



2026 Open Enrollment Decision Guide

Choose your 2026 benefits Nov. 3-14, 2025

UnitedFamilyBenefits.com is your place to:

- Enroll in your 2026 benefits
- Add or remove dependents
- Link to ALEX, the online benefits counselor
- Access your 2026 Benefits Guide and Rate Sheet
- And more

Open Enrollment for 2026 Benefits Is November 3-14, 2025

It's time to choose your benefits for 2026!

Open Enrollment is your once-per-year chance to change your benefits for the following year, unless you experience a qualifying life event like getting married or having a baby in 2026. Now is the time to act as an owner by learning about your plan options, evaluating your needs for 2026, and educating yourself how your plans work so you can get the most out of your benefits in 2026.

Healthcare costs continue to rise nationwide. Our medical plans are self-funded with all claims paid by Albertsons and Team Members, not an insurance company. In 2026, it's more important than ever that you **own your benefits** and do your part to keep healthcare costs in check by understanding how your medical plan works and using the specialty care programs that are part of your BCI medical plans, including Transcarent Surgery Care, Teladoc telemedicine, and 2nd.MD second opinion services and oncology support services.

Take some time to review this guide and learn about the changes and what you need to do. More information is available on UnitedFamilyBenefits.com.

Benefits Requalification Process Underway

We are currently evaluating average hours worked over the most recent measurement period to determine benefits eligibility in 2026. You will receive a letter mailed to your home in early November if you and/or your dependents will be newly eligible for benefits in 2026 or will be losing eligibility for benefits in 2026 based on the latest measurement period.



Aligning Our Benefits Through One Best Way

Through One Best Way, we strive to offer benefits that are equitable to all Team Members and standardize processes and procedures to streamline our benefits administration.

While many benefits today are standardized throughout the Company, starting January 1, 2026, United Team Members will see some benefit changes in order to align the options and coverage choices available with our standard offerings.

For the 2026 Open Enrollment, you will enroll or make changes to your benefits on UnitedFamilyBenefits.com. Then in Q1 2026, Team Member self-service will be moved onto myACI, Albertsons HR system. Timing for this change will coincide with the store conversion calendar. More information will be available in the coming months.

Read this Open Enrollment Decision Guide for an overview of the benefit changes starting January 1, 2026.

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Your Open Enrollment Checklist

- Find out what's new & changing in 2026. Read through this Guide and visit UnitedFamilyBenefits.com to learn about all the changes.
- Own your benefits in 2026. Make sure your benefit selections are right for you in the coming year by reviewing your current elections and learning about your options your personal benefits counselor, ALEX, can help. Healthcare costs are rising in 2026 check your 2026 paycheck deductions by accessing your rate sheet. Learn how to talk to ALEX, view your rate sheet and access other resources on page 15.
- Enroll in 2026 Benefits. Choose your coverage starting Nov. 3 through Nov. 14, 2025 (11:59 pm MT). Go to UnitedFamilyBenefits.com and click on the Login button at the top of the home page to access online enrollment. See page 17 for more information on how to enroll.

If You Don't Enroll

It's important that you actively participate in this year's Open Enrollment to make sure your 2026 benefits meet your needs and your budget. If you decide to keep the same plans you have today, you do not need to re-enroll during Open Enrollment unless you wish to participate in a health savings account (HSA) or flexible spending accounts (FSAs) in 2026. Per IRS rules, you must elect an HSA contribution and re-enroll in FSAs each year.



Each year there are legally required notices and disclosures that Albertsons Companies (or our insurance carriers) must make available to participants in the benefit plans. Required legal notices are available on unitedfamilybenefits.com. To request a printed copy of any legally required notices at no cost, call the Benefits Team at 888-791-0220.

What's Changing in 2026

All changes are effective January 1, 2026, unless otherwise noted.

1

Core Medical Plan Annual Deductibles and Out-of-Pocket Maximums

The annual deductibles and out-of-pocket maximums for the EPO/EPO-HP Network Plan, the PPO Plan, and the HSA Plan are increasing for 2026.

