



Your Life. Your Experiences. Your Benefits.

Take a Closer Look!

2026 Open Enrollment Guide
Full-Time Associates

OPEN ENROLLMENT:
January 12 to January 26, 2026



Dear Associate,

One of the best investments we can make is in our health and well-being. Weis Markets offers a comprehensive total rewards package and wellness support resources to help you live a happy and healthy life. **Our annual Open Enrollment will take place in Workday between 12:00PM Monday, January 12 – 9:00AM Monday, January 26 for benefit coverage beginning March 1, 2026.** This is your yearly opportunity to review all available offerings and make the choices that are right for you.

As you probably know, the cost of health care continues to rise each year and is outpacing inflation. It's a major concern for employers like us who absorb most of the cost increase, as we try to balance these escalating costs while continuing to offer affordable, high-quality health care. We believe that one of the ways we can manage this is by providing you with the tools and resources you need to make healthy choices, and by helping you prioritize and access preventive care. Keep in mind that early detection of medical problems can not only save on medical costs, but more importantly, it can save your life.

This year, we are introducing a few enhancements to our benefit plans:

- **NEW! Capital Blue Cross Dental PPO and DHMO plans** will replace Delta Dental. If you do not make any changes to your current dental coverage, you will automatically be transitioned to the corresponding coverage type / tier.
- **NEW! Teladoc** will be a new option for you to access virtual primary care physicians. We've listened to your feedback about how virtual care can help you and your family when an in-person office visit is not practical or preferred.
- **The amount of Healthy Blue Rewards you can earn will increase from \$400 to \$600**, by taking advantage of the preventive health care screenings that are already available to you under the benefit plans. This includes an annual physical exam, cancer screenings, a dental check-up, etc. This money can then be used to help offset your out-of-pocket healthcare expenses.

Please carefully review the important details included in this Open Enrollment guide to learn about what's changing for 2026 before making your selections. We offer many other valuable benefits for your consideration as well, including long term disability, life insurance, hospital indemnity, critical illness, legal services, identity protection, pet insurance, and more. If you need support or assistance, Benefit Advocates are available year-round by dialing 1-800-662-5370, extension 53400, option 1, and following the prompts for full-time benefit advocate.

Sincerely,



Jim Marcil
SVP, Human Resources

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Note: Flexible Spending Accounts are offered on a calendar-year basis.

You are strongly encouraged to actively enroll in your benefits for 2026. The enrollment period is January 12 – January 26, 2026.

Benefits take effect March 1, 2026. If you don't enroll, your coverage will continue at the new contribution rates, and you will pay the wellness surcharge if you did not earn your Healthy Blue Rewards in 2025. If you are a medical plan member, you need to update your tobacco use status if it has changed.

Welcome to Open Enrollment



Eligibility

- As a Weis Markets full-time associate, for most benefits, your eligibility for coverage begins on the first day of the month following 30 days from the date you become a full-time associate (180 days for long-term disability insurance).
- For supplemental benefits, life insurance, and long-term disability, you must be actively at work to be eligible for coverage.
- You may enroll your eligible dependents for the medical, dental, vision, life insurance, hospital indemnity, critical illness, accident insurance, and identity theft protection plans

Who are my eligible dependents

- Your **qualifying spouse** (spouses are only eligible for medical if they are not eligible for medical coverage from their own employer),
- Your **children**, including natural-born children, stepchildren, and legally adopted children who depend solely on you for support, who regularly and permanently live with you in a parent-child relationship, for whom you have permanent legal custody.

For medical, dental, and vision coverage, you may enroll your eligible legal spouse or children up to age 26, regardless of student, marital, or tax-dependent status, and your disabled children (regardless of age).

What will I need to enroll my eligible dependents

If it's your first time enrolling your dependents

- For a spouse, your marriage certificate and Spousal Medical Insurance Verification form (available at MyWeisBenefits.com) as well as proof of cohabitation such as an electric bill, auto insurance policy, financial statement or joint income tax return (any personal or financial information should be redacted).
- For children under age 26, their birth certificate and, if applicable, legal adoption/custody paperwork.
- For all, Social Security numbers are required by federal regulation and anyone with an invalid number will be removed from your plan(s).

ATTENTION: You will be asked to provide supporting documentation through our dependent spouse verification process. If you are enrolling your spouse in medical coverage, you will need to complete a **Spousal Verification Form** to confirm your spouse is not offered coverage with their employer. An event task will be sent to your Workday Inbox by Friday, January 30 and you will have until Friday, February 13 to upload your form to enroll your spouse in medical coverage (does not apply for dental or vision coverage).

Please monitor your Workday tasks and notifications area. There may also be attempts to reach you by email or phone. You will be notified once your election is complete or your spouse will be dropped from the coverage that was originally requested for this year's annual enrollment effective March 1, 2026 - February 28, 2027.

NEW! If your spouse is currently enrolled in your Weis Capital Blue Cross medical plan, you **MUST** submit your elections for Open Enrollment and **attest with Electronic Signature** that your spouse remains eligible (for medical coverage). If you **do not attest**, your spouse's coverage will end February 28, 2026, and we will remove him/her from your medical plan. No additional action is needed for children that you've previously enrolled.

Coverage for newly added dependents will not take effect until your documentation has been reviewed and approved. Once your dependents have been verified, you will not need to provide documentation again. Weis verifies that your enrolled dependents are eligible for medical coverage. If they are ineligible, their coverage will be canceled. **Misrepresenting or falsifying information to enroll a nonqualified dependent is considered health care fraud and is a gross violation of company policy which could lead to serious consequences including termination of employment.**

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Turning 65 or already 65+ and need help finding the right Medicare coverage?

If you are approaching age 65 or you're Medicare-eligible, Weis is pleased to offer a no-cost service to advise you on your Medicare health insurance coverage options. This program is provided by MPC Insurance Group (MPC), an insurance agency and advisory service firm with certified, licensed agents.

Agents can:

- Explain the basics of Medicare,
- Review your Medicare options with you,
- Help you enroll in Medicare Parts A and B,
- Continue support after enrollment, and
- Evaluate other retirement needs, such as short-term care, long-term care, income protection, and wealth preservation.

During our Open Enrollment period, **anyone who is Medicare-eligible** can change from Weis medical coverage to a Medicare plan. So, we recommend evaluating which option is best for you. For some associates, a Medicare plan may offer additional benefits at a lower cost. An MPC agent will work with you one-on-one to analyze key areas in your current health care coverage vs. Medicare, analyzing costs, coverage levels, ancillary benefits such as dental, vision, and hearing benefits, provider networks, and medication costs, to name a few. An MPC agent will work with you to simplify the entire process and guide you through each step to ensure proper coverage within the specific time frames.

MPC can also assist you with other areas of interest, such as estate planning, retirement planning, and services related to Long-Term Care insurance, Life Insurance, and 401(K) rollovers.

To speak to a licensed representative, **call 1-800-662-5370 x53400, select option 1, then option 6.** You can also send an email to info@MPCins.com or visit www.MPCins.com.

Note: If you elect coverage through MPC, you'll pay for it by direct billing, not through Weis payroll deductions.



How to Enroll in Benefits

To get the benefits you want, you must enroll through **Workday**, our self-service portal that allows you to enroll in your benefits any time of day, from any place! Have your required documents and dependent information such as birth certificates, Social Security numbers and verification documents at hand if you're enrolling dependents that are not currently enrolled in coverage.

