, the taxable portion is prorated accordingly.

Life Insurance and AD&D

Emotional devastation from death is diffcult. Invest in life insurance so your family is taken care of financially.

MetLife is the benefits provider for Life Insurance and AD&D. During Open Enrollment for the 2027 plan year, you can enroll in Optional Life Insurance. EOI will be required for all new enrollments and increases with a guaranteed issuance up to $300,000 for a Team Member and up to $50,000 for spouse.

Basic Life Insurance and AD&D is offered through MetLife and is 1.5x the Team Member's salary at a maximum of $500,000. It is company paid, at no cost to the Team Member. On January 1st, following the day the participant turns age 70, the benefit reduces to 50% of 1.5x the Team Member's salary.

Your designated beneficiary/beneficiaries will be the recipient of this benefit. It's important to ensure the beneficiary/beneficiaries are up to date.

Optional Life Insurance and AD&D is also offered through MetLife. The products will be offered on an Team Member Paid Basis. This payment will be facilitated via a weekly payroll deduction. You have greater purchasing power because of your employer rather than purchasing the product as an individual.

Age reductions have been removed for Optional Life and Optional AD&D.

Team Members are offered:

- Optional Life for the Team Member
- Dependent Life for your Spouse/Partner and Children
- Accidental Death & Dismemberment

New hires have 30 days from their date of hire to enroll in these products on guaranteed issue basis. This means you and your dependents can enroll for the maximum amounts of insurance (as stated below) and you do not have to provide any statement/proof with regard to your own or your dependent's current health status.

If you do not enroll when initially eligible, you will still be able to enroll for these products at any time during the year, but both you and your dependents will be required to provide a current statement of health status and coverage is "pending" until MetLife approves this information.

Below is the coverage offered:

Team Member Optional Life Insurance

- Team Members can opt for 1, 2 or 3x's their salary to a maximum coverage amount of $750,000.

Spouse Optional Life Insurance

- Total coverage amount is up to 50% of Team Member election to a max of $375,000.

Dependent Optional Life Insurance

- Dependent child coverage to age 26 - coverage amount is a flat $5,000.

Optional Accidental Death & Dismemberment

- Accidental Death & Dismemberment coverage is also an optional benefit available to you, if you elect this coverage; the amount usually mirrors the Voluntary Optional Life base election.

This coverage is age band rated. The rate you pay will change when you move to a different age group.

As always, we encourage you to comparison shop any product you may be interested in. Your main goal is to purchase the best coverage for you and your family at the best price.

Additional Coverage Options

Take a look at these Voluntary Benefits. They offer great value for you and your family.

Critical Illness Insurance
If you or a loved one has a verified diagnosis of a covered critical illness, this coverage provides you with a lump- sum payment that can be used to pay for everyday living expenses and out of pocket medical costs, like copays and deductibles. Here's why it's a good idea to choose Critical Illness Insurance:

- Provides a lump-sum payment for covered conditions such as heart attack, cancer or stroke
- Guaranteed acceptance for you and other eligible family members
- Also pays a benefit for an annual Health Screening

Hospital Indemnity Insurance
The plan pays a lump-sum benefit if you or a covered member of your family is hospitalized.

With an average cost of over $12,974 per hospital stay in the U.S., it's easy to see why having hospital indemnity coverage may make good financial sense. If you are admitted or confined to a hospital due to an accident or illness, Hospital Indemnity Insurance benefits can help pay for out-of-pocket costs, such as health insurance deductibles and copayments—or for anything that you see fit. Plus, this coverage features:

- Guaranteed acceptance for you and other eligible family members
- Payments made directly to you, not your healthcare provider
- Coverage is portable, meaning you can take it with you if your employment status changes you.

As with most insurance plans, limitations and requirements may apply to these benefits. Please visit **www.priceritebenefits.com** for the details.

Accident Insurance
Accidents can happen at any time and when you least expect them. Accident Insurance can help you be better prepared.

Accidents happen frequently and can be very costly. In fact, the average cost for one visit to the Emergency Room (ER) is $2,100. Accident Insurance can help you pay for costs not covered by your medical insurance. There are over 150 covered conditions associated with an accident that could trigger benefits, including various injuries, hospitalization, medical services and treatments. Plus, this coverage features:

- Guaranteed acceptance for you and other eligible family members
- Payments made directly to you
- Benefits you can use in any way you see fit: use them to help pay for insurance deductibles, copays and more.

MetLife Legal Plans
Get access to legal expertise for both expected and unexpected events such as buying or selling a home, starting a family, dealing with identity theft, caring for aging parents, and much more.