	EPO/EPO-HPN		PPO		HSA	
	Current	2026	Current	2026	Current	2026
Deductible (Individual/ Family)	\$1,500/\$4,500	\$1,750/\$5,250	\$1,000/\$2,000	\$1,300/\$2,600	\$2,000/\$4,000	\$2,400/\$4,800
Out-of- Pocket Max (Individual/Family)	\$5,000/\$15,000	\$5,500/\$16,500	\$4,000/\$8,000	\$4,700/\$9,400	\$6,000/\$12,000	\$6,200/\$12,400

2

HSA Plan Deductible Waived for Virtual Care

Effective September 1, 2025, the deductible is waived for telemedicine services for HSA Plan members. This means HSA Plan members can now access virtual care through Teladoc for just a \$20 copay and virtual orthopedic consultations through Transcarent at no cost.

3

EPO Network/EPO HP Network Plan and PPO Medical Plan Prescription Drug Changes

EPO/EPO-HPN and PPO				
	Current	2026		
Brand Preferred (30-day supply)	20% (min \$30, max \$90)	25% (min \$35, max \$105)		
Brand Non-Preferred (30-day supply)	30% (min \$60, max \$120)	35% (min \$70, max \$140)		
Brand Preferred (90-day supply)	20% (min \$90, max \$270)	25% (min \$105, max \$315)		
Brand Non-Preferred (90-day supply)	30% (min \$180, max \$360)	35% (min \$210, max \$420)		



Commuter Benefits NEW



Commuter benefits save you money on taxes if you commute to and from work using public transportation. Once you sign up, funds are deducted from your paycheck automatically on a pre-tax basis, lowering your taxable income. For 2026, the maximum pre-tax transit contribution is \$325 per month. More information is available in the 2026 Benefits Guide.



Tax Savings Account Maximum Contribution Increases



Type of Account	Current	2026
 Health Savings Account Team Member Only Family Age 55 or older catch-up contribution 	\$4,300 \$8,550 \$1,000	\$4,400 \$8,750 \$1,000
 Healthcare Flexible Spending Account Annual maximum contribution Annual carryover limit 	\$3,200 \$640	\$3,300 \$660
Dependent Daycare Flexible Spending Account • Annual maximum contribution*	\$5,000	\$7,500

^{*} Dependent Daycare FSA annual maximum contribution for highly compensated Team Members is reduced based on results of IRS non-discrimination testing.





Blue Cross of Idaho (BCI) members now have access to a network of Care Guides, including specially trained registered nurses, licensed social workers and other health professionals. Care Guides provide support along your healthcare journey, answering questions you may not have had a chance to discuss with your doctor. You can rely on your Care Guide to understand your care path, medications, treatment decision support and more. Learn more on page 13.

Mental Health Benefit Changes



- The ComPsych Employee Assistance Program (EAP) will now cover up to **five visits** by phone or in person per issue per year, up from three visits.
- Due to low enrollment, Teladoc Mental Health Digital (formerly myStrength) will no longer be available. You can access similar emotional support resources via your ComPsych EAP at guidanceresources.com (Company code: ALBERTSONSCOMPANIES). Learn more. Teladoc Mental Health virtual visits will continue to be available in 2026.

2nd.MD Oncology Support Replacing AccessHope

In 2026, AccessHope Cancer Care will be replaced by 2nd.MD Oncology Support. 2nd.MD Oncology Support offers second opinions and oncology care guidance from expert physicians with specialized expertise from National Cancer Institute (NCI)-Designated Comprehensive Cancer Centers. Plus, you'll have the support of 2nd.MD's expert oncology nurses, as well as access to specialists to provide supportive consults on topics such as nutrition, cardio-oncology, neurology, and more.

New Fidelity Medicare Services

You and your loved ones have access to **Fidelity Medicare Services** at no cost to you. The program includes Medicare education and information about plan options, access to licensed insurance agents who specialize in Medicare, personalized assistance enrolling and more! Learn more.

Other Changes Coming in 2026

Dental Plan Change: The Delta Dental Enhanced Plus Plan is discontinued for 2026. Any Team Members who live outside of the Delta Dental provider network will be enrolled in the Out-of-Area Dental Plan. Team Member contributions are the same as the Delta Dental Enhanced Plan.

Auto and Home Insurance Enhancements: The Auto and Home Insurance options will be expanded with coverage available through MetLife, Liberty Mutual and Travelers starting 01/01/2026 with premium payment options available through each carrier. Premium payment through payroll deduction for Farmers Auto and Home Insurance will be discontinued 12/31/2025.