Enroll Online

Follow these steps:

1. Log in to **Workday** through single sign on (SSO) or use your Weis username and password that you utilize to log into the network.
2. Click "Announcements" Annual Open Enrollment, Employee Benefits Open Enrollment Selection OR choose your 2026 Annual Open Enrollment event through your **Workday** Task Inbox.
3. Answer the tobacco question. If your tobacco status has changed since last plan year, you must complete 2026 Open Enrollment.
4. Click on each tile and either **Enroll** (for new coverage) or **Manage** (for existing coverage).
5. Chose your plan and click **Confirm and Continue**.
6. In adding dependent, check the box next to each dependent's name or "Add Dependent" if a dependent is not listed.
7. Once you have made your selections and added your dependent(s), upload the dependent documentation in the "Attachments" section, read the Enrollment Certification Statement and then select **Review and Sign** to confirm and finalize your benefit selections.
8. Submit your elections and save a copy of your confirmation statement for your records. If you would like to make changes after you have submitted your elections, you have until the end of the Open Enrollment period. You may access your enrollment through the "**Announcements**" Annual Open Enrollment, Employee Benefits Open Enrollment Selection.

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New Hire and Status Changes

See when your coverage will take effect based on your hire date and when you enroll. If you're hired between January 1 and February 2, you'll need to enroll twice – once as a new hire and again for Open Enrollment for benefits starting March 1, 2026.

Hire date	Enroll period	Effective date of coverage
1/2/2026 – 2/1/2026	2/1/2026 – 2/29/2026	3/1/2026

Note: After 60 days of employment, you will be auto-enrolled in our 401(k) Retirement Savings Plan at a before-tax contribution rate of 3% if you are 21 or older. Learn more on page 24.

Have questions about your benefits? Contact a Benefit Advocate

Benefit advocates are trained benefit experts who can help you understand and use your healthcare benefits and other coverage. Contact your Benefit advocate for issues such as:

- General benefit questions
- Eligibility and coverage
- Finding a network provider
- Problems with health care claims or billing
- Coverage changes due to life events

Email: benefitsupport@alliant.com

Phone: 1-800-662-5370 x53400, option 1, follow prompts for full-time benefit advocates

Hours: 8am-8pm, Monday-Friday

Your Weis Benefit Advocate is only available to help answer your questions. They do not provide Workday enrollment support. The Workday portal is fully self-service, and you must complete your own benefit elections.

Important Coverage and Dates for the Plan Year

Weis Markets Benefits

You can enroll in these benefits only during Open Enrollment:

- Medical
- Dental
- Vision
- Supplemental Term Life Insurance
- Whole Life with LTC
- Long-Term Disability (LTD)
- Hospital Indemnity Insurance
- Critical Illness Insurance
- Accident Insurance
- Legal Services
- Identity Theft Protection

Calendar

January 1, 2026	Medical deductibles and out-of-pocket maximums reset
January 12-26	Open Enrollment , benefits effective March 1
February 9	MetLife will send Evidence of Insurability form and may also require a Statement of Health to be completed within 30 days for you or your spouse to enroll or increase coverage amount in LTD, Critical Illness or Supplemental Term Life Insurance. Election will remain in pending status until approval or denial is received.
February 23	New combined ID Cards will be issued by Capital Blue Cross (One card – Medical, Prescription and Dental)
March 1	Begins the new benefits plan year
March 15	Last day to incur 2025 Health and Dependent care claims
March 31	Last day to submit 2025 Health and Dependent care claims for reimbursement
March 1-December 31	Healthy Blue Rewards Program To avoid the \$1,500 Wellness Surcharge in plan year 2027, you will need to complete a physical and biometric screening.
November 9-23	Flexible Spending Account Open Enrollment for 2027
December 15	Weis Scholarship application available

Elections Made During Open Enrollment

Coverage is effective on March 1, 2026. Your new payroll deductions begin on the following paycheck dates:

If You Are Paid...	Deductions Begin...
Weekly	March 12
Bi-Weekly	March 20
Monthly	March 25

Changing Your Elections

After the 2026 Open Enrollment period ends, you cannot change your elections unless you have a Qualifying Life Event, such as:

- Change in legal marital status
- Change in number of dependents or dependent eligibility status
- Change in employment status that effect eligibility for you, your spouse, or dependent child(ren)
- Change in residence that affects access to network providers
- Change in your health coverage or your spouse's coverage due to your spouse's employment
- And more!

Any change in benefits you request must relate directly to your Qualifying Life Event. **To submit a request, log into Workday and click View Profile>choose Actions> Benefits>Change Reason.** Then select the appropriate Qualifying Life Event and submit your supporting documentation. **You must submit any changes within 30 days after the event.**



Weis Markets' medical and prescription plans administered by Capital Blue Cross are designed to help you maintain good health and offer protection from the financial burden of serious illness or injury. Both plans offer coverage through a network of participating health care providers. Although you can receive out-of-network, you pay less when you receive care from a network provider.

You have two medical coverage options:

The Silver Plan has lower contributions, but higher deductibles and out-of-pocket maximums.

OR

The Gold Plan has higher contributions in exchange for lower deductibles and out-of-pocket maximums.

You decide whether to pay more up front through payroll contributions or more at the time you receive services. Review your options along with coverage amounts and your cost. **Please note:** If you indicate that you use tobacco, including vape or e-cigarette products, an **annual surcharge of \$1,100 (\$21.15 per week)** will be added to your medical plan and deducted from your paycheck. But, if you complete the [Quitting Tobacco](#) course by Feb. 29, 2027, the tobacco surcharge will be removed, and a reimbursement will be issued for any deductions made during the 2026 plan year.

Spouse and Dependent Enrollment Certification Statement

If you want to cover your spouse, you will need to attest that your spouse does not have coverage elsewhere, or that they are a Weis associate, or that they are self-employed, or that they are unemployed and provide associated documentation. **Misrepresentation may result in claim denial/repayment and other penalties up to and including termination.**

If you're newly enrolling in medical, you will receive an HRA debit card from Optum Financial, otherwise, yours remains active until 2029.

Silver and Gold Plans and Healthy Blue Rewards Work Together

HEALTH REIMBURSEMENT ACCOUNT (HRA)

Earn up to a maximum of **\$600 in your HRA** for **Healthy Blue Rewards** activities.

- The HRA can be used for medical, Rx, dental, or vision expenses. Receipts must be uploaded to www.optumfinancial.com for reimbursement, otherwise, account can be locked until you substantiate the claim.
- Your HRA helps you pay your deductible and coinsurance costs.
- Unused funds for full-time associates roll over year to year while you're employed at Weis Markets, if you remain a full-time associate.

PREVENTIVE CARE

Weis Markets pays 100% for in-network preventive care; you don't pay anything.

PREMIUMS

The amount you pay for your health insurance every pay period.

DEDUCTIBLE

The amount you pay out-of-pocket for healthcare before the plan starts to pay for certain services. The deductible is not applicable to all services and deductibles are reset every year on Jan 1.

COPAYS

A fixed amount you pay each time you receive certain covered healthcare services.

COINSURANCE

The percentage you pay for the cost of certain covered healthcare services, after you meet your deductible.

OUT-OF-POCKET MAXIMUM

This is a "cap" on your out-of-pocket costs for the plan year; it is the most you'll pay out-of-pocket for covered healthcare services. Once you reach this maximum, the plan pays 100% of your covered medical expenses for the rest of the plan year.

Visit MyWeisBenefits.com for resources outlining the complete list of available services to help with your decision

Avoid the \$1,500 Wellness Surcharge and Earn Rewards! Beginning March 1–December 31, 2026

Healthy Blue Rewards is available to full-time associates enrolled in our medical plans.

