

2026 Annual Benefits

Open Enrollment

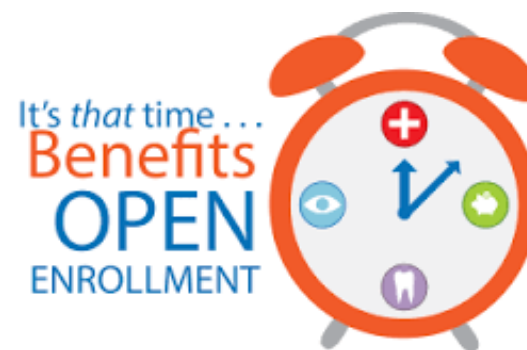


Donna Brewer, Director of Employee Benefits



Topics

- What's changing effective January 1, 2026
- Medical Plans - Plan Features Continuing In 2026
- Health Savings Account (HSA)
- Flexible Spending Account (FSA)**New Carrier**
- Dental Plan
- Vision Plan
- Supplemental Life Insurance
- Connecticut Paid Leave Benefit
- Wellness Program
- Next Steps!





What's Changing Effective January 1, 2026

- **Difficult Renewal Environment:**
 - Rising healthcare costs and market pressures have impacted our renewal rates more significantly than in previous years.
- **Medical Plan Contributions:**
 - Employee paycheck contributions for medical coverage will increase by **15%**. We recognize this is a meaningful change and are working to ensure our plans continue to provide strong value.
- **Annual FSA Contribution Limits:**
 - Flexible Spending Account annual maximum contribution will increase to \$3,400
 - Dependent Care FSA annual contribution limit will increase to \$7,500 (\$3,750 for married couples filing separately or single not head of household)
- **High-Deductible Health Plan (HDHP) Limits:**
 - Self only coverage: the minimum deductible has increased from \$1,650 to \$1,700 for the 2026 plan year in compliance with the IRS
 - Family coverage: the minimum deductible has increased from \$3,300 to \$3,400 for the 2026 plan year in compliance with the IRS



What's Changing Effective January 1, 2026 (continued)

- **FSA Vendor Change:**
 - We are transitioning to a new **Flexible Spending Account (FSA)** vendor, HealthEquity, to improve service and user experience.
- **New Specialty Drug Program:**
 - To address the rising costs of specialty medications, we are introducing SavOnSP*, a clinical support program aimed at improving outcomes and managing pharmacy expenses.
- **New Hearing Aid Vendor:**
 - Cigna has selected Start Hearing* as their new in-network hearing aid vendor. Cigna has sent letters to those who received new hearing aids in the last three years.
- **Retirement Plan Catch-Up Contribution:**
 - Starting January 1, 2026, Age 50 catch-up contributions for anyone whose social security wages are more than \$145,000 must be Roth after-tax contributions.



Medical Plans





2026 Monthly Medical Employee Premiums

Tier	OAPIN	OAP	HDHP
Employee	\$308.52	\$364.62	\$230.44
Employee + Child(ren)	\$587.59	\$693.80	\$438.63
Employee + Spouse/Domestic Partner	\$744.84	\$879.24	\$556.34
Family Including Spouse/Domestic Partner	\$926.84	\$1,094.14	\$692.29

Employees whose annualized full-time **base salary is less than or equal to \$76,129.44** are eligible for a premium subsidy. Part-time employees' salaries are converted to full-time annualized rate to determine subsidy eligibility. Subsidy credits are applied to the employee paycheck based on pay frequency.

Tier	Monthly Subsidy
Employee	\$85.70
Employee + Child(ren)	\$184.47
Employee + Spouse/Domestic Partner	\$227.37



Medical Plans

- Wesleyan offers 3 health plans through Cigna
 - Open Access Plan - OAP
 - Open Access In-Network Plan - OAPIN
 - High-Deductible Health Plan with an HSA option - HDHP
 - Employee choice
 - Tax preferred opportunity to save for future healthcare needs
 - More employee control over health care expenditures
 - Portability
- Telemedicine
 - Behavioral health options continue to be available.
- Dependents are covered up to age 26, coverage terminates at the end of the month following 26th birthday.