Flexible Spending Accounts: Flexible Spending Account administration will move from Navia to HealthEquity starting 01/01/2026. Eligible FSA expenses incurred on or before 12/31/2025 should be submitted to Navia for reimbursement. Eligible FSA expenses incurred on or after 01/01/2026 should be submitted to HealthEquity for reimbursement.

Purchasing Power: Purchasing Power will be discontinued starting 01/01/2026. Paycheck deductions for existing Purchasing Power purchases will continue through 12/31/2026.

Texas Savings Plan: The Texas Savings Plan (529 college savings plan) will be discontinued starting 01/01/2026.

COBRA Administration: Starting 01/01/2026, COBRA administration will move from Inspira (PayFlex) to HealthEquity.

Domestic Partner Coverage: Company contributions toward coverage for a domestic partner and children of domestic partner is considered imputed income and will be subject to federal and state income taxes, Social Security and Medicare taxes (FICA). Imputed income is added to a Team Member's annual salary for income tax purposes and reflected on the Team Member's W-2 statement. Imputed income is separate from, and in addition to, weekly paycheck contributions for medical, dental and vision coverage.

New Hire or Newly Eligible Waiting Period: The waiting period for full-time new hires or newly eligible Team Members is changing on 01/01/2026. Coverage (including Short and Long-Term Disability) will begin the first of the month following 30 days of continuous employment from date of hire or date of transfer into a benefits-eligible position as long as enrollment is completed within 31 days of hire date or 31 days from transfer into a benefits-eligible position.

Waiting Period for Short and Long-Term Disability Insurance for Part-time Team Members: Short and Long-term Disability Insurance for part-time Team Members will begin on the first day of the 6th month of employment once the requirements of the initial measurement period are satisfied.

Termination of Benefits Coverage: Starting 01/01/2026, benefits coverage will end at 11:59 pm MT on the Team Member's termination date.

Coverage End Date for a Child Reaching Age 26: Starting 01/01/2026, coverage for a dependent child covered under a Team Members benefits coverage will end at 11:59 pm MT on the date the child turns age 26.

Pharmacy Benefits Spotlight

NEW MedImpact Assist® Non-Specialty Copay Assistance Program

Now, PPO and EPO/EPO HP-Network members can reduce their prescription drug costs by using available non-specialty medication manufacturers' copay assistance programs. These programs encourage the use of their brand name drug while minimizing your out-of-pocket expense and save you and Albertsons money.

How the Program Works

You fill an eligible brand-name prescription



MedImpact sends you a letter letting you know your medication is eligible and how to enroll in the program



Next time you fill your prescription, the pharmacy will apply the manufacturer copay assistance, and MedImpact covers any remaining cost.

You pay \$0

Example: Diabetic brand medication*
Current member copay is \$90
Current plan cost is \$430

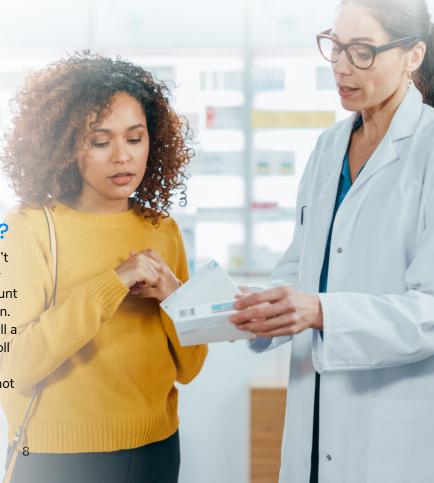
Current plan cost is \$430		
Prescription cost:	\$520 (with insurance discount)	
Pharma coupon:	(\$175)	
\$0 copay card:	(\$10)	
Team Member pays:	\$0 (savings of \$90)	
Plan pays:	\$345 (savings of \$85)	

^{*}Example for illustration purposes only.

What Happens If You Don't Enroll?

If your medication is eligible for the program but you don't enroll, you will pay your regular copay/coinsurance under your medical plan plus a copay penalty equal to the amount of the manufacturer's copay assistance for the medication. This copay will apply beginning with the third time you fill a medication. The copay penalty you pay if you do not enroll in the program will not apply to your plan deductible or out-of-pocket maximum. The total amount you pay will not exceed the cost of the medication.

<u>More information</u> about the program is available on myACI-Benefits.com.