The program provides a maximum **\$600 in rewards** when you complete various health activities. Completing your annual physical and biometric screenings will also prevent you from paying a **\$1,500** wellness surcharge in 2027 (this does not apply if you are hired after May 31, 2026). Receive your \$600 as a tax-free contribution on your HRA debit card (or after tax through your paycheck if you're enrolled in the Traditional Plan). Then use your HRA debit card to pay for eligible medical, Rx, dental, or vision expenses. Receipts must be uploaded to www.optumfinancial.com for reimbursement, otherwise, account can be locked until you substantiate the claim.

MIX AND MATCH TO EARN UP TO \$600!

Annual physical with a primary care provider	\$175
Biometric screening	\$175
Cancer preventive screenings or prenatal visit	\$250 / screening (max 1)
Engage with case management when post-op	\$100
Teladoc Cardiometabolic Program, Sword, Ovia	\$100 (max \$200)
Dental cleaning	\$125 (max 1x / year)
Self-Guided Programs	\$25 per program (max of \$100)
Complete condition management program	\$25 / program (max 2)
Complete online health assessment	\$25
Sign up for Teladoc	\$25

Activate and Register your Account

- Go to capbluecross.com.
- Log in with your username and password OR click on “Register” and follow the instructions. **You must do this even if you had an account in 2025.**
- Click on the “Wellness” tab and select “Healthy Blue Rewards” from the dropdown menu.
- On your dashboard, click “Program Activation.” Confirm your personal info.

Complete a Biometric Screening

Through your doctor:

- You can complete your biometric screening at the same visit as your annual physical.
- Download the physician screening form through your Healthy Blue Rewards dashboard.
- Sign your form and present it to the doctor when the screening is completed.
- Submit your form to healthybluerewards@onlifehealth.com

Or select the Catapult VirtualCheckup™ Home Kit:

- The Healthy Blue Rewards portal has instructions.
- Order by December 1, 2026, and return your postmarked kit by December 31, 2026.
- Complete the virtual follow-up visit by January 10, 2027.

Complete an Annual Physical

Through your doctor:

- Make an annual physical appointment.
- Your visit will be submitted automatically to Healthy Blue Rewards.

Or through the NEW Teladoc app:

- Register for Teladoc Health.
- Select “Primary 360” to schedule a virtual visit with a primary care provider.
- Your visit will be submitted automatically to Healthy Blue Rewards.

Your personal health information is completely confidential and is managed by Capital Blue Cross. Weis Markets will never see your screening results or your personal health information.

NEED A MEDICAL ACCOMMODATION?
 If a medical condition prevents you from completing the steps, call 1-855-300-2273 for other ways to achieve the same reward.



Medical options for full-time associates

For benefit coverage March 1, 2026 – February 28, 2027



You always pay the deductible and copayment. The coinsurance (%) shows what you pay after the deductible. Go to [CapBlueCross.com/finder](https://www.CapBlueCross.com/finder) to help you find in-network providers, facilities, services, and more.

Plan Features	Silver Plan		Gold Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible (1/1/26 – 12/31/26; Individual/Assoc + 1 or Family)	\$2,200 / \$4,400*	\$4,400 / \$8,800*	\$1,700 / \$3,400*	\$2,800 / \$5,600*
Coinsurance (after deductible)	30%	50%	25%	50%
Out-of-Pocket Maximum (1/1/26 – 12/31/26; medical and prescription drug expenses combined; individual / family)	\$7,200 / \$13,400*	\$13,400 / \$26,800*	\$5,500 / \$12,000*	\$9,900 / \$24,000*
Medical (what you pay after the deductible)	After the deductible, unless noted otherwise		After the deductible, unless noted otherwise	
Preventive Care Services	Covered in full (no deductible)	50%	Covered in full (no deductible)	50%
Office Visits	30%	50%	25%	50%
Virtual Visits (deductible applies for specialists)	\$10 primary 30% specialist	N/A	\$10 primary 25% specialist	N/A
Lab Tests	Independent lab: 15% Facility-owned lab: 40%	50%	Independent lab: 15% Facility-owned lab: 40%	50%
Blue Distinction Ctr (hip, knee, spine, bariatric, transplant)	No coinsurance	N/A	No coinsurance	N/A
Outpatient Surgery (ASC=ambulatory surgical center)	ASC: 15% Other facilities: 40%	ASC: Not covered Other facilities: 50%	ASC: 15% Other facilities: 40%	ASC: Not covered Other facilities: 50%
Inpatient Hospital (physician, surgeon, facility fees)	30%	50%	25%	50%
Emergency Room	30%	30%	25%	25%
Hearing Aid Coverage	\$2,500 maximum every 36 months (fitting and exams included)			
Prescription Drugs (what you pay; up to a 90-day supply)*				
Deductible (1/1/26 – 12/31/26)	\$0	N/A	\$50/\$150*	N/A
Generic (coinsurance, minimum cost)	20%, minimum \$10	Not covered	20%, minimum \$5	Not covered
Preferred Brand (coinsurance, minimum cost)	25%, minimum \$20	Not covered	20%, minimum \$10	Not covered
Non-Preferred Brand (coinsurance, minimum cost)	35%, minimum \$25	Not covered	30%, minimum \$25	Not covered
Associate Contributions (weekly)**				
Non-tobacco: Associate Only / Associate + 1 / Family	\$39.86 / \$83.47 / \$122.06		\$56.79 / \$119.47 / \$165.89	
Tobacco: Associate Only / Associate + 1 / Family	\$61.01 / \$104.62 / \$143.21		\$77.94 / \$140.62 / \$187.04	

* Generally, prescription drug benefits only cover drugs dispensed at a Weis Markets pharmacy. GLP-1's for diabetes are dispensed up to a 30-day supply.

** If you are hired on or before May 31, 2025 and did not complete the Healthy Rewards activities for the 2025 plan year, you'll pay the wellness surcharge of \$26.92 per week.



Medical

Prescription Drug Coverage

Weis Markets' medical plans include Capital Blue Cross prescription drug coverage for drugs dispensed from a Weis Markets pharmacy or designated pharmacies within Capital Blue Cross pharmacy network. The price of your medication is based on whether it's listed as generic, preferred brand, or non-preferred brand on the Capital Blue Cross Advantage Formulary. To check your prescription's coverage, you can call Capital Blue Cross at **1-855-300-2273** or visit capbluecross.com. You'll save the most money with generic drugs, which are required by the Food and Drug Administration (FDA) to be as effective as brand-name drug equivalents.

Weis Markets has pharmacies in most of our stores. Prescription drug benefits cover drugs dispensed only at a Weis Markets pharmacy or designated in-network pharmacy. If you are trying to fill a prescription and you are more than 20 miles from a Weis or designated in-network pharmacy, you may use any Capital Blue Cross Network pharmacy. In addition, your prescription can be shipped from our Central Fill Weis Markets Pharmacy to your home free of charge. For maintenance medications, you may get up to two fills at a non-Weis pharmacy and thereafter must use the Central Fill mail order or a Weis Markets pharmacy. For more information on mail order, please go to weismarkets.com/associaterx or call **1-833-742-6500**.

Reminder: If you fill your prescription with a brand-name drug when a lower-cost generic equivalent is available, you will pay a higher cost, even if your doctor or other prescriber writes "*Dispense as Written/DAW*" on your prescription. This higher cost will be the brand-name drug coinsurance **plus** the difference in cost between the brand and generic drug. This additional cost does not count toward the annual deductible or out-of-pocket maximum.

PRESCRIPTION DRUG PROTECTIONS



Safeguards have been built into the Prescription Drug Plan to prevent fraud, waste, abuse, and other inappropriate prescription drug utilization.



What is a formulary?

A drug formulary is a list of prescription drugs covered by your medical plan. Most prescription drug formularies separate the medications they cover into four or five drug categories, or "tiers." These groupings range from least expensive to most expensive cost to you. "Preferred" drugs generally cost you less than "non-preferred" drugs.