Wesleyan Medical Plan Design Review

	OAPIN	OAP	HDHP
Deductible Format	Individual/Family	Individual/Family	Individual/Family*
In-Network Deductible	\$500 / \$1,000	\$500 / \$1,000	\$1,700 / \$3,400
In-Network Out-Of-Pocket Maximum	\$1,500 / \$3,000	\$1,500 / \$3,000	\$3,000 / \$6,000
Matching HSA Contribution (100% match up to the limits shown)	N/A	N/A	\$500/\$1,000
Coinsurance (In-Network/Out-of-Network)	100%	100% / 70%	100% / 80%
Office/Specialist/Urgent Care Copays	\$25 / \$35 / \$40	\$25 / \$35 / \$40	Deductible
Inpatient	Deductible	Deductible	Deductible
Outpatient	Deductible	Deductible	Deductible
Emergency Room	\$200	\$200	Deductible
Preventive Care	Healthcare Reform Schedule	Healthcare Reform Schedule	Healthcare Reform Schedule

* Please note, if covering more than one person, the full family deductible must be met before the plan starts paying for non-preventive services)



Cigna Easy Choice Tool

If you need help deciding which medical plan is best for you, the Cigna Easy Choice Tool may help you! The tool considers:

- Payroll contributions
- Out-of-pocket costs when you receive services
- Your basic information, for example, whether you will be covering dependents and your zip code.
- Log-in at CignaEasyChoice.com and use access code LDKK-6083 (ACA-eligible only, use code PODR-6093). The Easy Choice decision support tool will provide you with plan choices, which you can compare and review.



Cigna One Guide

Contact a representative by calling the customer service number on the back of your Cigna digital ID card or by going to myCigna.com.

- Answer coverage questions
- Keep on track with preventive visits
- Find the right health care providers in-network
- Connect to lifestyle management programs, clinical and behavioral health programs
- Get cost estimates and avoid surprise expenses
- Understand Explanation of Benefits (EOB) and medical bills



Wesleyan Pharmacy Plan Design Review

	OAPIN	OAP	HDHP (after deductible has been meet)
- Retail limited to 30-day supply - 90-day supply available at select pharmacies who participate in the Cigna 90 Day Now program - Home Delivery – up to 90-day supply including specialty drugs - Pre-authorization for specialty drugs - Clinical Day Split Fill for specialty drugs			
Retail 30-day: Generic: Preferred Brand: Non-Preferred Brand:	20% - min. \$ 5, max. \$50 25% - min. \$15, max. \$50 25% - min. \$20, max. \$50		
Retail & Home Delivery 90-day: Generic: Preferred Brand: Non-Preferred Brand:	20% - min. \$10, max. \$100 25% - min. \$30, max. \$100 25% - min. \$40, max. \$100		

SavOnSP

- To address the rising costs of specialty medications, we are introducing SavOnSP*, a clinical support program aimed at improving outcomes and managing pharmacy expenses.
- Enrollment is required in the program.
- Employees eligible for the program will be notified directly by Cigna/Accredo.
- Once you enroll in the program, in the OAPIN and OAP plans, you'll pay \$0 out-of-pocket for your medication. With the HDHP program, since medications cannot be covered at 100% until the deductible has been met, the \$0 out-of-pocket cost will not apply until you meet your deductible.
- **Important: If you are eligible, and do not sign up for the program, there will be a 30% co-insurance charged for medications eligible for the program.**
- The current list of medications eligible for the program will be posted on the 2026 Open Enrollment page, which will be available Monday, November 3, 2026. You can also use the Price a Medication tool on the myCigna App or myCigna.com to see how much your medication will cost.
- With the exception of the HDHP plan costs before the deductible is met, there will not be an accrual to your deductible or out-of-pocket maximum if you enroll in the program.

