

Annual benefits ENROLLMENT

**April 6-24,
2026**

Oak Street Health and Signify Health colleagues on a Jan. 1 benefits plan year **do not need to take action** for the April 6-24 enrollment period, and should continue to rely on [HCDTransitions.com](https://www.hcdtransitions.com) for information on medical and other enrolled benefits.

Annual benefits enrollment is open through **Friday, April 24**—so be sure to review what’s new for the plan year starting June 1, 2026. This is your chance to choose from a wide range of benefits, including medical, dental, vision, life insurance, legal services and identity protection coverage, and more. It’s your opportunity to choose coverage that fits your current needs.

Enrollment checklist

- Review your coverage and make any changes.
- If enrolling a spouse/partner in medical coverage, update your working spouse/partner attestation, if needed.
- Update tobacco/nicotine status for you and spouse/partner, if needed.
- If enrolling in medical coverage, don’t forget your preventive visit.

If you don’t enroll: In general, your current elections and coverage tiers, your working spouse/partner attestation election, and the tobacco/nicotine status for you and your enrolled spouse/partner will continue as of June 1, 2026. **You do need to make new Flexible Spending Accounts (FSAs) elections.** And if you are enrolled in Health Savings Plan (HSP) 1 in APCN Plus areas, be sure to check your network.

Premiums (paycheck contributions)

Tip: Check the benefits enrollment website from [Colleague Zone](#) > **My applications** > **View all** > **Benefits – Your Benefit Coverage** to see 2026-2027 premiums and your Annual Benefits Base Rate (ABBR).

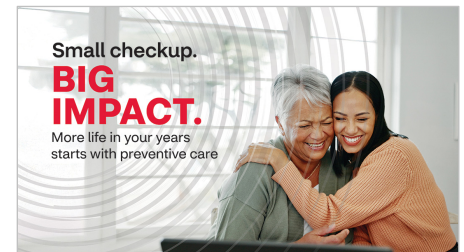
Here’s an overview of what you can expect:

- **Medical:** CVS Health shares in the cost of your health care coverage and continues to pay a significant portion, including most of the premiums. While CVS Health will absorb the majority of rising medical costs for the new plan year, your premiums will also increase. Your premiums are based on your ABBR, the plan option you choose and who you cover. ABBR is your base pay as of Feb. 28, 2026, plus an average of your last two years’ paid bonus and commissions (if applicable).
- **Other plans:** Dental and vision rates will increase due to increased use and higher costs. There are no increases for other annual enrollment benefits, including supplemental health options, life insurance, and disability insurance. Your premiums are based on the options you elect, who you cover and, for life insurance and critical illness insurance, your age and whether you use tobacco/nicotine.

- **Good news—lower premiums for the legal services plan and identity and financial protection:** With new providers for these plans, you'll see lower rates. See below for details.

Preventive Care Surcharge for medical plan participants

Preventive care isn't just routine; it gives us a chance for early detection, timely treatment and better long-term outcomes. That's why we say a small check-up can have a BIG impact. Colleagues across CVS Health took the important step of getting preventive care visits, and many reported that it made a big impact on their lives.



Since preventive care is an ongoing commitment, we're continuing the Preventive Care Surcharge for colleagues and spouses/partners enrolled in a company-sponsored Aetna medical plan.

For the 2026-2027 plan year, a preventive care visit must occur on or after **June 1, 2025**. Otherwise, an annual surcharge of \$500 per individual will apply. The surcharge will be deducted pro rata each pay period beginning in August 2026 and will continue through the end of the plan year (May 31, 2027), or until record of a preventive visit is processed.

You continue to have the same flexible options to complete your preventive care visit, including at a MinuteClinic®, through CVS Health Virtual Primary Care™, or with your provider. Details are outlined in the **Preventive Care Surcharge Guide** on the benefits enrollment website and [BenefitMoments.com](https://www.benefitmoments.com).

If you and your enrolled spouse/partner had a preventive care visit on or after June 1, 2025 while enrolled in a company-sponsored Aetna medical plan, no additional action is needed.