Understanding the formulary can save you money

If your doctor prescribes medicine, especially for an ongoing condition, don't forget to check your health plan's drug formulary. It's a powerful tool that can help you make informed decisions about your medication options and identify the lowest cost selection.





Your Guide to Using Health Care

Preventive Care: You take your car in for maintenance; why not do the same for yourself?

Annual preventive checkups can help you and your doctor identify your baseline level of health and detect issues before they become serious.

Health plans are required to cover a set of preventive services at no cost to you, even if you haven't met your deductible. The preventive care services you'll need to stay healthy vary by age, sex, and medical history.

Be aware: Not all exams and tests are considered preventive care

Certain screenings may be considered diagnostic, rather than preventive, based on your current medical condition. You may be responsible for paying all or a share of the cost of those services.

In addition, exams performed by specialists are generally not considered preventive care and may not be covered at 100%.

If you have a question about whether a service will be covered as preventive care, contact your medical plan.

Typical Screenings for Adults

- Blood pressure
- Cholesterol
- Diabetes
- Colorectal cancer screening
- Depression
- Mammograms
- OB/GYN screenings
- Prostate cancer screening
- Testicular exam

Telemedicine: 24/7 care for when you need it

When you can't get to the doctor's office, get the care you need through our **NEW** provider, Teladoc, anytime, anywhere for primary care, mental health, dermatology, and non-emergency illnesses, such as the flu, pink eye, or strep throat.



How can telemedicine help?

- If you don't have a primary care provider, you can complete your annual physical virtually through Teladoc, and have an ongoing relationship with that provider
- Providers can diagnose and treat minor conditions
- Prescriptions can be sent straight to your pharmacy
- Services also include counseling, psychiatry, nutrition counseling, and more

Why should I use it?

- Available 24/7, 365 days a year from any device
- No appointment necessary for urgent care visits
- Easy scheduling for primary care visits
- Less costly than a trip to an urgent care or ER
- Doctors have an average of 20 years of experience

How do I get started?

- Download the Teladoc app or visit teladochealth.com
- \$10 per virtual visit, regardless of the reason for your visit



Know where to go

Where you get medical care can significantly affect the cost. Here's a quick guide to help you know where to go based on your condition, budget, and time.

Visit type	Use it for...
Online visit (\$) Often available 24/7	<ul style="list-style-type: none"> • Non-emergency health issues: <ul style="list-style-type: none"> ○ Routine medical care ○ Minor injuries ○ Mental health concerns ○ Cold, flu, allergies, headache, migraine ○ Rashes, skin conditions
Office visit (\$\$) Typically open during regular business hours	<ul style="list-style-type: none"> • Routine medical care and management: <ul style="list-style-type: none"> ○ Preventive care ○ Illnesses and injuries ○ Existing conditions
Urgent care (\$\$\$) Typically open with extended evening and weekend hours	<ul style="list-style-type: none"> • Urgent but not life-threatening conditions: <ul style="list-style-type: none"> ○ Sprains or stitches ○ Animal bites ○ High fever or respiratory infections
Emergency room (\$\$\$) Open 24/7	<ul style="list-style-type: none"> • Life-threatening conditions requiring immediate care: <ul style="list-style-type: none"> ○ Suspected heart attack or stroke ○ Broken bones ○ Excessive bleeding ○ Severe pain ○ Difficulty breathing

How to find an alternative treatment facility

Ask your doctor if your treatment must be delivered in the hospital. You can also search for surgical centers, physical therapy, and similar services on your plan's website, or call member services for assistance. Some alternative facilities include a fee to cover overhead costs. To avoid a surprise on your bill, ask about facility fees before you schedule your appointment.

Alternative facilities

If you have time to evaluate your options for non-emergency health treatments, these alternative facilities can provide the same results as a hospital at a fraction of the cost.

Procedure	Alternative	Features	Savings*
Surgery	Ambulatory surgical center	<ul style="list-style-type: none"> • Specializes in same-day surgeries • Cataracts, colonoscopies, upper GI endoscopy, orthopedic surgery and more • Held to same safety standards as hospitals 	Up to 50% vs. a hospital stay
Physical therapy	Outpatient facility	<ul style="list-style-type: none"> • Most cases are suited for outpatient physical therapy • Same types of treatments and similarly skilled therapists as inpatient facilities 	40 to 60% vs. a hospital setting
Sleep study	Home testing	<ul style="list-style-type: none"> • Diagnoses obstructive sleep apnea • Cost is often covered by insurance if considered medically necessary 	Up to \$4,500 vs. a lab
Infusion therapy	Home or outpatient infusion	<ul style="list-style-type: none"> • For drugs that must be delivered by intravenous injections, or epidurals • Delivered by licensed infusion therapy provider • Maintain normal lifestyle and comfort of home or outpatient center 	Up to 90% vs. a hospital stay

*Savings estimates are based on in-network facilities and providers



Care Coordination

The goal of coordinated care is to ensure that patients, especially the chronically ill, get the right care at the right time, while avoiding unnecessary duplication of services and preventing medical errors. Call **Care Coordinators** as your independent advocates to help you:

- Understand your prescriptions and connect to benefits and resources.
- Find in-network providers and specialists.
- Resolve claims and billing issues and get help with appeals.

Need a medical treatment? Request a personalized **Cost Comparison Report** for specific procedures, such as an X-ray, MRI or other scans, mammogram, colonoscopy, or elective surgery.

Care Coordinators research for you (including your preferred provider). When you choose a lower-cost provider from the report, you can earn **a reward of 20% of the savings, up to \$1,000!** For questions, call **1-855-300-2273**.

Second Opinion Services

For a fresh expert review of a new diagnosis or treatment plan, call Cleveland Clinic through Capital Blue Cross at **1-833-433-5914**.

Blue Cross Care Management

This program helps you and your eligible family members understand health conditions and care options and can coordinate hospital visits and treatment plans so you can make informed choices and maintain your quality of life. Call **1-888-545-4512** for this free and confidential service.

Preauthorization: Know Before You Go

Certain services require preauthorization to ensure benefit payment. For example, if you're having surgery, be sure to get a preauthorization letter from Capital Blue Cross first. For more information, visit

capbluecross.com/preauthorization.

Examples of preauthorized services include inpatient admissions, diagnostic services, durable medical equipment, office and outpatient surgeries, therapy services, transplants, reconstructive and cosmetic services, medical injectables, investigational and new procedures and pharmaceuticals, and select outpatient behavioral health services. If you have questions, contact your Care Coordinator or call Capital Blue Cross at **1-800-471-2242**.

Lab Work and Same-Day Surgery

Where you go for lab work and same day (outpatient) surgery is up to you. If you use independent labs, you pay lower coinsurance. Call a Care Coordinator to find and schedule convenient, quality, and cost-effective providers.

Blue Distinction Centers

This program includes health care facilities and providers that deliver specialty care and better patient results at a lower cost. You benefit when you choose a Blue Distinction Center for these procedures:

- Hip/knee replacement
- Spine surgery
- Bariatric (weight loss surgery)
- Transplants

Compare costs and get preauthorization to minimize surprises. Get help from a Care Coordinator or call Capital Blue Cross at **1-855-300-2273**.

Mental Health Resources

Sometimes the hardest part about addressing a mental health issue is taking the first step. Telemedicine services from Capital Blue Cross and Teladoc can make that step a bit easier. Schedule a video or phone consultation with a provider anywhere, any time. Register now at virtualcarecbc.com and teladochealth.com before you need care.