Start Hearing



Competitive pricing starting at \$599, per hearing aid on today's latest technology, including tinnitus options



60-day risk-free trial period



Three-Year Deluxe Warranty Plan, including loss and damage*



Access to a nationwide **network of hearing professionals**



Financing plans available (subject to credit approval)



Complimentary Start Hearing Starter Pack includes: earwax removal kit, earmold cleaner and cleaning tools to care for your hearing aids



Rechargeable devices at no additional cost or a **5-year supply of complimentary batteries**

1

Take the first step to better hearing by calling **Start Hearing®** to locate a Cigna Healthcare® contracted provider at **(888) 304-8539**

2

Start Hearing will find a provider and schedule a hearing **consultation** near you

3

During your appointment the hearing provider will **determine your need for hearing aids**
The provider will help you **find the solution** that is best for your **lifestyle and budget**

4

Your hearing aids will be ordered and a **fitting appointment** will be **scheduled**

5

Provider will fit your hearing aids and process your payment **minus your covered amount** where applicable
Begin your **60-day trial period** and schedule follow-up office visits



Cigna Programs to Support Emotional Health



Cigna Virtual Programs

Providers	Description
	Talk privately with a licensed counselor or psychiatrist via video or phone. Have a prescription sent directly to your local pharmacy, if appropriate.
	Cigna Behavioral Health also provides access to virtual counseling through Cigna's network of providers.
	Behavioral health resource that provides access to a licensed clinician through private messages or live video sessions.
	Headway is an online virtual and inperson therapy and medication management service that matches licensed mental health practitioners with patients based on their unique needs
	Rula matches you with a high-quality licensed therapist who's right for you based on what you're looking for (e.g., gender, race, specialty). Video appointment availability includes evening and weekend appointments. Sessions are available for individuals, couples and families.
	Tava's comprehensive approach offers high-quality and fast access to support short-term needs, as well as ongoing care for customers who are struggling with persistent mental health issues

Cigna Virtual Programs

Providers	Description
	Headspace for Cigna Healthcare is a digital mental wellness platform designed to help employees build resilience, reduce stress, and improve overall well-being. Through guided meditations, mindfulness exercises, sleepcasts, focus music, and clinically validated programs, users can access personalized support anytime.
	Effective, affordable & convenient OCD therapy with a licensed ERP-trained therapist, 24/7 support to make sure you stay better.
	Meru offers a 12 week virtual program for customers with depression, anxiety, or burnout. Meru includes live virtual counseling and texting and an online peer support community.
	Brightside is a virtual provider offering timely access to the highest quality depression and anxiety care, delivering medication management, therapy, and self-care.
	Pediatric mental health care without the wait. From coaching to therapy and psychotherapy, Bend health takes a whole-person, whole-family approach to behavioral care, supporting kids and teens ages 1 to 17. Bend offers 4 Types of Care including coaching, coaching & therapy, coaching & therapy & medications, and coaching & medication maintenance.
	Brightline is a national pediatric behavioral health provider that provides extraordinary support for kids, teens, and parents. Brightline also offers skills-based programs led by expert behavioral health coaches to help kids and teens through everyday challenges.
	Find high quality, in-network mental health care. Alma connects you with a diverse national network of therapists and psychiatrists who fit your budget, schedule, and needs.

Cigna Virtual Programs

Providers	Description
	Online alcohol treatment on your terms. With Monument's holistic online alcohol treatment, drinking will become less important to you. Join Monument to get evidence-based care and community support to change your drinking habits.
	Bicycle Health provides confidential virtual care for opioid use disorder, including doctor visits, lab tests, prescriptions, instant messaging, and therapy/counseling support — all delivered and managed on your mobile device.