Consider the HSA or EPO/EPO-HPN Plans in 2026

If you're currently enrolled in the PPO Plan, 2026 might be a good time to consider switching to the HSA Plan or EPO/EPO High Performance Network Plan. Paycheck deductions will rise next year, and the PPO Plan is Albertsons Companies' most expensive plan because you pay more money via paycheck deductions and less money when you receive care, which makes sense for people who need a lot of healthcare, but not for everyone. Switching to a different plan could save you money while still providing the same high-quality care.

HSA and EPO Plans: What to Know

Here are some key features of the HSA and EPO/EPO-HPN Plans:

Uses the same PPO network as the PPO Plan and has out-of-network coverage, so you can continue seeing your same providers Comes with access to a tax-free Health Savings Account (HSA) that allows you to save money on healthcare expenses Lower paycheck deductions than the PPO Plan No out-of-network coverage – you can only use doctors and facilities in the network, except in case of emergency Same plan, two different networks depending on your location— check the EPO/EPO-HPN Zip Code finder to see which network would apply to you Lowest paycheck deductions of the Company plans

Cost Example:

EPO, PPO and HSA Plans

The following example shows what a Team Member who needs a **low** amount of healthcare might pay during 2026. **Note**: The paycheck deductions shown apply only to **non-union Team Members** in a core rate group.

Felix is 39 years old and covers only himself. He is relatively healthy. During the year, he goes to the doctor for a bad case of the flu, and also uses his Teladoc telemedicine benefits to see a therapist twice and to have a dermatologist look at a rash. He also has 3 generic prescriptions over the course of the year.

	EPO Plan	PPO Plan	HSA Plan
1 in-person doctor visit	\$20	\$1801	\$180¹
3 Teladoc virtual visits	\$60	\$60	\$60
3 Generic prescriptions (30-day supply)	\$30	\$30	\$105²
Total cost of medical services	\$110	\$270	\$345
Total 2026 medical Plan paycheck deductions	+ \$795.60	+ \$1,393.60	+ \$1,034.80
Total out-of-pocket costs	\$905.60	\$1,663.60	\$1,379.80
Savings compared to the PPO plan	\$756.00	n/a	\$283.80

¹ Felix pays the full cost until he meets his annual deductible.

In this example, Felix could save \$756.00 if he enrolled in the EPO Plan or \$283.80 if he enrolled in the HSA Plan compared to the cost of the PPO Plan.

Still need help choosing your plan?

Consider talking to **ALEX**, your personalized online benefits counselor. Tell ALEX a little bit about yourself and your healthcare needs, and he can help you break down the costs to make sure you're in the right plan for you.

New for Open Enrollment: ALEX can access claims history for BCI members giving you a more accurate picture of how much you spent on health care over a period of time.

Will You Meet Your Deductible in 2025?

Only 52% of Team Members in the PPO Plan met their deductible in 2024. If you're enrolled in the PPO Plan and are part of that 48% who did not meet their deductible, switching plans might be right for you.

² Felix pays the full cost of 3 generic prescriptions at \$35 per prescription until he meets his annual deductible.

Lower Your Costs in 2026 with Specialty

2nd.MD Expert Medical Advice and Second Opinions

With 2nd.MD, you and your covered family members have free access to expert medical advice and second opinions from some of the country's leading medical providers. When you're facing a medical decision, 2nd.MD can help you receive the right diagnosis and the right course of treatment at no cost to you.

New for 2026! 2nd.MD oncology support services are designed to empower you throughout your diagnosis and support you at every turn. No matter where you are in your cancer journey, whether you've just been diagnosed or are looking for additional care options, 2nd.MD can help.

Get Started with 2nd.MD

Go to www.2nd.md/albertsons

Download the 2nd.MD app on the <u>App Store</u> or <u>Google Play</u>

Call 2nd.MD at **866-841-2575**

Visit the Doctor Virtually

Through Teladoc Health virtual care, BCI members can talk to a board-certified doctor or therapist by phone or video for medical, mental health, nutrition and dermatology concerns—all for just a \$20 copay per visit.

- Virtual care visits are safe and available 24/7.
- Covered adult family members can use it.
- It's less expensive than an emergency room or urgent care visit and may cost the same as or less than your primary care physician.