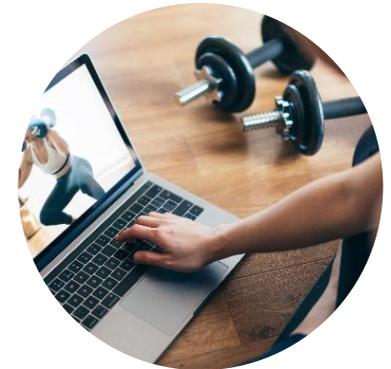
Your Guide to Using Health Care

Get Support for Your Joint Pain

When you're dealing with joint pain, muscle pain, or restrictions in movement due to a musculoskeletal condition, get one-on-one video visits from Sword to evaluate and treat pain and learn how to avoid it in the future.



<p>How can Sword help? Get matched with a licensed Doctor of Physical Therapy (DPT) who will create a personalized care plan for you. Follow your care plan through a video on a Sword-provided tablet. Exercises are adjusted based on real time data to ensure accuracy and safety</p>	<p>Why should I use it?</p> <ul style="list-style-type: none"> • Reduce risk of surgery and hours spent away from living life due to pain • Correct form in real time for optimal recovery 	<p>How do I get started?</p> <ul style="list-style-type: none"> • Visit swordhealth.com or call 1-888-492-1860 • Download the Sword Health app for more information
<p>Note: You can also use Sword Health for digital pelvic health care related to pregnancy, postpartum, menopause, bladder and bowel dysfunctions, sexual health, and pelvic floor disorders</p>		



Get Help for Serious or Specialized Health Conditions

When you need major medical treatment, get care from high-quality providers through Accarent. **This program is separate from your Capital Blue Cross medical plan coverage. You don't need to be enrolled in Capital Blue Cross to use this benefit.**



<p>What is Accarent? Accarent is an e-commerce marketplace for comparison shopping of bundle-priced medical procedures at Johns Hopkins Hospital and other select academic medical centers and top-rated hospitals.</p>	<p>How can Accarent help?</p> <ul style="list-style-type: none"> • Simplify the evaluation and comparison of healthcare quality and costs • Get care from industry-leading health care providers for all specialties shown below • Get guidance on choosing a treatment option or confirming a diagnosis 	<p>Why should I use it?</p> <ul style="list-style-type: none"> • No-out-of-pocket costs to you (copay or coinsurance) • Have confidence in your care plan by getting care from industry-leading centers and providers • Have direct contact with a dedicated team • Your care team will facilitate your transfer back to your primary physician or local in-network provider, confirm eligibility, carry out registration, and provide travel and lodging assistance 	<p>How do I get started?</p> <ul style="list-style-type: none"> • Call Accarent at 1-866-771-0697 • Or email casemanagement@accarenthealth.com for pricing, more information, help scheduling a consultation, and supporting your care journey
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Your Guide to Using Health Care



Convenience and Savings

Use more great resources for choice, convenience, and savings.

NEW! Teladoc Health

Teladoc Health gives you 24/7/365 access to U.S. board-certified doctors through the convenience of phone, video or mobile app visits. It's an affordable alternative to costly urgent care and ER visits when you need care now.

- **Teladoc Health's Cardiometabolic Program** is a virtual resource to help you manage chronic conditions such as diabetes, hypertension, and obesity. The program includes personalized coaching and connected devices. If you register, you can earn \$10 of Healthy Blue Rewards (see page 7 for details)!
- **Teladoc's Primary360** program connects you with doctors and nurses for ongoing health management via phone/video, handling everything from annual physicals to chronic conditions, prescriptions, labs, and referrals.

All Teladoc Health doctors:

- Are practicing PCPs, pediatricians, and family medicine physicians
- Average 20 years experience
- Are U.S. board-certified and licensed in your state
- Are credentialed every three years, meeting NCQA standards.

Teladoc Health does not replace your primary physician. It is a convenient and affordable option for quality care.

- When you need care now
- If you're considering the ER or urgent care for a non-emergency
- When on vacation, a business trip or away from home
- For short-term prescription refills



Teladoc Health is just a call or click away!
teladochealth.com | 1-800-Teladoc

Weis Markets LiveWell with Diabetes Associate Program

A virtual program to help associates with diabetes and pre-diabetes manage their health and naturally reduce blood sugar and A1C levels. Attend seven 30-minute classes and four 15-minute check-in calls over a three-month period. Topics such as medication management, nutrition for blood sugar management, reducing risks, and being active are covered.

Weis Markets LiveWell with Hypertension Associate Program

A virtual program to help associates with high blood pressure control and naturally reduce blood pressure levels. Attend six 30-minute classes and four 15-minute check-in calls over a three-month period. Topics such as proper usage of a blood pressure monitor, medication management, and nutrition guidance are covered.

Weis Markets LiveWell Programs

The LiveWell with Diabetes Associate Program and the LiveWell with Hypertension Associate Programs are virtual programs to help associates manage their health. Through these programs, associates gain access to support and guidance from a Weis Dietitian and Weis Pharmacist. When you complete either program, you're entered in a raffle for one day of vacation time! To enroll, email livewell@weismarkets.com.

Capital Blue Cross Nurse Line

Registered nurses provide free advice 24/7 on when to seek urgent care, home treatments, understanding your medications, and how to make decisions on tests, medication, and procedures, as well as when to call a doctor. Call **1-800-452-2583, TTY: 711**



Ovia Digital Women's Health Tool

Ovia Health is a free, digital maternity and family benefit that offers support for reproductive health, starting a family, having a healthy pregnancy, balancing life as a parent, and managing menopause. You have access to 1:1 coaching, a pregnancy calendar with daily baby updates, a child development checklist, and more. Visit capbluecross.com to learn more.



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Dental

Healthy teeth gives you something to smile about! You can choose from three plans, all offered through our **NEW** dental provider, Capital Blue Cross.

Note: If you enroll in medical/Rx and dental coverage through Capital Blue Cross, you will receive one ID card that includes both coverages, rather than separate cards. Go to CapBlueCross.com/finder, you can switch between medical and dental in-network providers by zip code to help you find in-network providers, facilities, services, and more.

Core Plan, Buy-Up Plan, and Dental Health Maintenance Organization (DHMO)

Both the **Core** and **Buy-Up Plans** have Capital Blue Cross' PPO Preferred Network. You may choose any dentist in or out of the network. However, if you see a provider from the PPO network, you save the most money. Plus, with in-network dentists, claims may be paid directly to your dentist. See the example on the next page.

Transition of Care

Capital Blue Cross Dental covers dental treatments that start after your Capital Blue Cross Dental coverage begins; anything already in progress is the responsibility of your old carrier. Expenses are incurred on the date the service starts (like when a tooth is prepared for a crown, or an implant is placed). Orthodontic payments from a prior carrier reduce the lifetime maximum available under your new plan. Always show your Capital Blue Cross ID card at appointments so providers can file claims correctly. For questions, call the Member Services number on the back of your card.

You always pay the deductible and copayment (\$). The coinsurance (%) shows what you pay after the deductible.