Health Savings Account (HSA)



Health Savings Account (HSA)

- An HSA is an individually owned bank account that allows you to set aside pre-tax dollars to pay for qualified out of pocket expenses.
- The employer and employee can make tax-free deposits into an HSA.
- Any unused funds roll over year to year.
- You decide how and when to use the money available in the account.
- HSAs can be used to cover:
 - Insurance deductibles, copays and coinsurance
 - Qualified health care expenses (including dental & vision)
- 2026 HSA contribution limit is a flat dollar amount. These amounts include the Wesleyan employer contribution.
 - \$4,400 for Individual
 - \$8,750 for Family
- Wesleyan HSA contributions for employee plus child(ren), employee plus spouse and family is \$1,000, and \$500 for employee.
- Those age 55 or over can contribute an additional \$1,000 annually.
- Please view our HDHP Medical Plan and HSA presentation for important plan details.





Flexible Savings Account (FSA)



Flexible Spending Accounts

Medical Expense Reimbursement Account (MERA)

This plan allows you to pay for eligible out-of-pocket expenses with pre-tax dollars. Eligible expenses include plan deductibles, copays, coinsurance, and other non-covered medical, dental and vision healthcare expenses for you and your dependents.

The 2026 maximum annual MERA limit is projected to be \$3,400 (subject to final IRS announcement).

Dependent Care Account

This plan allows you to pay for eligible out-of-pocket dependent care expenses with pre-tax dollars. Eligible expenses may include daycare center, pre-school, in-home childcare, and before or after-school care for your dependent children under age 13 (other individuals may qualify if they are incapable of self-care and are considered your taxable dependents).

The 2026 maximum annual Dependent Care limit is \$7,500 (\$3,750 for married couples filing separately or single not head of household).



Important Update: FSA Vendor Change

What does this mean?

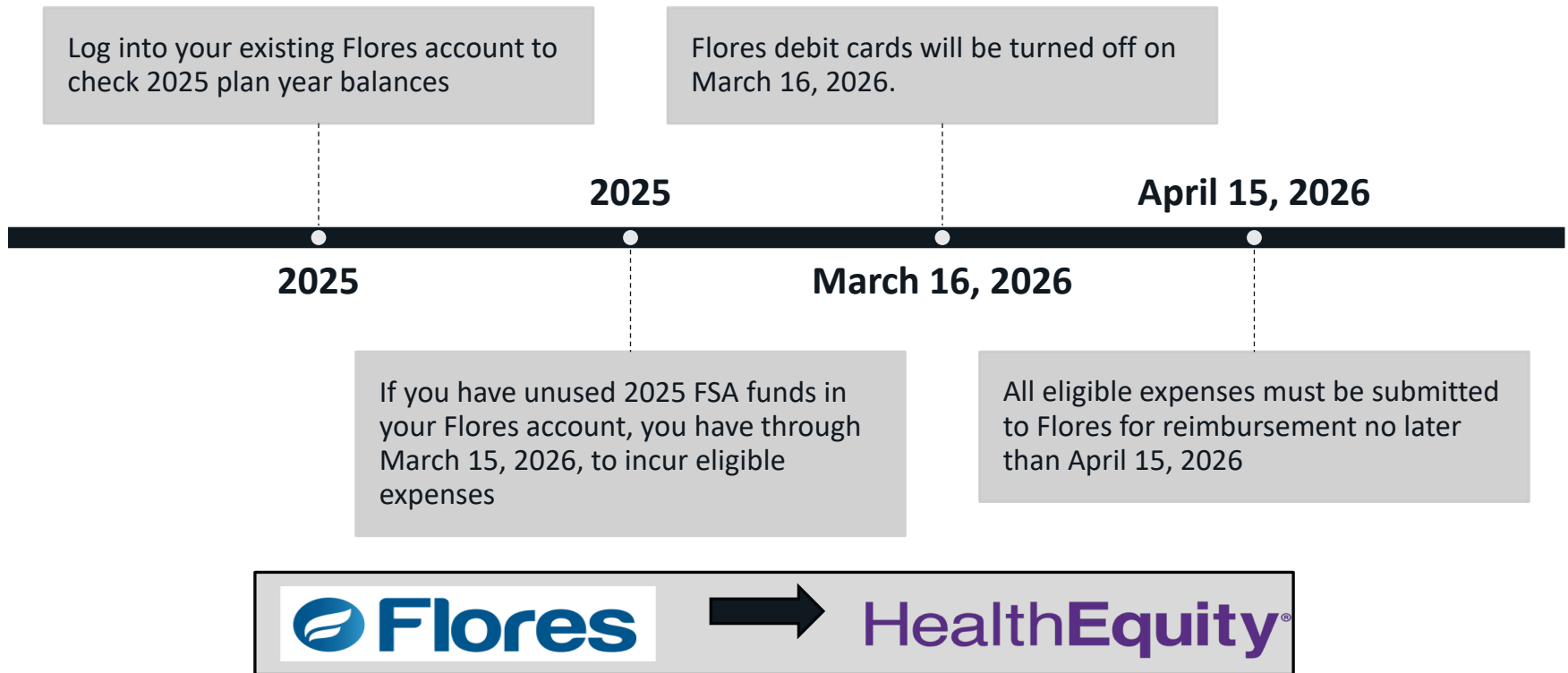
- Starting January 1, 2026, our FSA vendor will change from Flores & Associates to HealthEquity.
- All new 2026 contributions will now be handled by HealthEquity.
- Any remaining funds with Flores & Associates must be submitted by April 15, 2026, for claims incurred through March 15, 2026.

