

YOUR WELL-BEING
YOUR HEALTH
YOUR CHOICE

2026
Open Enrollment
November 5 –21, 2025

Invited





AGENDA



What to Expect in 2026



Preventive Diagnostic Screening



2026 Benefit Plans



ACA Look-back Period



2026 Open Enrollment – November 5–21

WHAT TO EXPECT IN 2026



- **Increased Medical Premiums:** Driven by rising healthcare costs and trends
- **SimplePay:** Same great plan offering better value - you will now pay at the time of service instead of receiving one monthly bill
- **Preventive Diagnostic Screening:** Due by **November 30, 2025**, to avoid a surcharge on 2026 medical plan premiums
 - **New** Additional option for a more comprehensive screening at a discounted rate
- **New Medicare Resource — Medicare Choice Group:** For Employees and family who are 65 or turning 65 in 2026
- **New Dental Plan Option:** Three Dental plan options going forward - DHMO and a PPO that includes orthodontia coverage and a PPO with 90% out-of-network coverage but excludes orthodontia
- **Update Taxsaver Now Navia Benefit Solutions:** Same great pretax spending accounts, now with a new name
- **New ACA Look-Back Period (for 2027):** Starting next year (2026), the ACA look-back period will take place earlier and Employees will know by October 1 about their benefit status.
- **New 401(k) Administrator — Fidelity** will be the new 401(k) plan administrator starting November 1. Visit **401k.com** to register and set up your account.

A vertical graphic for the 2026 Open Enrollment period. At the top is the "Invited" logo in white script on a dark blue background. Below this is a white section containing five photos: a chef, a woman in a blue shirt, a man in a white shirt, a group of five people in blue shirts, and a woman in a black shirt. To the right of the photos is the text "YOUR WELL-BEING. YOUR HEALTH. YOUR CHOICE." in blue. At the bottom is a dark blue section with the text "2026 Open Enrollment" and "November 5 – 21, 2025" in white.

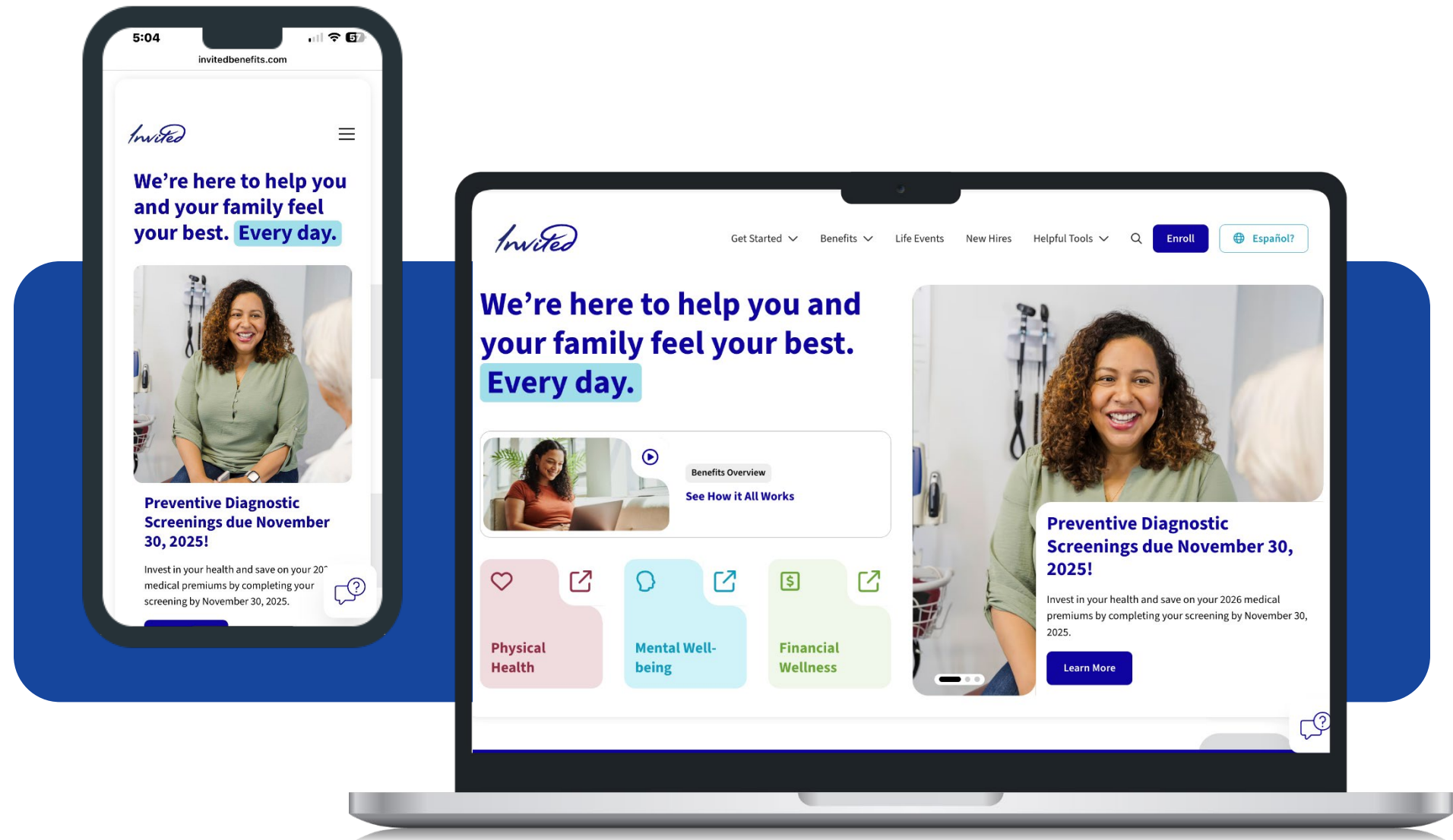
Invited

YOUR WELL-BEING.
YOUR HEALTH.
YOUR CHOICE.

2026 Open Enrollment
November 5 – 21, 2025

The information you need at your fingertips:

- **Benefits Guide** - searchable tools & downloadable
- **Preventive Diagnostic Screening** – instructions & lab test locator
- **Decision Support Tool** - get help to select your medical plan
- **Learning Library** — videos, glossary of terms and other information
- **Enrollment Instructions**
- **Password Reset Instructions**
- **Find a Provider**
- **FAQs**





Preventive Diagnostic Screening

Complete your screening by
November 30, 2025



PREVENTIVE DIAGNOSTIC SCREENING



3 in 5 U.S. adults avoid or delay in-person healthcare



67% of Americans have a chronic health condition



2 in 5 Americans are concerned that they may have an undiagnosed health condition

Get screened by the **November 30 deadline** to avoid the 2026 medical plan premium surcharge.

Can help detect health risk factors early — when you have the best chance to avoid developing chronic diseases.

Save up to \$780 per year (\$1,560 with spouse) in paycheck deductions for you, plus \$780 for your covered spouse. Dependents are not required to complete.