Plan Features	Core Plan		Buy-Up Plan		DHMO
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network Benefits Only
Deductible* (Individual / Family)	\$50 / \$150		\$50 / \$150		No deductible
Calendar Year Maximum	\$1,500 / person		\$2,000 / person		No limit on the number of services or benefits per year
Dental Benefits (what you pay)					
Diagnostic & Preventive Services (Palliative emergency treatment, and 2 of each of these per plan year: cleanings, exams, X-rays, sealants)	50% coinsurance	50% coinsurance**	No charge	No charge**	Covered in full
Basic Restorative Services (Fillings, oral surgery including anesthesia, root canals, and periodontics)	50% coinsurance after deductible	50% coinsurance after deductible**	20% coinsurance after deductible	20% coinsurance after deductible**	You pay scheduled amount
Major Services (Crowns, periodontics, bridges, and dentures)	50% coinsurance after deductible	50% coinsurance after deductible**	50% coinsurance after deductible	50% coinsurance after deductible**	You pay scheduled amount
Orthodontia (Children up to age 19)	50% coinsurance up to a lifetime maximum of \$500		50% coinsurance up to a lifetime maximum of \$500		You pay scheduled amount
Associate Contributions (weekly)					
Associate Only / Associate + 1 / Family	\$2.89 / \$6.18 / \$9.53		\$5.05 / \$10.80 / \$16.64		\$2.91 / \$5.64 / \$8.06

* The deductible does not apply toward the plan year maximum.

** Balance billing may apply



Example: How the Buy-Up Plan Pays Benefits

In both the Core and Buy-Up Plans, when you see in-network PPO Preferred dentists, you pay your share of the cost, up to the plan allowance. But with out-of-network dentists, you pay your share of the plan allowance **plus** any amounts the dentist charges above the plan allowance. That's why you save more with in-network dentists.

Here's an example of how the Buy-Up Plan pays benefits if you get a filling.

	PPO In-Network Dentist	Out-of-Network Dentist
Dentist charge	\$90	\$90
Plan allowance	\$70	\$72
Your coinsurance	20% coinsurance after deductible	20% coinsurance after deductible
Capital Blue Cross payment	\$56	\$57.60
You pay	\$14	\$32.40
Explanation of what you pay	20% of the \$70 plan allowance	20% of the \$72 plan allowance (\$14.40) plus the charges above the plan allowance (\$90-\$72=\$18)

The above example is for illustrative purposes only and assumes the annual deductible has been met.

Dental Health Maintenance Organization (DHMO) via Capital Blue Cross Dental Select

The DHMO operates differently than the Core or Buy-Up Plans. The DHMO's Select network is smaller but participating dentists have agreed to preset copayments — dollar amounts that are listed in the schedule of benefits — so you know the price of the service before you go. There are no deductibles or maximums, adult and child orthodontia is covered, and you don't file claims. Note there is **no out-of-network coverage**. You choose a primary dentist, who must coordinate any referrals if you need a specialist.

Before you enroll, be sure to look for and choose a dentist in the Select network at capbluecross.com or 1-800-613-2624. Also, see the DHMO Benefits Schedule on MyWeisBenefits.com. At lower right, under "Full-time Associates," click on "Resource Library."

capbluecross.com

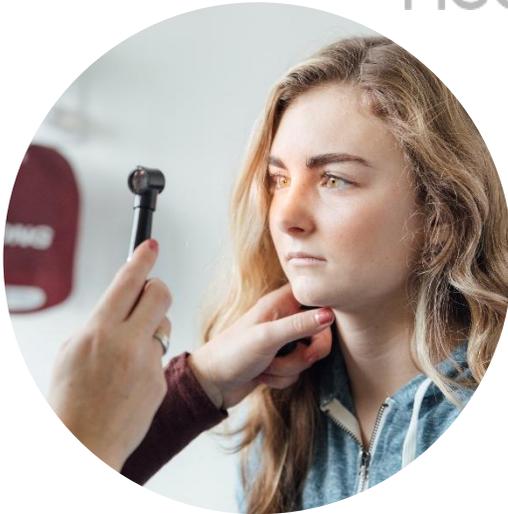
Set up your Capital Blue Cross account and download the app — register here:





Vision

Weis Markets offers vision coverage through EyeMed Vision Care. See any vision care provider, but for the highest level of benefits, use a network provider. Benefits are payable once every 12 months. To find network providers, visit eyemed.com and choose “Insight Network.” You also can save by using the Plus Provider network – a narrow network with discounts from Plus Providers. Search providers in your area to see if they are in the Provider Plus network.



You always pay the deductible and copayment (\$). The coinsurance (%) shows what you pay after the deductible. To see more details, including what the plan reimburses you when you go out-of-network, download the full vision chart at MyWeisBenefits.com

Plan Features	Plus Provider	In-Network	Out-of-Network
Exams			
Coverage	No cost	\$10 copay	Up to \$35
Frequency	1x / 12 months	1x / 12 months	1x / 12 months
Frames (allowed amount)			
Coverage	\$0 up to \$170	\$0 up to \$120	Up to \$60
Frequency	1x / 12 months	1x / 12 months	1x / 12 months
Lenses			
Single-vision	\$10 copay	\$10 copay	Up to \$25
Bifocal	\$10 copay	\$10 copay	Up to \$40
Trifocal	\$10 copay	\$10 copay	Up to \$55
Frequency	1x / 12 months	1x / 12 months	1x / 12 months
Contacts			
Elective	\$0 up to \$120	\$0 up to \$120	Up to \$96
Medically necessary	Paid in full	Paid in full	Up to \$200
Fit and Follow-up – Standard	\$0 copay	\$0 copay	Up to \$40
Fit and Follow-up – Premium	10% off retail, then \$40 allowance	10% off retail, then 40% allowance	Up to \$40
Other Services			
Laser vision correction	15% off retail or 5% off promo price	15% off retail or 5% off promo price	N/A
Associate Contributions (weekly)			
Associate Only / Associate + 1 / Family	\$1.54 / \$2.93 / \$4.31		



Protection

Life and AD&D Insurance

Protect your family's finances with life and AD&D insurance coverage. If the worst happens, your beneficiary – the person (or people) on record with the life insurance carrier – receives the benefit. Make sure that you name at least one beneficiary for your life insurance benefit, and change your beneficiary as needed if your situation changes. Find your options on [Workday](#) or by speaking to a Benefits Advocate.

Basic Life and AD&D Insurance



Weis Markets provides basic life and AD&D insurance at no cost to you. Coverage is automatic. You don't need to elect it. You can see your current coverage amounts through Workday.

Supplemental Term Life Insurance

You may purchase more life insurance coverage through MetLife. Coverage is available for your spouse and/or children if you purchase coverage for yourself. Costs will depend on your age and salary as of your coverage start date. Rates are set in five-year age bands, and if you age into a new band during the year, your rate will change after your birthday.

Note: After your initial eligibility period, all coverage increases require a Life and Disability Statement of Health form located in the enrollment instruction panel within Workday.

Voluntary Life Amounts*	
Associate	Increments of \$10,000, up to 7x basic annual earnings or \$500,000, whichever is lower
Spouse	Increments of \$5,000 up to \$250,000 or 50% of total associate coverage, whichever is lower
Children	\$10,000 per child (applies to all eligible children)** up to \$10,000 or 10% of total associate coverage, whichever is lower

Group Whole Life Insurance with Long-Term Care Rider



Group whole life insurance with long-term care (LTC) rider from The Standard (formerly Allstate Benefits) covers you in three ways:

- Life Insurance:** Includes traditional whole life insurance to protect your family
- Long-term care feature:** Lets you draw on your life insurance benefit to help pay for qualified long-term care
- Cash value:** Provides a fund you can use for emergencies

TERM LIFE OR WHOLE LIFE?

Compare them and decide for yourself.



Term life insurance coverage pays a set dollar amount to your beneficiaries upon your death. Coverage ends when your employment ends.

Whole life insurance coverage is similar, but it can last throughout your lifetime — your “whole life” — and there's a cash value to the plan, which you can borrow against or use for retirement planning. That's why the premiums are higher.



Note: Associates are not guaranteed coverage when electing Whole Life or Term Life Insurance. Coverage will begin only after insurance companies reviews and approved the application.

* As a new hire, you will automatically be approved for up to \$200,000 of supplemental term life coverage without providing evidence of insurability. If you are married, your spouse can obtain up to \$10,000 in supplemental term life coverage without providing evidence of insurability.