Support Available:

- Attend the HealthEquity Benefits Fair presentation on November 5, 2025, at 10 am.
- Contact HR Benefits Team with questions or concerns.



Flexible Spending Accounts - 2025 Action Items



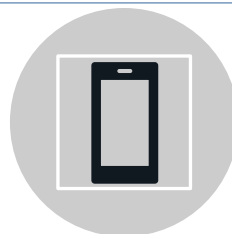
Important Note: Debit cards will be turned off on March 16, 2026. Once cards are shut off, employees can submit claims for services via the manual claim submission process on the Flores web portal or mobile app



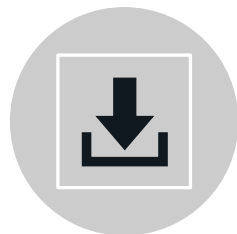
Flexible Spending Accounts - 2026 Action Items



After you enroll, you can register and login to your portal at HealthEquity.com/login



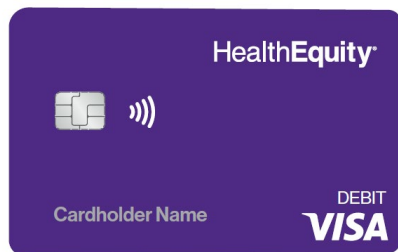
Activate your HealthEquity VISA debit card via mobile app or web portal or simply by calling the number listed on the sticker of your new card



Download the HealthEquity Mobile app to view FSA/DCFSA account balances, manage profile, get access to tax documents, and more!



Download the EZ receipts mobile app to check account balances, submit and track claims, manage contributions, and upload documents and receipts





Dental Plan





2026 Monthly Dental Employee Premiums

Tier	Delta Dental Core Plan	Delta Dental Buy-Up Plan
Employee	\$15.32	\$23.13
Employee + Child(ren)	\$29.10	\$43.93
Employee + Spouse/Domestic Partner	\$36.75	\$55.49
Family Including Spouse/Domestic Partner	\$45.98	\$69.43



Delta Dental Plan

Plan Features	Delta Dental PPO Plus Premier “Core Plan”	Delta Dental PPO Plus Premier “Buy-Up Plan”
Annual Deductible	Individual \$50 Family \$150	Individual \$50 Family \$150
Preventive Care	100% (No deductible & not included in annual allowance)	100% (No deductible & not included in annual allowance)
Basic Services	80%	80%
Major Services	50%	60%
Annual Maximum Benefit	\$1,200	\$2,000
Orthodontia	50%	50%
Orthodontia Lifetime Maximum	\$1,500 (Adults & Dependent Children)	\$2,000 (Adults & Dependent Children)
Dependent Coverage	Dependents will be covered up to age 26 (coverage will terminate at the end of the month following 26 th birthday)	



Delta Dental

Carryover Maximum– Allows you to carryover 25% of unused benefits into subsequent plan years! Preventive care does not count towards maximum.