General Medical

Talk to a doctor 24/7 for non-emergency conditions such as flu, sinus infections, allergies, sore throats, coughs, COVID-19 advice and more. **\$20 copay**

Mental/Emotional Health

Talk to a therapist or psychiatrist of your choice 7 days a week from anywhere for stress, anxiety, depression, trauma, grief, burnout and more. **\$20 copay**

Get Started with Teladoc

Go to Teladochealth.com

Care Programs

Transcarent Surgery Care

Transcarent Surgery Care connects you with top-rated facilities and surgeons for non-emergency surgeries. If you're in the PPO or EPO plan, your surgery is covered 100% when you go through Transcarent — you pay nothing. If you're in the HSA plan, you pay nothing once you have met your deductible for the year. Transcarent takes care of the details so you can focus on your surgery and recovery, all while saving you money.

Get Started with Transcarent

Go to the <u>Albertsons</u>
Page on the
Transcarent website

Download the Transcarent app on the <u>App Store</u> or Google Play

Call Transcarent at 888-387-3912

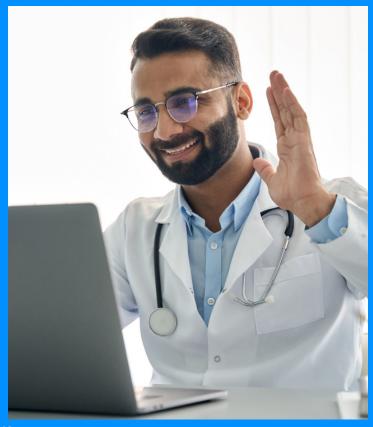
Dermatology

Upload images and details of a skin issue in the Teladoc app. A dermatologist will review them and provide a treatment plan within 24 hours or less for acne, psoriasis, rashes, rosacea, eczema, skin infections, moles and skin spots. **\$20 copay**

Nutrition

Talk to a registered dietitian for weight management, digestive issues, special diets, food allergies, custom meal plan and more. **\$20 copay**

Download the Teladoc app from the <u>App Store</u> or <u>Google Play</u> Call Teladoc at **800-TELADOC** (835-2362)



Introducing BCI Care Guides

Starting in 2026, Blue Cross of Idaho (BCI) members will have access to **Care Guides** — specially trained registered nurses and social workers that serve as your point of contact for all care and health plan matters.

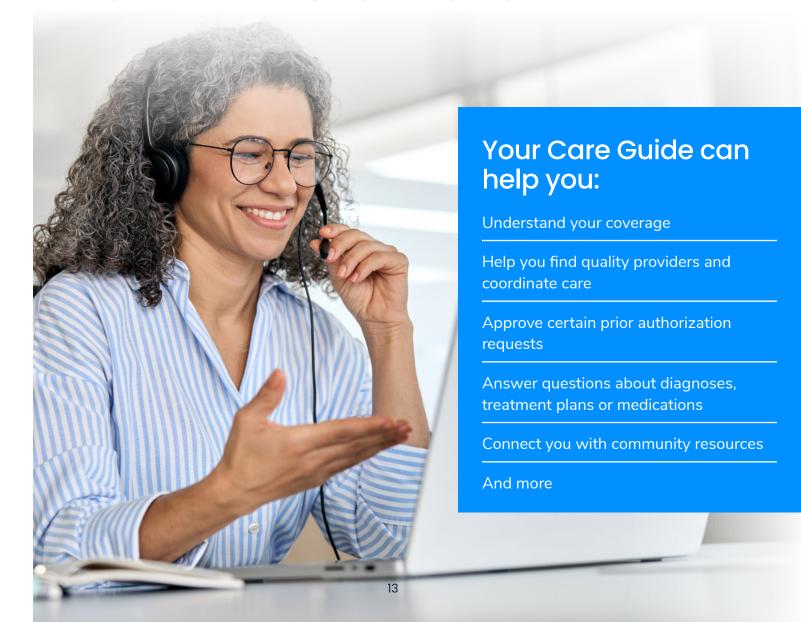
Care Guides allow you to get answers to the questions that you may not have had a chance to discuss with your doctor. You can rely on your Care Guide to understand of your care path, medications, treatment decision support, and more.

Who Can Use a Care Guide?

All adult BCI members have access to Care Guides and can contact them by phone or email. You may also be contacted if a health concern is identified and your Care Guide reaches out to offer support. For example, a new diagnosis, a recent Emergency Room visit, or reminding you about important preventive care you're due for.

You can also call BCI at 855-854-1412 and ask to be connected to a Care Guide.

Your personal Care Guide will be assigned to you and learn your unique health needs.