** For children aged 14 days to six months, up to coverage of \$10,000.



Protection

Disability Insurance



Short-term disability (STD) and long-term disability (LTD) benefits provide a source of continuing income if you can't work because of a covered injury, sickness, or pregnancy. MetLife administers the disability plans, as well as Family and Medical Leave Act (FMLA) and military leave benefits, and they must approve claims for you to receive payment. Please coordinate your time away from work and return to work with your supervisor.

Short Term Disability	
Eligibility	You're eligible on the first day of the month following 30 days from the date you become a full-time associate, if you are actively at work.
Cost of Coverage	Weis Markets provides short-term disability coverage at no cost to you. Coverage is automatic. You don't need to elect it.
Benefit	The amount of your benefit is based on a percentage of your predisability earnings. If you work in New York, part of your STD benefit is provided from state benefits, which are also administered and paid by MetLife. Log in to Workday to see your specific coverage level.
Long Term Disability	
Eligibility	<p>Long-term disability coverage pays benefits once you have been disabled longer than 180 days. If you elect LTD coverage, you must complete a Life and Disability Statement of Health form and must be approved by MetLife for coverage to take effect.</p> <p>As a new hire, you're eligible on the first day of the month following 180 days of continuous employment from the date you become a full-time associate. This means you will make your election now, but coverage and payroll deductions will begin in 6 months.</p>
Cost of Coverage	Costs will depend on your age and salary as of that date. Rates are set in five-year age bands (e.g., 24-28, 29-33, etc.). If you age into a new band, your rate will change the pay period after your birthday. You will see your personal costs for coverage when you enroll through Workday.
Benefit	Once you have been out of work for 180 days for an approved disability, you can receive up to 60% of your pre-disability earnings, up to a maximum of \$10,000 per month.





Supplemental Health Benefits to Offset Medical Costs

Your medical plan helps cover the cost of illness, but a long-lasting medical crisis often involves additional expenses and may affect your ability to bring home a full paycheck. These plans provide you with resources to help you get by while there are additional strains on your finances.

Please call MetLife at **1-866-626-3705** to file a claim for benefits or call **1-800-GET-MET8 (1-800-438-6388)** for general questions.

<p>Hospital Indemnity Insurance*</p>	<p>Hospital indemnity insurance can enhance your current medical coverage. The plan pays a lump-sum benefit when you or an enrolled dependent is admitted or confined to the hospital for covered accidents and illnesses. You can use the money you receive under the plan however you see fit, for paying medical bills, childcare, or for regular living expenses like groceries—you decide. You also may cover your spouse and dependent children.</p> <p>*IMPORTANT: Weis Markets offers a fixed indemnity policy; this is NOT health insurance. If you are considering purchasing this policy, please read the notice in our Voluntary Benefits Booklet.</p>
<p>Critical Illness Insurance</p>	<p>Critical illness insurance can help fill a financial gap if you experience a serious illness such as cancer, heart attack or stroke. Upon diagnosis of a covered illness, a lump-sum benefit is immediately paid to you. Use it to help cover medical costs, transportation, childcare, lost income, or any other need following a critical illness. You choose a benefit amount that fits your paycheck and can cover yourself and your family members if needed.</p> <p>*IMPORTANT: If you enroll as a tobacco user, the rates will remain the same for the <u>entire life of the policy</u>. This applies to both associate and spouse.</p>
<p>Accident Insurance</p>	<p>Accident insurance helps you pay for unexpected costs that can add up due to common injuries such as fractures, dislocations, burns, emergency room or urgent care visits, as well as physical therapy. If you or a covered family member has an accident, this plan pays a lump-sum benefit. The amount of money depends on the type and severity of your injury, the treatment you receive, and the type of plan you elected.</p>

RECEIVE \$100 FOR COMPLETING A WELLNESS TEST

Hospital indemnity and critical illness insurance each pay \$100 a year — a total of \$200 if you enroll in both plans — for completing one wellness test such as a mammogram, Pap test, or PSA (blood test for prostate cancer). The LDL cholesterol test that is included in the annual physical you complete as part of the Healthy Blue Rewards Program also counts as a qualified test. Contact MetLife to complete a claim and learn of other wellness tests that qualify under this benefit. If you have questions, please call **MetLife at 1-866-626-3705**.

Note: Supplemental benefits are not intended to be a substitute for medical coverage. These benefits are limited benefit group insurance policies — their provisions may vary or be unavailable in some states and may contain certain exclusions, limitations, and terms for keeping them in force. Certain states may require you to have medical coverage before enrolling for accident or hospital indemnity coverage. Benefits are underwritten by Metropolitan Life Insurance Company, New York, NY.



Protection

Using Your Supplemental Health Benefits



Benefit	Hospital Indemnity	Critical Illness	Accident
Example	<p>Susan has chest pains at home, and after contacting her doctor, she is instructed to go to her local hospital. Upon arrival, the doctor examines Susan and advises that she requires immediate admission to the Intensive Care Unit for further evaluation and treatment. After two days in the Intensive Care Unit, Susan moves to a standard room and spends two additional days recovering in the hospital. Susan was released to her primary care physician for follow up treatment and observation. Her primary doctor is now watching over her overall health.</p> <p>The benefits below show what Susan was reimbursed for by her hospital indemnity plan.</p>	<p>Jack elected \$10,000 (Initial Benefit) of critical illness coverage. Later, he suffered a heart attack and was hospitalized. He received \$10,000 from MetLife to help cover the gap in earning from his hospitalization. Two years later, he had another heart attack and again received \$10,000 from MetLife. Three years after that, he was diagnosed with kidney failure and once again received \$10,000 in payment from MetLife. At this point, he reached his Total Benefit (3x the amount of the Initial Benefit) and his policy was exhausted.</p>	<p>Alex's child plays soccer on the varsity high school team. During a recent game, his child collided with an opposing player, and was knocked unconscious, and was taken to the local emergency room (ER) by ambulance for treatment. The ER doctor diagnoses a concussion and a broken tooth. The doctor ordered a Computed tomography scan to check for facial fractures too. Alex's child was released to their primary care physician for two follow-up treatments, and a dentist repaired the broken tooth with a crown.</p> <p>The benefits below show how much money Alex was reimbursed for by his accident plan.</p>

Covered Benefit	High Benefit Reimbursement Amount	Illness – Covered Condition	Payment	Total Benefit Remaining	Covered Event	Benefit Reimbursement Amount
Regular Hospital Admission (1x)	\$1,000	Heart Attack – first verified diagnosis	Initial Benefit payment of \$10,000 or 100%	\$20,000	Ambulance (ground)	\$400
ICU Supplemental Admission (1x)	\$1,000				Emergency Care	\$150
Regular Hospital Confinement (3 total days)	\$300	Heart Attack – second verified diagnosis, two years later	Recurrence Benefit payment of \$10,000 or 100%	\$10,000	Physician Follow-Up (\$100 x 2)	\$200
ICU Supplemental Confinement (1 day)	\$100				Medical Testing	\$300
		Kidney Failure – first verified diagnosis, three years later	Initial Benefit payment of \$10,000 or 100%	\$0	Concussion	\$600
Benefits paid by MetLife	\$2,400				Broken Tooth (repaired by crown)	\$400
					Benefits paid by MetLife	\$2,050

Refer to the MetLife policy for complete benefit details, definitions, limitations, and exclusions



Protection

Additional Benefits

Weis Markets offers several additional offerings to help you design the benefits package that's right for you and your family. You pay the entire cost for these plans, but rates may be more affordable than individual coverage. And you get the added convenience of paying through payroll deduction.