Requirements: You must enroll for the entire plan year.



Use no more than 50% of the standard annual maximum during the benefit year.

See a dentist during the benefit year for an exam or cleaning. (claim must be submitted). If preventive care is not received, ALL accumulated carryover maximum benefit is lost.



Delta Dental

Delta Dental plans include an enhanced benefit for covered members (children and adults) with a qualifying special health care need.

What is included?

- Additional dental examinations and/or consultations that can be beneficial prior to treatment to help patients learn what to expect and what is needed for a successful dental appointment.
- Up to four total dental cleanings in a benefit year.
- Treatment delivery modifications (including anesthesia) necessary for dental staff to provide oral health care for patients with sensory sensitivities, behavioral challenges, severe anxiety, or other barriers to treatment.

How do I/my spouse/my dependent use this benefit?

- Members with a qualifying special health care need should let their dentist know that their group Delta Dental plan includes the Special Health Care Needs Benefit and that they have a qualifying special health care need.
- There is no cost to you for this additional benefit.



Vision Plan

eyeMed[®]



2026 Monthly Vision Employee Premiums

Tier	EyeMed
Employee	\$6.40
Employee + Children	\$12.80
Employee + Spouse	\$12.16
Family	\$18.81



Important Claims Information

Please note: If your vision service is denied for payment, please ensure your provider submitted eye exam claims to Cigna and glasses/contacts claims to EyeMed vision.

EyeMed Plan

Plan Features	EyeMed In-Network Member Cost
Frames	\$0 copay, \$200 allowance: 20% off balance over \$200
Standard Corrective Lenses • Single Vision • Bifocal • Trifocal	\$20 copay \$20 copay \$20 copay
Premium Lenses • Standard Progressive • Premium Progressive	\$85 copay 80% of retail price less \$35 allowance
Contact Lenses • Medically Necessary • Elective	\$0 copay Conventional 85% of balance over \$200 allowance Disposable 100% of balance over \$200 allowance
Frequency • Frames • Standard Plastic Lenses or Contacts	Once every 24 months Once every 12 months



Supplemental Life Insurance





Unum Life Insurance Plans

Unum administers our life insurance plans

- Basic life insurance paid by Wesleyan - 1 X salary up to \$50,000 max
- Supplemental Employee Life: Can be purchased up to 5 times annual salary not to exceed \$750,000.
- Supplemental Spouse Life: Can be purchased up to \$100,000.
- Supplemental Child Life: \$5,000
- Evidence of Insurability (EOI) application is required and must be approved by Unum.





Roth Catch-Up Contributions 403(b) Retirement Plan



Roth Catch-up Contributions

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- Starting January 1, 2026, Age 50 and age 60- 63 catch-up contributions for anyone whose social security wages are more than \$145,000 must be Roth after-tax contributions.
 - Wesleyan will report which employees reach the social security wages in 2026 to Retirement@Work. We will automatically take the catch-up as post-tax deductions unless, when you reach the \$24,500 pre-tax match you have made post-tax contributions, in which case, those post-tax contributions will adjust the amount you must make on a post-tax basis.
 - Example: You contribute \$20,500 pre-tax and \$4,000 post-tax which combine get you to the \$24,500 IRS maximum (2026 projection). When factoring in the \$8,000 additional catch-up you can contribute, \$4,000 will be pre-tax and the remaining \$4,000 post-tax, since you have already contributed \$4,000 post-tax to get to the \$8,000 catch-up.
 - If do not want Roth after-tax elections, you can change your election on Retirement@Work (accessed through WesPortal under My Information) to at or below the IRS maximum contribution level.
 - You can choose different investments options for your Roth after-tax contributions on the TIAA or Fidelity websites.