Test results are private
& confidential

- Invited will not receive your results
- Your medical plan coverage is not affected by your results

TWO SCREENING OPTIONS AVAILABLE

Invited

Option 1 **Quest** Basic Screening

COST: Free

ELIGIBILITY: Employees & their spouse

WHAT IT COVERS: One-time lab visit

TESTS INCLUDED: Basic blood work, such as cholesterol and blood count

ONGOING SUPPORT: Take results to your primary care physician for ongoing care, if needed

my.questforhealth.com

Registration Key: **InvitedClubs**

Option 2 **Function Health** Comprehensive Screening

New

COST: \$399 discounted price¹

ELIGIBILITY: Employees Only

WHAT IT COVERS: Lab visits and ongoing membership

TESTS INCLUDED: Basic blood work plus 100+ advanced lab tests

ONGOING SUPPORT: Includes mid-year follow-up testing and tracking; take results to your primary care physician for ongoing care, if needed

functionhealth.com/c/invited1

Function Membership Includes

- 100+ whole-body lab tests at the start of your membership and 60+ follow-up test midyear
- A detailed results summary and targeted action plan from a licensed clinician
- Results stored in one secure platform for easy access anytime

Screening results are NOT shared with Invited and have no impact on your medical plan coverage

¹Due to state regulations, individuals testing in New York or New Jersey will be charged additional fees of ~\$250 per year.

QUEST PREVENTIVE DIAGNOSTIC SCREENING

Invited



1

Register Yourself & Your Covered Spouse

my.questforhealth.com

Returning user: Use last year's username & password

New user: Follow the prompts to create a new account; *Registration Key: InvitedClubs*



2

Schedule Your Screening

(select an option)

1. **Attend an On-Site Event**
(registration required)
2. **Visit a Quest Patient Service Center**
3. **Physician Results Form**
Visit your doctor & submit completed bloodwork
(12/1/24–11/30/25)



3

Attend your Screening

Tips:

- Fast 9–10 hours before your appointment
- Drink plenty of water



4

Review Your Results

- Available 5–7 days after screening at:
my.questforhealth.com



5

Avoid a Medical Plan Surcharge

Complete your screening by November 30 or you will pay an additional biweekly surcharge on your 2026 medical biweekly paycheck deductions:

- \$30 for you, and
- \$30 for your covered spouse

FUNCTION PREVENTIVE DIAGNOSTIC SCREENING

New

Invited



1

Register Yourself

functionhealth.com/c/invited1

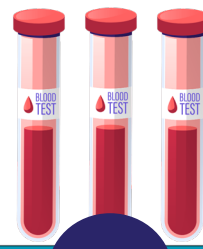
1. Click on 'Start Testing' button
2. Complete the consent form to create your account
 - You'll need your Employee ID
 - Verify your eligibility by entering the primary email you have listed in Oracle



2

Schedule Your Screening

- Once you submit your registration, you'll receive an email & text to schedule your screening; select from various locations & times.
- Add-on tests are available for an additional fee; FSA or HSA can be used



3

Attend your Screening

Tips:

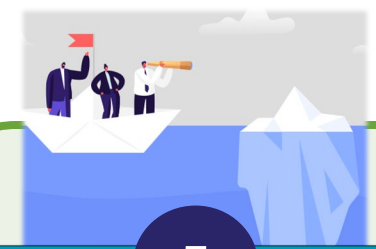
- Fast 9–10 hours before your appointment
- Drink plenty of water



4

Review Your Results

- Available 5–7 days after screening
- Log in to your Function account to view your results
- A clinical summary & targeted action plan will also be included
- Review your results with your primary care physician
- Take part in your six-month follow-up testing (60+ follow-up tests to measure progress)



5

Avoid a Medical Plan Surcharge

Complete your screening by November 30

or you will pay an additional biweekly surcharge on your 2026 medical biweekly paycheck deductions:

- \$30 for you, and
- \$30 for your covered spouse



Medical Plans

- Aetna SimplePay Health
- United Healthcare (UHC) High-Deductible Plan
- UHC Choice Plus Plan
- UHC Minimum Essential Coverage



KEY MEDICAL PLAN TERMS TO KNOW



Invited



SURCHARGE



PREMIUM



OUT-OF-
NETWORK (OON)



ANNUAL
DEDUCTIBLE



IN-NETWORK
(IN)



OUT OF POCKET
MAXIMUM (OOP)



PROVIDER
TIERS



COPAY



PRIMARY CARE
PHYSICIAN (PCP)



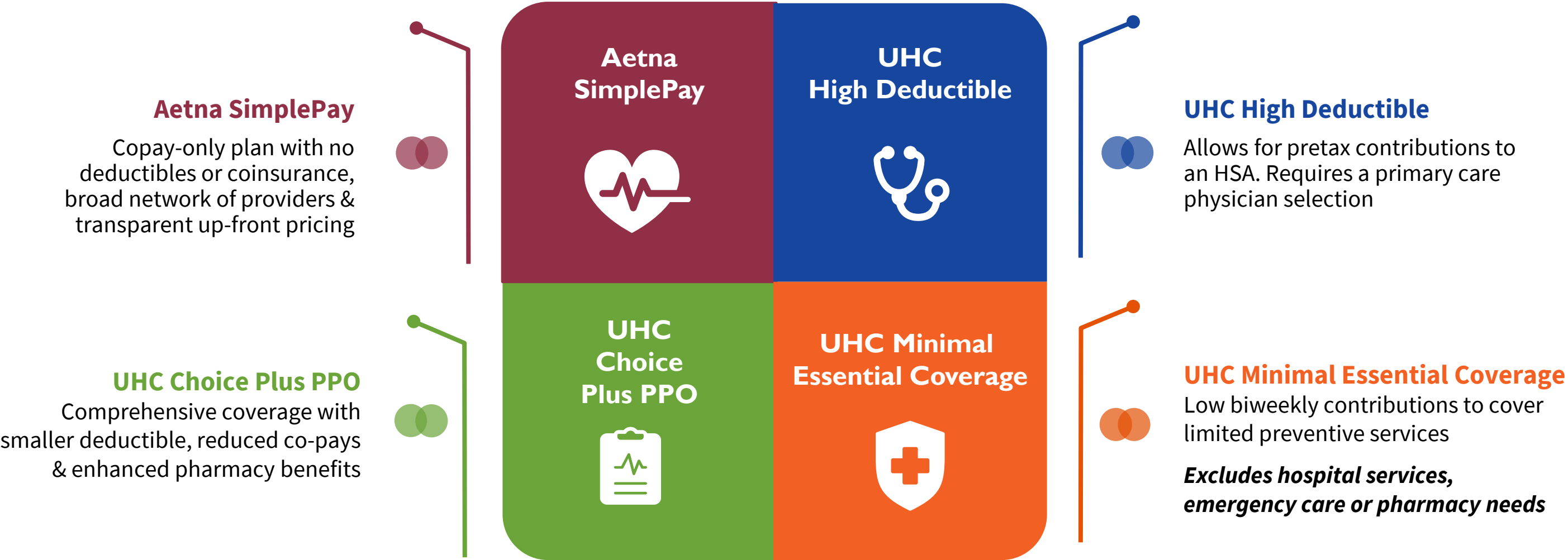
SPECIALIST



COINSURANCE

[Click here](#) for
downloadable key
medical terms .