Benefit	
Associate Discount Programs	<ul style="list-style-type: none"> Get special pricing on Apple products with customization and free shipping by calling 1-877-377-6362. Save on movie, theme parks, hotels, theater, tours, and more by accessing TicketsAtWork at ticketsatwork.com (company code: weismarkets). Enjoy a 12% discount on Verizon services at verizonwireless.com/discount
Auto and Home Insurance	Weis Markets has partnered with Travelers to provide you with access to special group rates on auto and home insurance. Applications and quotes are available directly from Travelers, and Travelers will bill you directly. For more information, call Travelers at 1-888-695-4640.
GuidanceResources Employee Assistance Program (EAP)	Get help with a variety of personal issues, such as emotional health, substance use disorder, parenting and childcare/eldercare needs, financial or legal advice. The EAP is completely confidential and free for any member of your immediate household. Associates have unlimited phone access 24/7, and the EAP offers up to 3 in person or video counseling per issue! Call 1-833-812-5182 or visit guidanceresources.com (web ID: WEIS).
Identity Theft Protection*	Identity theft is serious. The longer identity fraud goes undetected, the more expensive and difficult it becomes to resolve. For an affordable monthly premium, identity protection from ID Watchdog helps protect your personal information through proactive monitoring, identity restoration, and resolution. For more information, visit idwatchdog.com/myplan/weis .
International Medical Care	When you experience a health concern while traveling abroad, get the care you need with your Global Core coverage through Capital Blue Cross. As a BCBC member, you have access to doctors and hospitals, support tools, and resources around the world through the BCBS Global Core program. You may also be able to extend your healthcare benefits. Global Core is not comprehensive international medical insurance. If you want a comprehensive policy, you can purchase an individual one through GeoBlue at geobluetravelinsurance.com. To locate doctors and hospitals, or to obtain medical assistance services when outside the United States, call the BCBS Global Core Service Center at one of the toll-free numbers: 1-800-810-BLUE / 1-877-547-2903 or collect at 1-804-673-1177. Visit bcbsglobalcore.com for more information, and for prior authorization, call the number on the back of your ID card.
Legal Program*	Get financially healthy with affordable legal help for a range of events such as drafting a will, traffic ticket defense, buying or selling a home, caring for aging parents, and more. For more information, visit members.legalplans.com (access code: Basic: 9903386/Enhanced: 9903388).
Pet Insurance	When your pet gets sick, bills can add up faster than expected. Most pet insurance plans offer coverage for costs associated with both accidents and illnesses—even medications. Nationwide provides coverage for this program and will bill you directly. For more information, call 1-877-738-7874 or visit petinsurance.com/weismarkets .
Purchasing Power	Buy a wide variety of brand-name consumer products and services — electronics, appliances, vacation packages, and more — and pay via payroll deduction. Call 1-866-670-3479 or visit weismarkets.purchasingpower.com

*You must enroll in the Legal and Identity Theft options during Open Enrollment. All other additional offerings can be used any time during the year.



Financial

Weis Markets offers a slate of benefits to help you meet your current and future financial needs.

Weis Markets, Inc. Retirement Savings Plan (401(k) Plan)

THE 401(K) PLAN OFFERS:



Immediate eligibility for all associates.



Resources from Voya Financial, including **a mobile app** so you can manage your account right from your phone.



Quality investment options along with access to special services such as automatic account rebalancing and personal **investment assistance** from a licensed investment counselor.

Our 401(k) Retirement Savings Plan is designed to help you save for retirement. Associates are eligible to join the plan immediately. If you are age 21 or older, work at least 1,000 hours within a 12-month period (one year of service) and 1,000 hours each calendar year thereafter, Weis will match \$0.50 for every \$1.00 you contribute to the plan, up to 6% of your eligible pay. The plan offers tax savings through pre-tax 401(k) and Roth after-tax contributions. If you are at least age 21 or older, you will be auto-enrolled after 60 days of employment at 3% pre-tax contribution unless you contact Voya at 1-833-934-7658 to opt-out.

You can contribute up to 50% of your regular eligible pay and/or up to 100% of their irregular (bonus) pay to help boost your retirement savings. The IRS limit is \$24,500 in 2026. If you're age 50 or older, you can save up to an additional \$8,000 to \$11,250. Associates can adjust contribution amounts throughout the year.

Visit the Voya Financial website at weisretirement.voya.com to create and manage your account, investments and contributions.

Weis Markets Scholarship Program

This company-wide program awards 30 scholarships annually up to \$3,000 per year:

- Traditional four-year scholarships
- Non-traditional two to four-year scholarships
- Vocational/trade school scholarships, minimum one year program

Associates and children of associates who have been employed at least one year as of March 1, 2026, and are pursuing a full-time degree in the fall of 2026 are eligible.

Applicants must have at least two years of college or one year of trade school remaining beginning with the 2026-2027 school year. Choose "Scholarship Opportunities" on [MyWeisBenefits.com](https://myweisbenefits.com) to find the application and more information.

Email your completed application to HR@weismarkets.com by March 31, 2026.

Winners will be notified in May.

Thomas R. and Laura Ridge Scholarship

The Pennsylvania Food Merchants Association (PFMA)

offers \$2,500 one-year scholarships. Associates and children or stepchildren of associates are eligible

if you have been employed at least one year as of January 1, 2026, and the student will be full-time for the 2026-2027

academic year. Visit pfma.org/scholarships to complete the online application and submit by the deadline of March 2, 2026.



Scan the QR code to apply!

Contacts

Plan Name	Resource	Phone Number	Web Address (or Email Address)
Benefits Advocate	Benefits Information Service Center	1-800-662-5370 ext. 53400, option 1, option 2	benefitsupport@alliant.com
Benefits Department Medical / Dental / Vision / FSAs / Life / Disability / Retirement	Benefits Support	1-800-662-5370 ext. 53400 option 1, option 5	hr@weismarkets.com
Medicare MPC Insurance Group	Medicare Support	(717) 980-3201	www.mpcins.com
Medical, Rx, and Healthy Blue Rewards	Capital Blue Cross	(855) 300-2273	capbluecross.com
Telemedicine	Teladoc	(800) 835-2362	teladochealth.com
Second Opinion	Cleveland Clinic	(833) 433-5914	VirtualCareCBC.com
Dental	Capital Blue Cross	1-800-613-2624	capbluecross.com
Vision	EyeMed	(866) 723-0514	eyemed.com
Life / Supplemental Term Life / AD&D / STD and LTD	MetLife	1-800-GET-MET8	metlife.com/mybenefits
Hospital Indemnity / Accident / Critical Illness	MetLife	1-800-GET-MET8	mybenefits.metlife.com (claims, forms, etc.)
Group Whole Life	Allstate	(800) 521-3535	allstatevoluntary.com/weismarkets
Employee Assistance Program	GuidanceResources	(833) 812-5182	guidanceresources.com
HRA / Health care and Dependent care FSA	Optum Financial	(833) 325-9990	optumfinancial.com
Short-Term and Long-Term Disability	MetLife	(800) 438-6388	metlife.com/mybenefits
401(k) Retirement Savings Plan	Voya Financial	(833) 934-7658	weisretirement.voya.com
Auto and Home	Travelers	(888) 695-4640	travelers.com/weismarkets
Legal Services	MetLife Legal Plans	(800) 821-6400	members.legalplans.com
ID Theft Protection	ID Watchdog	(866) 513-1518	idwatchdog.com/myplan/weis
Pet Insurance	Nationwide	(877) 738-7874	petinsurance.com/weismarkets
Purchasing Power	Purchasing Power	(866) 670-3479	weismarkets.purchasingpower.com

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