Special Optional Life Insurance Opportunity

For 2026 Open Enrollment, Evidence of Insurability (EOI) is waived when electing optional life insurance up to the guaranteed issue amount. Don't miss this one-time optional life insurance enrollment opportunity!

How Life Insurance Works

Benefits-eligible Team Members automatically receive **basic life insurance** paid by the Company in the amount of 2x your annual base salary.

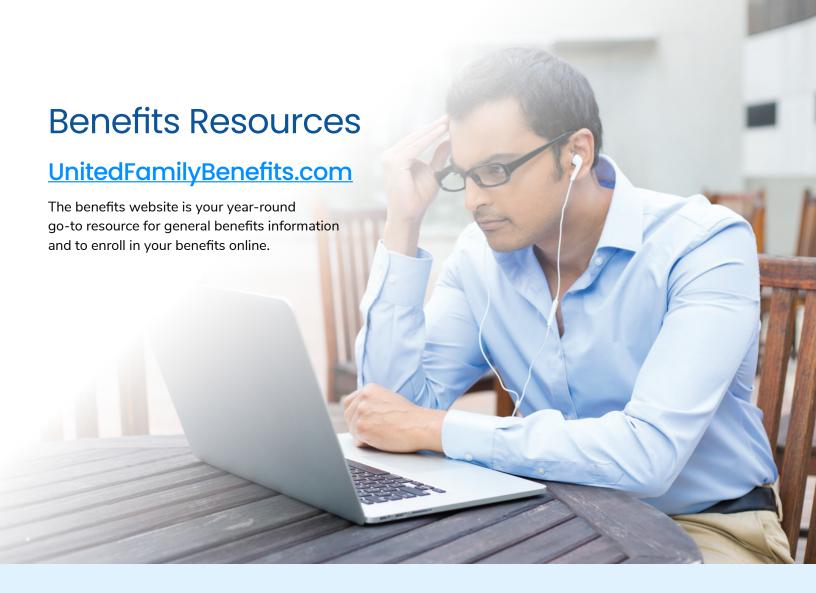
If you are not a member of an excluded bargaining unit, you can also purchase **optional life insurance** for yourself and your family members in the following amounts.

Normally, if you purchase optional life when you are first eligible for Company benefits, you can elect coverage up to the **guaranteed issue amount** shown in the table above **without** needing to provide **Evidence of Insurability** (EOI) to the insurance

carrier, The Hartford. If you don't enroll when you are first eligible, or if you enroll in or increase to a coverage amount above the guaranteed issue amount, you must provide EOI.

However, during 2026 Open Enrollment, **anyone** can elect optional life insurance up to the guaranteed issue amount without needing to provide EOI. This is a one-time opportunity during 2026 Open Enrollment only, so don't miss out. You will still need to provide EOI if you elect coverage above the guaranteed issue amount shown above, or if you enroll or increase overage during a later enrollment period.

1X to 8X annual base salary, up to \$2,000,000 (up to \$3,000,000 combined basic life + optional life) \$10,000 to \$500,000 in \$10,000 increments \$5,000 to \$20,000 in \$5,000 increments	Lesser of 3x annual base salary of \$1,000,000 \$50,000 maximum \$20,000 maximum
\$10,000 increments \$5,000 to \$20,000 in \$5,000	
	\$20,000 maximum



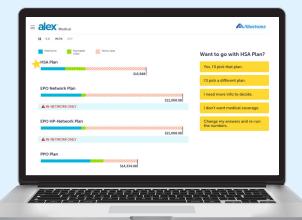
Check out ALEX!

ALEX, your online benefits counselor, can walk you through your benefit options and recommend the best choice for you based on your personal situation.



To access ALEX:

- To start a conversation with ALEX, go to: https://start.myalex.com/albertsons/unitedbenefits.
- 2. From the ALEX landing page, click on **Let's get started**.
- 3. Choose between the full ALEX benefits counselor experience or ALEX Go, a text-based, mobile-first version of ALEX. ALEX Go is available in both English and Spanish.
- 4. Follow the prompts to get your personalized benefits recommendations from ALEX!



Attend an Open Enrollment or HSA Webinar!

Open Enrollment Webinar

Join us for a **one-hour webinar** to learn everything you need to know about Open Enrollment, including what's new for 2026, how to enroll using myACI Benefits, where to find benefits and enrollment resources, and more.

HSA Webinars

Join the **HSA Basics Webinar** to learn how a health savings account (HSA) works and can help you save money. Join the **HSA Advanced Webinar** to learn more about investing your HSA dollars, using your HSA funds for retirement, and more.