MEDICAL PLANS



2026 MEDICAL PLAN OVERVIEW



What's Important to Me?	Aetna SimplePay Health	UHC HDHP with HSA	UHC Choice Plus PPO	UHC Healthy Start MEC Plan
Premium (Cost per Paycheck)	\$\$	\$\$	\$\$\$\$	\$
Deductible	Copays Only No Deductible	\$4,000 Individual \$8,000 Family	\$2,500 Individual \$6,250 Family	N/A Limited Care Plan
Copay/Coinsurance Cost when you go to an In-Network doctor	\$30 Tier 1 PCP \$65 Tier 1 Specialist	\$4,000 Deductible, then 20% coinsurance	\$10 / \$40 PCP ^[1] \$30 / \$90 Specialty	\$25 PCP \$50 Specialists Limited to 4 visits per year
Telehealth (Medical & Mental)	\$0 through HealthJoy	\$0 through HealthJoy	\$0 through HealthJoy	\$0 through HealthJoy
Prescription Drug cost	\$20 Generic Drug \$50 Brand Name Drug	\$4,000 Deductible, then 20% coinsurance	\$15 Generic Drug \$40 Brand Name Drug	Not Covered
Annual Out of Pocket maximum	\$6,500 Individual \$13,000 Family	\$8,000 Individual \$16,000 Family	\$7,900 Individual \$15,800 Family	\$9,100 Individual \$18,200 Family
Total Per Paycheck and Out of Pocket Costs Based on Average Utilization	\$\$	\$\$\$	\$\$\$\$	\$
Ease of use	Pay the tiered price at the time of service	You pay the estimate at the time of service Claim filed with insurance company to determine final amount due		

^[1] Tier 1 is only available for the following provider types. All others will receive tier 2 pricing: PCPs – Family, Internal, and Pediatrician, OB-GYN, Allergy, Cardiology, Endocrinology, Gastroenterology, General Surgery, Nephrology, Neurology, Neurosurgery, Orthopedics and Spine, Otolaryngology, Pulmonology



**They all work,
but ...**

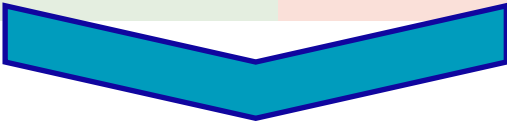


**THINK
DIFFERENTLY**

YOUR DOLLARS: PAYCHECK DEDUCTIONS



DEDUCTIONS			
	AETNA SIMPLEPAY	UHC PPO	UHC HDHP
INDIV.	\$2,167	\$2,985	\$1,084
FAMILY	\$8,182	\$11,269	\$7,285



\$3,087 difference

Money you could keep in your pocket
(annually) each year before you even
use the plan.

YOUR DOLLARS: MEDICAL NEEDS

Invited

Save anywhere between
\$2.5 - \$8k on deductible
expenses

ANNUAL DEDUCTIBLE			
	AETNA SIMPLEPAY	UHC PPO	UHC HDHP
INDIV.	\$0	\$2,500	\$4,000
FAMILY	\$0	\$6,250	\$8,000

Note: Amount you pay for in-network covered healthcare services before your insurance kicks in; copays do not count toward deductible

COPAY/COINSURANCE			
	AETNA SIMPLEPAY	UHC PPO	UHC HDHP
PCP	\$30 Tier 1	\$10 Tier 1	\$4,000 deductible then 20%
SPECIALIST	\$65 Tier 1	\$30 Tier 1	

Copay: A fixed fee paid for doctor visits, services or prescriptions, 98% spend is in network
Coinsurance (HDHP): % of covered expenses you pay after meeting annual deductible

YOUR DOLLARS: MAX OUT OF POCKET (OOP)



MAX OUT OF POCKET			
	AETNA SIMPLEPAY	UHC PPO	UHC HDHP
INDIV.	\$6,500	\$7,900	\$8,000
FAMILY	\$13,000	\$15,800	\$16,000

OOP within Network: Maximum amount you will pay for all deductibles, copayments or coinsurance during calendar year

Save anywhere between
\$1.4 - \$3k on out-of-pocket
expenses if you have a lot
of medical expenses

WHY SIMPLEPAY: EASY & TRANSPARENT

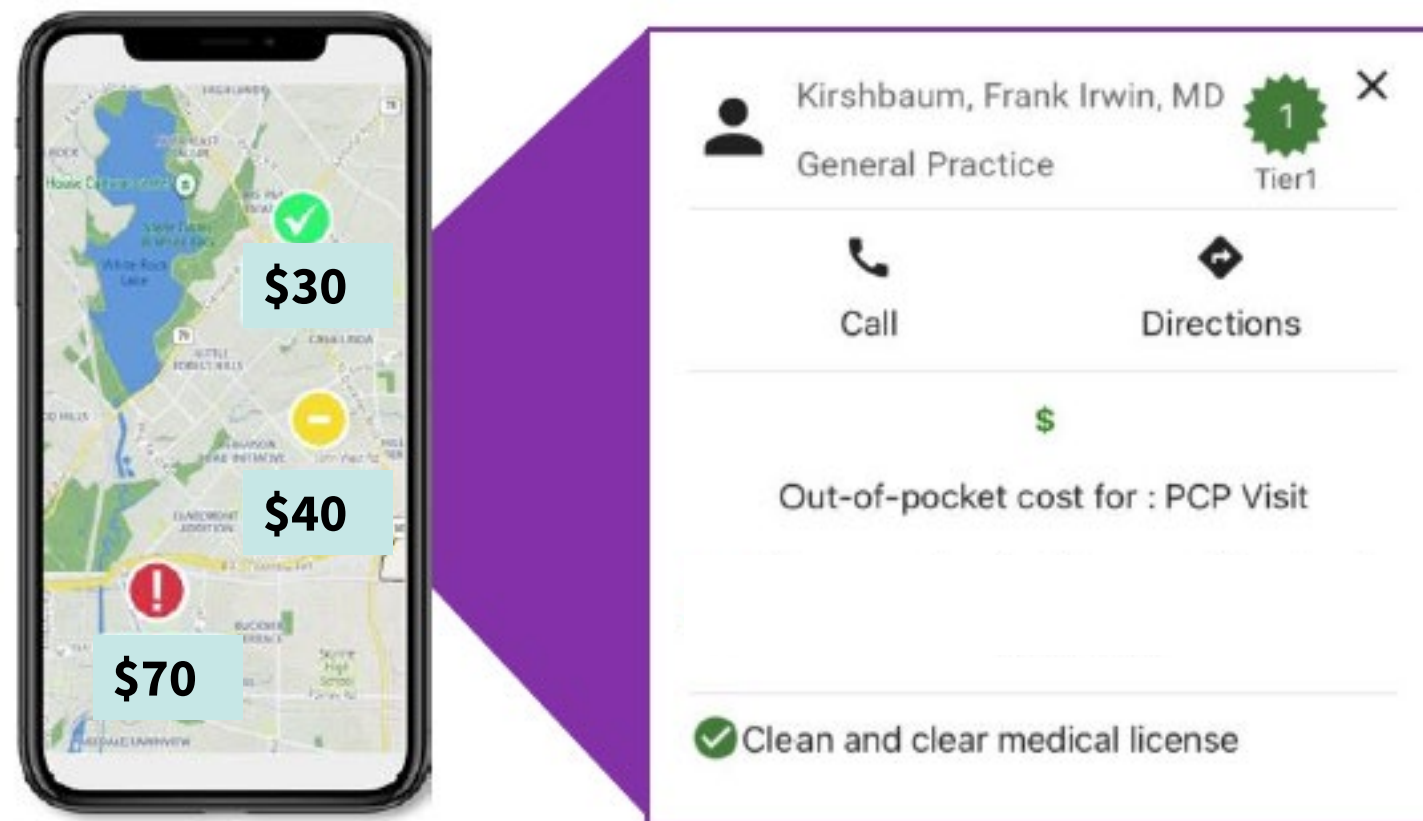


Offers Better Value

- ✓ No deductibles
- ✓ Broad network of providers (Aetna's largest network)
- ✓ Medical services and prescriptions have preset copays – no surprise expenses