NOTE: If you are currently enrolled in the MetLife Legal Plan and do not take action, you will continue to have this benefit in 2027. Your next opportunity to disenroll will be during the next annual Open Enrollment period for plan year 2028 unless you experience a Qualified Life Event.

THESE BENEFITS ARE AVAILABLE YEAR ROUND

MetLife Auto, Home, and Pet Insurance

Price Rite is proud to offer associates innovative Home, Auto, and Pet Insurance in association with MetLife

Additional Programs and Resources

Aetna Concierge Customer
Your Aetna Concierge is like your personal health care assistant – helping you to understand your health plan and answering your questions. Your concierge can even make appointments for you.

Aetna Drug Savings Review Program
This review of pharmacy claims helps increase safety, save money, and improve quality of care. Drug reviews are done after prescriptions are filled and coordinated directly with your medical provider, so you won't experience any disruptions.

Aetna One Choice
This program provides ongoing nurse support and coaching. Whether you're managing a chronic condition or have an upcoming surgery, Aetna nurses can help you put together a plan, understand your benefits, and answer your questions.

Aetna Pharmacy Advisory Program
If you have one of 10 conditions, Aetna's Care Support team will contact you directly when you fill your first prescription to treat your conditions, if you are not taking your medication as directed, and if you miss one or more refills.

PrudentRx Copay Optimization Minimizes the Impact of Specialty Medications
While most medicines are available at your local ShopRite Pharmacy, there are an estimated 400 limited distribution medicines that are only available through CVS Health's specialty pharmacy. These medicines are often costly and therefore the PrudentRx Copay Optimization program, offered by CVS Health, is an innovative specialty copay plan design that enables payors to help reduce or eliminate member cost- share for specialty medications. If you currently take a specialty medication, PrudentRx will be reaching out to you directly to coordinate this benefit where you can receive a $0 copay on the specialty medication.

Memorial Sloan Kettering Cancer Center (MSK) Direct
Through a partnership with Memorial Sloan Kettering Cancer Center (MSK), MSK Direct is your resource for prevention through diagnosis and ongoing treatment in cancer care, providing practical and emotional support. An MSK Direct Care Advisor helps find the best cancer care possible, either through on-site care at MSK (in certain states), or remotely, where MSK doctors guide your treatment in partnership with your local doctor.

Meru Health
This is a 12-week program clinically proven to reduce anxiety, stress, depression, and long-term burnout. In addition, you can access the entire program from the convenience of your smartphone. Visit www.meruhealth.com/aetna to get started today.

The Aetna Health Assessment
This is a simple, confidential tool for helping you to stay healthy. The assessment can give you valuable insight into your overall health and potential risk factors. Once you complete the online questionnaire, you will receive a full assessment of your current health status, including potential risk factors and tips to modify your behavior for better health. You can print the report for your files and share it with your doctor. The Health Assessment is completely confidential and takes less than 30 minutes to complete. To take the assessment, visit www.aetna. com.

2nd.MD Health Advisory Services
Feel confident about your medical decisions. As part of your employer provided benefits, you can get an expert second opinion from a leading specialist at no additional cost to you. Connect directly with experts by video from the comfort of home. Ask questions, get answers and feel empowered to make the best healthcare decisions. This benefit is available for all full-time, non-union Team Members and their eligible dependents.

Making your benefit elections

Understanding your options is the first step to making a decision for the next calendar year.

This is NOT an active enrollment. If you choose not to take action, your current coverage elections will roll over into the following year. However, this is your chance to thoughtfully review, compare, and select the benefits that best support your 2027 goals.

You will use Dayforce to enroll in medical, dental, vision plans; optional AD&D, dependent optional life insurance for children, LTD, and Voluntary MetLife plans.

Dayforce is a self-service tool that gives Team Members the ability to select benefit plans electronically, eliminating the need for paper forms.

Understand your benefit options

- Review your enrollment materials and Summary of Benefits and Coverage (SBCs) on your benefits website.
- Consider your benefit needs and compare your options for 2027.
- Contact your Benefits Administrator if you have any questions.

Make your benefit decisions

- Choose your benefits carefully.
- Decide if you want to add or remove dependents from your coverage. If you're adding a dependent for the first time, you are required to provide dependent documentation, such as a marriage certificate and/ or a birth certificate.

Important note about verification Existing dependents will not need to be reverified; required supporting documentation will not be requested. You will be prompted to select dependents from a list. Please be advised that you will see all dependents (current and previous), so please ensure to only select those that you wish to cover.