2026 Open Enrollment Webinar Schedule

Date/Time	Webinar Topic	Webinar Link
Oct. 27 at 1 pm CT	HSA Basics	Link to Webinar
Oct. 28 at 1 pm CT	HSA Advanced	Link to Webinar
Oct. 28 at 10 am CT	2026 Open Enrollment	Link to Webinar
Oct. 31 at 12:30 pm CT	2026 Open Enrollment	Link to Webinar

If you are unable to attend a live webinar, you can access a recorded version from UnitedFamilyBenefits.com.

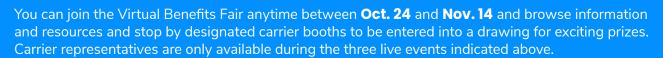
Join Us at the Virtual Benefits Fair

Join the Virtual Benefits Fair to speak with carrier representatives, learn about 2026 benefits and access available resources to help you enroll.

<u>Click here</u> to join the fair between Oct. 24 and Nov. 14 or scan the QR code to join on your mobile device. Representatives from many benefit carriers will be available to chat and answer questions during three live events.

Virtual Benefits Fair Live Events		
Oct. 27	9 am—1 pm CT	
Nov. 3	1 pm—5 pm CT	
Nov. 5	10 am—2 pm CT	





This document is part of the "Benefit Program Material" for the 2026 Plan Year. The terms of the Benefit Program Material are incorporated by reference as part of the Plan to the extent set forth in the Plan document. The terms of this Benefit Program Material do not control to the extent those terms conflict with the terms of any applicable Summary Plan Description, Summary of Material Modifications, Evidence of Coverage or the Plan document. This document is not intended to extend any right to benefits except as provided under the Plan. Certain benefits may not apply to Team Members represented by a labor union unless specified in the terms of the collective bargaining agreement.

How to Enroll

Choose your coverage for 2026

November 3-14, 2025

- 1 Review your benefit options carefully.
- Think about what you might need for the planned and unplanned events in your life.
- Enroll in coverage that fits you best. It's easy:



Gather birth dates and Social Security Numbers of new dependents you plan to add to your coverage.



To enroll:

- Go to UnitedFamilyBenefits.com.
- Click on the Log in button at the top of the page between Nov. 3 and Nov. 14 to enroll.
- Once you have completed your online enrollment, be sure to PRINT YOUR CONFIRMATION FOR PROOF OF ENROLLMENT. If there is a discrepancy in your enrollment elections, a copy of your confirmation statement will be required.

The deadline to enroll is 11:59 pm MT on November 14.

Have Questions?

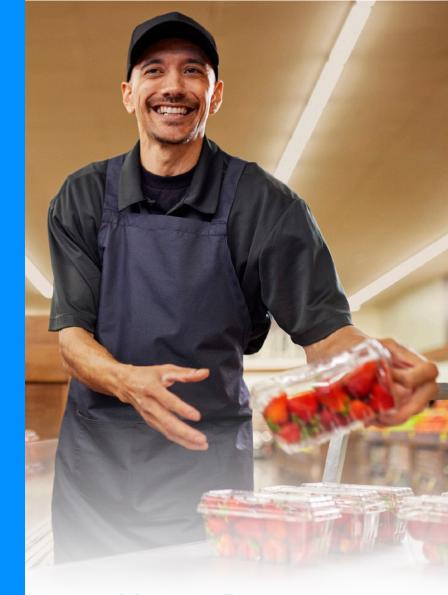
Call the Benefits team at 888-791-0220.



If you are enrolling new dependents under your medical, dental or vision coverage, you must submit documentation verifying their eligibility for coverage.

Download a <u>Dependent Verification</u> Requirements Flyer.

All verification documents must be received by January 31, 2026. Coverage for a newly enrolled dependent is not effective and payroll deductions for your dependent's coverage (if applicable) will not begin until you submit your completed verification documents and they are approved.



Are You a Recent New Hire?

If you are a new hire who started working within the past month, you will need to enroll in benefits twice in the upcoming weeks — once to choose your benefits for the remainder of 2025, and once to choose your benefits for 2026.

Once you have completed your 2025 benefits enrollment and submitted any required documentation to verify dependent eligibility, call the Benefits team at **888-791-0220** for instructions on how to complete your benefits enrollment for 2026.