Easy to Use

- ✓ SimplePay app allows you to compare providers (cost, quality rankings) & plan ahead
- ✓ Cost transparency - know all costs up-front
- ✓ Easily see contact info for a provider



MEDICAL PLANS



Biweekly Deductions **BEFORE** Surcharge

Enrollment Tier	Aetna SimplePay Plan	UHC High-Deductible Health Plan	UHC Choice Plus PPO	UHC Minimum Essential Coverage
Employee Only	\$83.35	\$41.72	\$114.81	\$29.00
Employee + Spouse	\$250.06	\$217.40	\$344.42	\$52.08
Employee + Child(ren)	\$205.83	\$173.92	\$283.50	\$52.08
Employee + Family	\$314.71	\$280.21	\$433.46	\$52.08

AVOID THE SURCHARGE

To avoid a \$30 biweekly surcharge, you and your covered spouse must complete the Preventive Diagnostic Screening by **November 30**

Have you considered the Aetna Simple Pay Plan?

TAX-FREE SAVINGS ACCOUNTS



TaxSaver is Now Navia Benefit Solutions

	Health Savings Account (HSA)	Health Care Flexible Spending Account (HCFSA)	Dependent Care Flexible Spending Account (DCFSA)	Commuter Spending Account
Plan Enrollment	UHC High-Deductible Health Plan only	Aetna SimplePay UHC Choice Plus UHC MEC	N/A – available to all	N/A – available to all
Eligible Expense Type	Medical, prescription, vision & dental expenses	Medical, prescription, vision & dental expenses	Child/Day care & adult dependent care expenses	Parking & public transportation expenses
When Funds Available	Funds available in the account as deducted from paycheck	Full amount Jan. 1	Funds available in the account as deducted from paycheck	Funds available in the account as deducted from paycheck
Rollover Option	Yes: Can roll over & invested	No: “Use it or lose it”*	No: “Use it or lose it”*	Yes: Can roll over to the next month
Deposit Limit	Individual – \$4,400 Family – \$8,750	\$3,400 per year	\$7,500 per year	\$340 per month

**Ability to rollover \$680 into the following plan year for reimbursement to prior plan year*

MEDICAL PLAN DECISION TOOL



Profile

Healthcare

Your results: 3 people

These benefit combinations were below, or customized your own

Once you've made a selection

Overview

Compare

Profile

Healthcare

Protection

Retirement

Budgeting

Action Plan

Now, let's talk about your household's typical healthcare needs.

By telling us what a typical year of healthcare usage looks like for you, we're able to calculate your out-of-pocket costs and evaluate which combinations fit those needs.

Later on, you'll have a chance to note any big changes you have planned for next year, like scheduled surgeries or having a baby so think of this page as your chance to tell us what an average year looks like.

Heads up

Where available, we have personalized your estimated usage based on your household's claims from the past year (when not available, we default this to the lowest level).

Make sure to review and update these levels if last year was not a typical year.

You

Medical

Routine

Moderate

High

Preventive care and maybe a couple of specialist or mental health visits.

Prescription Drugs

Low

Moderate

High

Up to 7 generic prescriptions and up to 1 preferred brand filled during the year.

Dental

Routine

Moderate

High

You get cleanings and checkups every 6 months even if you're not experiencing any oral problems.

Compare levels

Compare levels

Compare levels

Symbol Key

(Compared to Selected Option)

✗ Not included

Health Plan	PREMIUMS	PREMIUMS	PREMIUMS
UnitedHealthcare High Deductible Health Plan (HDHP)	\$1,141.92/annual	✗	✗
UnitedHealthcare Minimum Essential Coverage Plan	✗	\$754.00/annual	✗
Aetna SimplePay Health Plan	✗	✗	\$2,063.88/annual

Need help choosing a medical plan option for 2026?

Use this interactive tool to simplify your choices and make an informed decision.

[Click Here](#)





Tools and Resources

- Medicare Resources
- HealthJoy
- Teladoc – FREE Virtual Care
- Mental Well-being Resources
- Know Where to Go for Care
- ER vs. Urgent Care



Working past 65 and starting to think about Medicare?

Invited has partnered with **Medicare Choice Group** to provide free Medicare education and personalized enrollment support.

Licensed advisors offer one-on-one, unbiased guidance to help you understand your Medicare options and make confident decisions — **at no cost to you.**

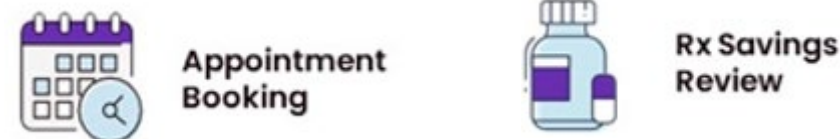
Available to all Invited Employees, as well as their spouses, parents and loved ones who are eligible for Medicare.

During your free consultation, your Medicare advisor will:

- Review your current coverage and compare Medicare options
- Assess your needs to identify the right plan
- Explain benefits, costs and provider access
- Recommend a transition timeline
- Guide you through enrollment



➤ HealthJoy is an easy-to-use mobile app that makes accessing healthcare benefits simple and convenient.



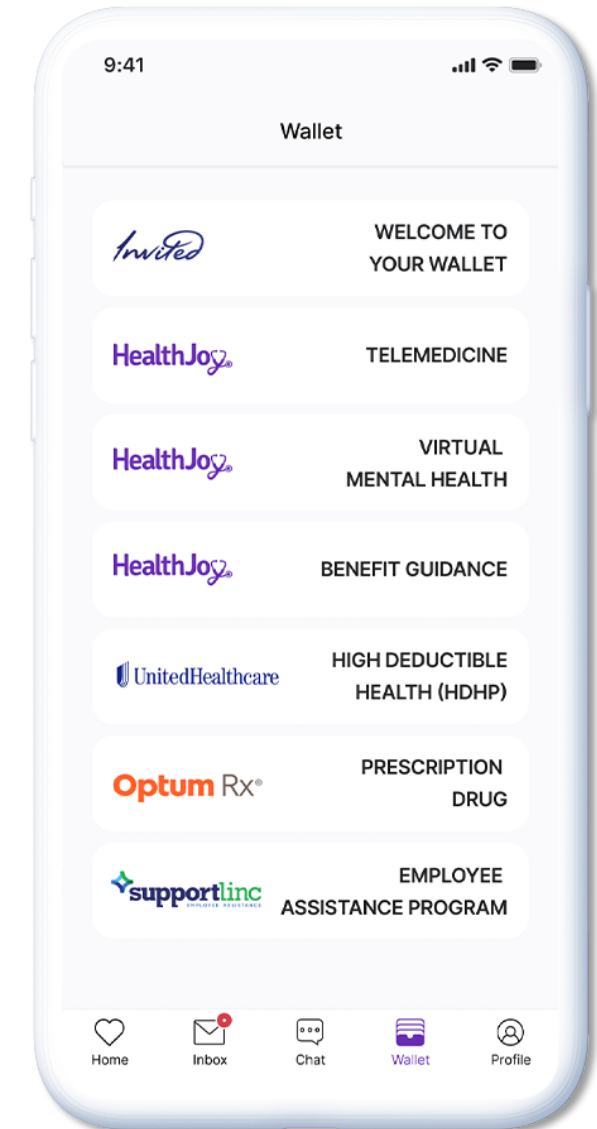
With Teladoc Health, you can access FREE care for:

General Medical services

- Provides critical care for non-emergency conditions
- Covers cold, flu, sinus infections, allergies and more

Mental Health services¹

- High-quality virtual therapy and psychiatric services
- Provided by board-certified psychiatrists and licensed therapists
- Supports a wide range of conditions



¹Mental Health services are for employees and dependents 13 years of age and older. Visit your provider website for other low-cost options available

FREE MENTAL WELL-BEING RESOURCES



➤ BENEFIT FOR **ALL** EMPLOYEES

Services through SupportLinc are \$0 cost to you.

Phone: 888-881-LINC (5462)

Web: supportlinc.com

Username: invitedclubs

In-the-Moment Support

- Provides up to six face-to-face visits per incident with licensed counselors
- Available for you, your spouse and child(ren) — with appointments 24/7



In-the-moment
support and
short-term counseling



Mobile app
and web access
on the go



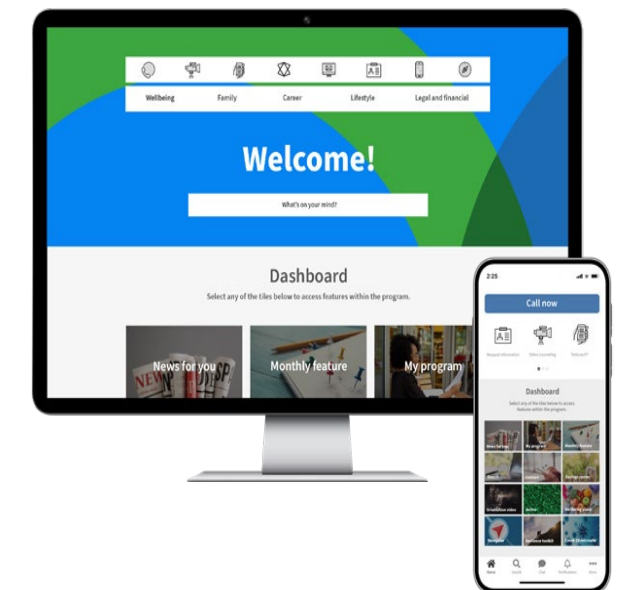
Text-based
therapy
services



Personalized
emotional
wellbeing
coaching



Expert assistance with
legal concerns, financial
planning, child care,
elder care and more



KNOW WHERE TO GO FOR CARE



Best Care	Symptoms	Cost to You (Tier 1)	Wait Time	Hours
Medical Telehealth	Common cold or flu, sinus & ear infection, mild COVID-19, allergies and UTI	\$0	10-15 minutes <i>(no appointment)</i>	24/7
Mental Telehealth	Anxiety, depression, mood disorders, PTSD, other mental well-being challenges	\$0	10-15 minutes <i>(no appointment)</i>	24/7
Primary Care Physician (PCP) or Specialist	General health concerns, wellness exams, ear and sinus pain, chronic conditions	Varies by medical plan (\$)	Varies <i>(appointment needed)</i>	Business office hours <i>(check with provider)</i>
Urgent Care	When you PCP isn't available, minor cuts, burns, sprains, allergic reactions, animal bites, broken bones	Varies by medical plan (\$\$)	Varies <i>(usually no appointment available)</i>	Extended hours <i>(evenings, weekends, holidays)</i>
Emergency Room (go to nearest hospital)	Chest pain or pressure, sudden numbness, uncontrolled bleeding, difficulty breathing, seizure, loss of consciousness	Varies by medical plan (\$\$\$\$)	Long wait times <i>(usually no appointment available)</i>	24/7

KNOW WHERE TO GO FOR CARE

Invited

Urgent Care or ER?

It can be easy to confuse an ER facility with an urgent care clinic, especially when you're eager to get medical care. **Here's are examples of how to determine the difference.**

Urgent Care

- Lower cost than ER (\$\$)
- Extended but limited hours
(often close by 8 p.m.)
- Found in standalone buildings or medical plazas



Emergency Room (ER)

- Highest cost (\$\$\$)
- Open 24/7, always staffed for emergencies
- Often connected to a hospital
- Standalone ER clinics = not recommended
(high cost + extra transfers)

Quick Tip:

If the clinic has ER doctors, ambulances or advanced imaging — it's an ER (and higher cost), not urgent care.



Dental and Vision Plans



DENTAL PLANS: DELTA DENTAL



ORTHODONTIA PLAN

- Choose from **in-network and out-of-network providers**
- 100% coverage for preventive services at in-network dentists
- Small deductible and coinsurance for other services
- Includes orthodontia coverage

New

NO ORTHO DPO PLAN

- Choose **in-network and out-of-network providers**
- 100% coverage for preventive services at in-network dentists
- 90% coverage for out-of-network services**
- Small deductible and coinsurance for other services
- Orthodontia is not covered**

DHMO PLAN

- Must use an in-network dentist**
- 100% coverage for preventive services at in-network dentist
- Copays for other services (no deductibles or coinsurance)
- Lower paycheck cost compared to DPOs
- Available in certain states (AZ, CA, FL, GA, TX & more)

Biweekly Paycheck Deduction

Dental Plan Cost	Ortho DPO Plan	No Ortho DPO Plan	DHMO Plan
Employee Only	\$16.53	\$18.12	\$7.23
Employee & Spouse	\$35.01	\$38.36	\$12.42
Employee & Children	\$34.33	\$37.67	\$12.50
Employee & Family	\$55..66	\$61.05	\$18.01

Find a Provider

www.DeltaDental.com

Click “Find a Dentist”

VISION PLAN: METLIFE



Plan features:

- In-Network & Out-of-Network providers
- \$15 copay for annual eye exam at in-network providers
- \$15 copay for glass lenses at in-network providers
- Frames are available every 2 years
- \$0 for medically necessary contacts and \$120 allowance for elective contacts

Biweekly Paycheck Deduction

Employee Only	\$2.93
Employee & Spouse	\$4.36
Employee & Children	\$4.66
Employee & Family	\$7.45

Find a Provider

www.SuperiorVision.com

Click "Find a Vision Provider"
then "Superior Vision by MetLife"



Additional Benefit Offerings

- Life Insurance
- Disability
- 401(k)
- Voluntary Benefits



BASIC LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)



Invited provides — *at no cost to you* — comprehensive life and accident coverage to protect you and your family.