Connecticut Paid Leave Program (CT PL)



Connecticut Paid Leave

As a covered employee in the State of Connecticut, the Connecticut Paid Leave (CT PL) program allows you to take time off to care for yourself and your family's health needs without worrying about loss of income while you are away from work.

Eligibility:

- Must be an active employee, have either earned wages of at least \$2,325 over the qualifying period or have been employed within the last twelve months.

Benefit:

- Twelve weeks (12) if you or a family member have experienced a serious health condition, are welcoming a new child into your family, are impacted by family violence, need to care of a family member injured while on active duty in the military or to take leave to prepare for a family member entering the active military overseas.
- Two (2) additional weeks are available if you experience a serious health condition during pregnancy.
- Coordinates with Wesleyan's Short-Term Disability and parental leave programs.
- Contact Human Resources at 860-685-2100 or benefits@wesleyan.edu to begin the leave process.



Wellness Incentive Points Program



Wellness Incentive Points Program

Wesleyan's Wellness Incentive Points Program rewards individuals dedicated to improving their health and well-being. You can earn points by actively participating in health improvement programs and activities that can then be redeemed for cash payments. Benefit eligible faculty, staff, spouses and partners are eligible to participate and earn points (up to \$150/each on a semi-annual basis).

Wellness points are entered through the Wellness Points Tool which is available under "My Information" in WesPortal.



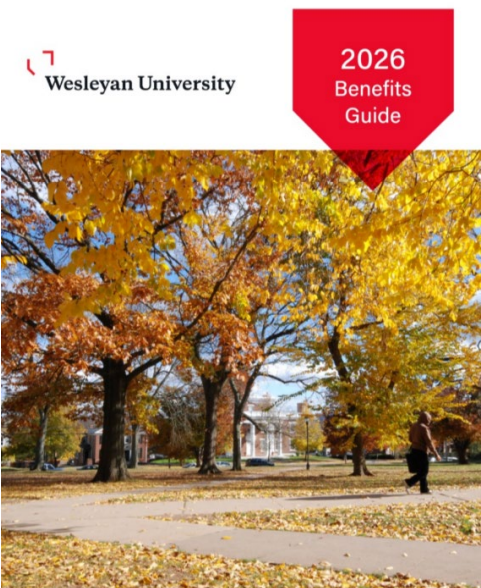
Note: To add or change a spouse/domestic partner, please click the Spouse/Partner link at the top of the screen.

Cardinal Fit Program & Lunch-N-Learns



Next Steps!

See the 2026 Benefits Guide for more details and instructions on how to access all programs.



Additional Resources



- Website www.myCigna.com



- Phone 1-800-Cigna24



Open Enrollment for Coverage Effective January 1, 2026



Be Informed...

View your benefit options through Workday. Sign into Workday and use the Open Enrollment task in your inbox. You will be able to click each of the benefit areas to enroll or change your enrollments. Detailed instructions are included as you make your elections in Workday for each benefit.

Take Action...

- The Open Enrollment period will begin on Monday, November 3, 2025, and ends on Friday, November 14, 2025, at midnight.

Important Note:

If you do not elect to make benefit changes, your 2025 elections will roll over to 2026. However, you must re-enroll in the FSA (MERA & Dependent Care) and HSA plans.



Questions?

Questions on your 2026 benefits or the enrollment process?

- View the Open Enrollment materials - Human Resources Webpage at 2026 Open Enrollment.
- View Open Enrollment Presentation - Human Resources 2026 Open Enrollment webpage available on Monday, November 3rd.
- Virtual Benefits Fair - November 5th from 10:00 am - 3:30 pm
 - Presentations and Q&As
 - See your open enrollment e-mail for times and Zoom Links.

Contact Us



- Send an email to benefits@wesleyan.edu.
- Schedule a 30-minute virtual appointment with a Benefits Team Member. Registration is required at Bookings - A Microsoft Teams link will be sent when you book your appointment.
 - November 6, 2025
 - November 10, 2025
 - November 12, 2025
 - November 14, 2025



Thank you!

WE APPRECIATE YOUR TIME.