	Description	Eligible Amount	Age Reduction
Basic Life	Pays in the event of death	Hourly = \$10,000 Salary = \$25,000	35% at age 65 55% at age 70
Accidental Death & Disability	Pays in the event of death or injury due to an accident	Hourly = \$10,000 Salary = \$25,000	35% at age 65 55% at age 70

IMPORTANT: Identify a Designated Beneficiary

SUPPLEMENTAL LIFE INSURANCE



In addition to the Basic Life insurance provided by Invited, you can purchase Supplemental Life Insurance for additional financial protection.



For You

Increments of \$10,000

Maximum: Lesser of \$500,000 or 7 times annual salary

EOI not required if:

- Coverage amount is \$380,000 or less

EOI required if:

- Coverage amount exceeds \$380,000



For Your Spouse

Increments of \$5,000

Maximum: Lesser of \$100,000 or 50% of Employee amount.

EOI not required if:

- Coverage amount is \$30,000 or less

EOI required if:

- Coverage amount exceeds \$30,000



For Your Child

Increments of \$5,000

Maximum: \$25,000

EOI not required

SHORT-TERM DISABILITY (SALARIED)



Income supplement when you are unable to work due to a short-term illness or an injury. Pays a portion of your income to you in a weekly benefit.

Corporate/Salaried Employees

66.67% of earnings up to
\$1,500 per week

Paid for by Invited

Plan Details

14-Day elimination period

11 Weeks benefit duration

SHORT-TERM DISABILITY (HOURLY)

Invited

Income supplement when you are unable to work due to a short-term illness or an injury. Pays a portion of your income to you in a weekly benefit.

Hourly Employees*

60% of earnings up to
\$1,000 per week

Voluntary Benefit

Plan Details

14-Day elimination period

11 Weeks benefit duration

**Eligible Hourly Employees working in clubs may participate in the Voluntary STD Plan (except for Employees working in clubs located in HI, NJ, NY or RI due to state-mandated disability plans available to you).*

VOLUNTARY LONG-TERM DISABILITY

CORPORATE/SALARIED EMPLOYEES



Income supplement when you are unable to work due to a longer-term illness or injury.

- Pays a portion of your income to you in a monthly benefit
- Premiums are based on your monthly earnings

Benefit

60% of earnings up to
\$10,000 per month
maximum

Plan Details

90-Day elimination period
Benefit duration to normal retirement age
Preexisting condition limitation:
3 months/12 months*

**Preexisting Condition Limitation: A preexisting condition is an injury or illness for which you have received advice or treatment from a doctor within three months prior to the effective date of your insurance plan. Any conditions deemed preexisting will be excluded from the policy for the first 12 months.*

FIDELITY: Our NEW 401(k) Vendor

New

Invited

Fidelity is the new 401(k) record keeper for Invited – effective November 1, 2025

Key Dates:

- Blackout Starts: October 29, 2025
- Blackout Ends: December 1, 2025

Your savings, investments, assets, and any loans will **automatically transfer** to Fidelity — no action needed.

You'll **keep saving for retirement without interruption!**

What's New

Invited is excited to introduce the **Roth 401(k)**, a **post-tax savings option** offering tax-free growth potential for your future.

After the blackout, log into explore and update your contributions:

Log in or create an account: 401k.com

Fidelity NetBenefits®

Welcome

U.S. Employees

Outside U.S. Employees

Username

Password

☐ Remember Me

[Forgot login?](#)

Log In

[Register as a new user](#) | [FAQs](#)

VOLUNTARY BENEFITS



Offset out-of-pocket healthcare expenses with supplemental health options:



Accident

- Provides benefits for injuries and accidents
- Amount varies by accident type
- Coverage for on- and off-job incidents



Critical Illness

- Pays lump-sum benefit for specific illnesses (e.g., heart attacks, strokes, cancer, paralysis)
- Coverage levels: \$15,000 or \$30,000



Hospital Indemnity

- Pays benefits for hospital admissions due to sickness, injury, or pregnancy
- \$1,000 per admission, up to 4 times a year
- \$200 daily confinement benefit for up to 15 days a year

- ✓ No preexisting condition limitations
- ✓ No offsets or coordination with other insurance plans
- ✓ No restrictions on how benefit payment is used
- ✓ Helps cover deductibles, copays and out-of-pocket expenses

\$100 payment available if you complete a health screening in 2026!

VOLUNTARY BENEFITS



Additional offerings available to you

Legal Protection

- Covers various legal issues
- Access to attorneys for estate planning, traffic matters, etc.
- Contact attorneys via phone, email, or online
- Reduced costs through MetLife group rates

ID Theft and Fraud Protection

- Monitors personal info and accounts for security
- Alerts for suspicious credit inquiries
- Digital safety tools: VPN/Wi-Fi security and antivirus software

Pet Insurance

- Flexible insurance plans for all pets, no breed exclusions
- Visit any U.S. veterinarian, reimbursement up to 90%; direct billing
- 24/7 access to Telehealth Concierge Services
- Enroll at: www.metlife.com/getpetquote

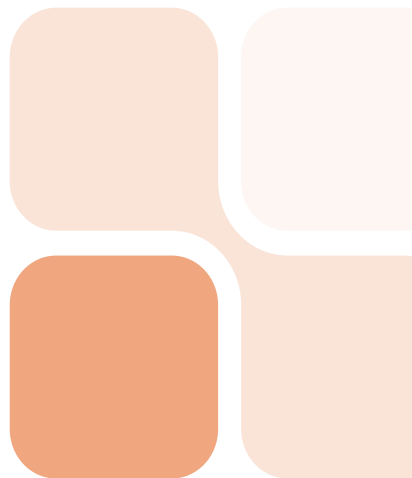
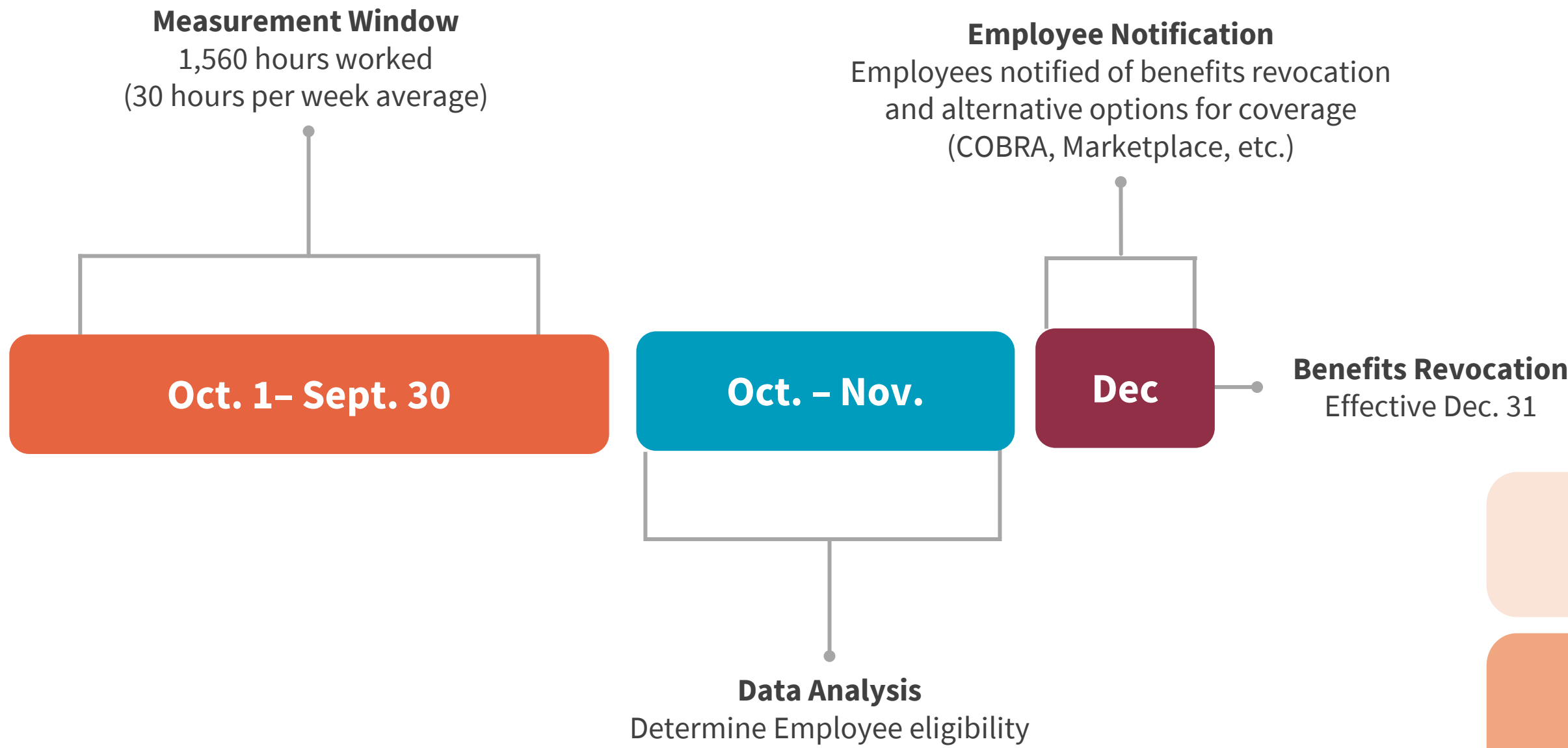
BenefitsMe

- Make interest-free purchases with payroll deductions
- Buy quality brand-name items
- No background checks or down payments
- Includes furniture, appliances, tech, and more
- Create a BenefitsMe account at shop.benefitsme.com

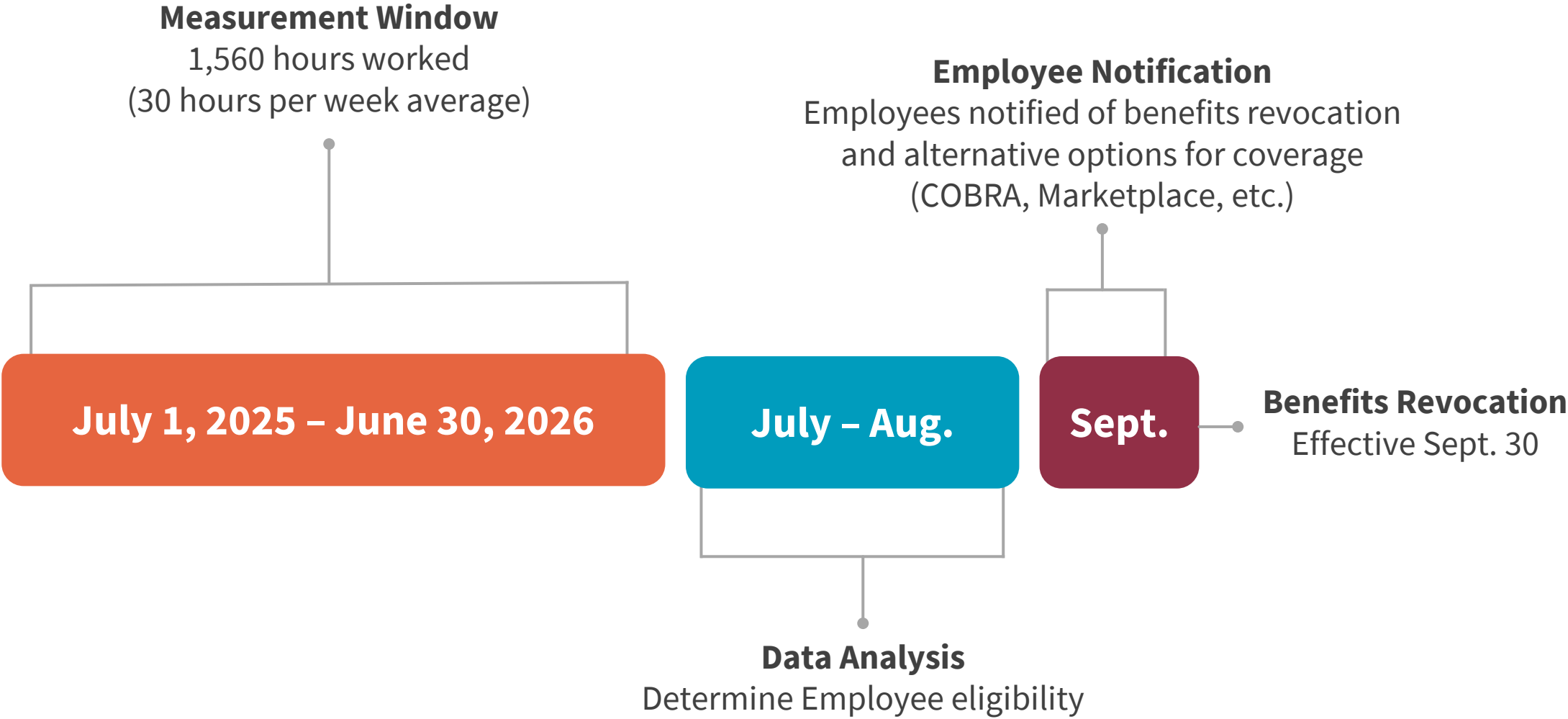
ACA Look-back Period



LOOK-BACK PERIOD: 2026 BENEFITS YEAR



LOOK-BACK PERIOD: 2027 BENEFITS YEAR





Open Enrollment November 5–21

You must enroll by November 21
to have coverage in 2026!



HOW TO ENROLL



ACTIVE ENROLLMENT: November 5–21

All Employees MUST enroll (or decline) for benefit coverage in 2026.

Ready, Set, Enroll.

THREE WAYS TO ENROLL:



Online: Oracle at [MyClubLifeOnline.com](https://myclublifeonline.com)



Phone: Call an Invited Benefits Specialist at (833) 964-2967



Schedule an appointment to enroll by scanning the QR code or [click here](#)



- If you enroll your spouse or child(ren) in a medical plan option, you must submit documentation by **November 30**, or they will not be covered in 2026.
- Receive an **email confirmation** once your enrollment is complete — *review it carefully!*
- Changes are only allowed outside of Open Enrollment with a **qualifying life event** (e.g., marriage, birth, etc.)
- **IMPORTANT:** SSNs will be required for all contacts during open enrollment period

ENROLLMENT ACCESS: MyClubLifeOnline.com

Invited

✓ **It is important to ensure you have access to the Oracle system PRIOR to Open Enrollment**

- Users with email accounts in Active Directory (Invited email users) can use **Single Sign-on**
- Users NOT in Active Directory must log in with **username and password**

✓ **If you need to reset your password, follow these steps:**

1. Click on “**Forgot Password**” and enter email (*must match the work email in Oracle to send*)
2. Enter your Username or Email address in the blank field then press “**Submit**” button
3. You will receive instructions to reset your password (sent to work email on file in Oracle)

Note: Email will come from ecwl.fa.sender@workflow.mail.us2.cloud.oracle.com

✓ **If you forgot your User ID and/or work email associated with your account**

- Contact your Office Manager

✓ **If you need to change the work email associated with your account, follow these steps:**

1. Change your personal email in [Oracle](#)
2. Next day, follow the ‘reset your password’ process outlined above

Note: [Click here](#) to view directions on how to update personal information in Oracle

✓ **Still need assistance?** Contact the Invited IT Support Team at 972-888-7777 | Email: help@invitedclubs.com

Sign In
Oracle Applications Cloud

Company Single Sign-On

User ID

Password

Forgot Password

Sign In

Sign In
ORACLE APPLICATIONS CLOUD

Forgot Password

User Name or Email

Forgot user name

Forgot password

Submit Cancel

WHERE TO GO FOR SUPPORT



CURRENT PLAN INFORMATION

Oracle or on the HealthJoy App: Access details on current plans (enrolled in).



DECISION SUPPORT TOOL

Interactive Tool: Compare plan offerings through a series of questions & analysis to better understand choices and make an informed decision.



DETAILS ON 2026 PLANS & BENEFITS

Benefits Website ([Invitedbenefits.com](https://invitedbenefits.com)): Benefits guide, details on screenings, plans, additional benefits, steps to enroll, etc.



QUESTIONS?

- ✓ Attend an education session
- ✓ Contact Invited Benefits Specialist at 833-964-2967 or invitedbenefits@avantsb.com

QUESTIONS?



Invited
**THANK
YOU**



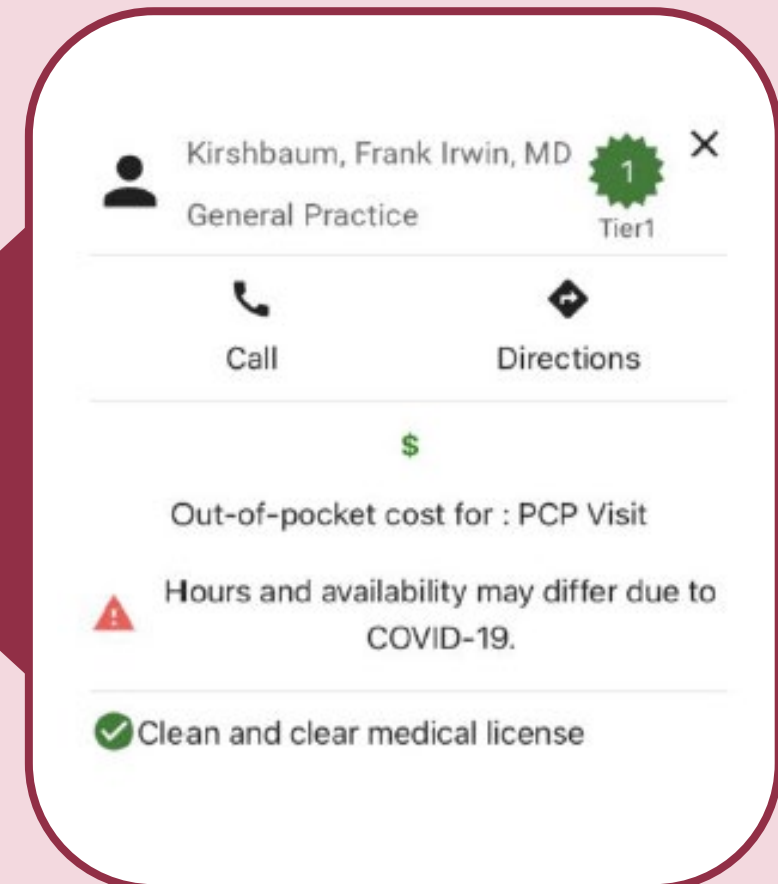
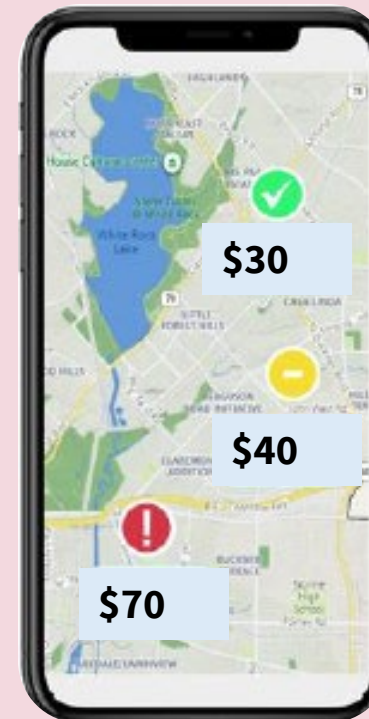
MEDICAL PLANS

Aetna SimplePay

Simple, transparent and more cost-effective for your budget

Offers better value & easy to use:

- ✓ No deductibles
- ✓ Copay pricing for all care and services
- ✓ Premiums lower than the UHC PPO Plan
- ✓ Robust network of providers
- ✓ Dedicated health concierge
- ✓ Easy App that identifies exceptional providers and up-front pricing



MEDICAL PLANS

UHC High-Deductible Health Plan with Health Savings Account

Ideal if you want lower monthly premiums and the ability to save pretax dollars for future medical expenses

The UHC HDHP with HSA includes:

- ✓ Nationwide network of doctor through UnitedHealthcare
- ✓ Pay for care at UHC negotiated network rates until you meet the deductible, then pay coinsurance
- ✓ Health Savings Account (HSA)
- ✓ Premiums lower than the UHC PPO Plan



MEDICAL PLANS

UHC Choice Plus PPO Plan

Smaller deductible, comprehensive coverage and reduced co-pays

The UHC Choice Plus PPO Plan includes:

- ✓ Nationwide network of doctors through UnitedHealthcare
- ✓ See any provider without a referral
- ✓ Copays for doctor visits, medications, and more
- ✓ Per paycheck premiums higher than other plans



MEDICAL PLANS

UHC Minimum Essential Coverage Plan

Affordable essential coverage — ideal for those with minimal medical needs

The UHC MEC Plan includes:

- ✓ Lowest per paycheck premiums
- ✓ No deductibles or coinsurance
- ✓ Copay pricing for doctor visits, up to 4 per year
- ✓ Must use an in-network doctor
- ✓ **No coverage for prescriptions or emergency medical care**