Record of the visit will be based on claims data. If not enrolled in a company-sponsored Aetna plan at the time of the visit, you can submit a completed Preventive Care Surcharge Physician Attestation form (available in the benefits enrollment website resource library) as record of the visit.

Getting a preventive care visit is voluntary. You and your spouse/partner can choose not to get an annual preventive care visit, and the surcharge will apply to each of you. If it is unreasonably difficult due to a complex or specific medical condition to obtain an adult preventive visit at this time, you can submit a Preventive Care Surcharge Accommodation form signed by your treating physician. This form is available in the benefits enrollment website resource library.

Other surcharges if you enroll in medical plan coverage



Check your working spouse/partner attestation on the benefits enrollment website. You may be subject to an annual surcharge of \$1,800 (deducted pro rata each pay period) if your spouse/partner has the option to elect subsidized medical coverage through their employer but instead enrolls in CVS Health medical coverage. See the Working Spouse/Partner FAQs in the benefits enrollment website resource library for information. The surcharge does not apply if you and your spouse/partner both work at a CVS Health-owned company.



Check your tobacco/nicotine status on the benefits enrollment website. You and your enrolled spouse/partner may be subject to an annual surcharge of \$500 per individual (deducted pro rata each pay period) if you or your spouse/partner use tobacco/nicotine two or more times per week. See the Tobacco/Nicotine Surcharge FAQs in the benefits enrollment website resource library for information on how to receive a refund if you or your spouse/partner updates your status to non-user during the year, completes one of our free cessation programs, or submits a Tobacco/Nicotine Surcharge Physician Attestation.

Medical plan options

Most colleagues continue to have three Health Savings Plan (HSP) options and two Hybrid Plans.

Tip: See the enrollment website resource library for a side-by-side comparison of all five plans plus detailed medical option summaries.

The **HSP options** will not change, with one exception—due to IRS rules, deductibles and out-of-pocket maximums for HSP 1 will increase as shown below. The amounts for HSP 2 and 3 will not change.

HSP 1 (in-network)	Current	NEW June 1
Deductible		
- Individual	\$1,650	\$1,700
- Family	\$3,300	\$3,400
Out-of-Pocket Maximum		
- Individual	\$3,300	\$3,400
- Family	\$6,600	\$6,800

The **Hybrid Gold and Silver Plans** will not change and continue to offer many no-charge services plus low copays for primary care and key services.

New company-paid critical illness plan

If your ABBR is \$85,000 or less and you enroll in an Aetna medical plan, you'll automatically receive a company-paid critical illness plan at no cost to you.

The critical illness plan pays lump-sum cash benefits for a wide range of covered conditions, such as a heart attack, stroke or cancer. Use the money to pay medical bills or living expenses like groceries or rent.

The company-paid plan also includes an enhanced feature—each covered family member can get a \$50 cash payment for having a preventive care test, such as a mammogram, colonoscopy or a skin cancer screening.

If you're eligible, you don't need to enroll in the company-paid critical illness plan; enrollment is automatic. If you would like to purchase additional critical illness coverage, you can enroll in the existing colleague-paid Basic or Enhanced option.

Other program updates for June 1

Health Savings Account (HSA) if in an HSP option	<ul style="list-style-type: none">• The IRS 2026 contribution limit (for combined Jan. 1 – Dec. 31 contributions from you and the company, if eligible): \$4,400 single or \$8,750 family coverage, plus \$1,000 if you are age 55 or older.• Contributions from the company if your ABBR is \$250,000 or less remain \$500 for single or \$1,000 for family coverage, divided per pay period.
Flexible Spending Accounts (FSAs)	<ul style="list-style-type: none">• NEW limit for Health Care and Limited Purpose FSAs: \$3,400. Up to \$660 of unused funds as of May 31, 2026, can be carried over for the new plan year.• NEW limit for Dependent Care FSA: \$7,500, with no carryover. Contributions may be limited for highly compensated employees.
Legal services plan—New provider	<ul style="list-style-type: none">• Plans from MetLife, including the choice of a low or high plan, offer flexible coverage for lower premiums.• With either plan, you have access to experienced legal help—with no waiting periods, no deductibles and no claim forms when using a network attorney for a covered matter—plus digital estate planning tools to create wills, living wills and powers of attorney.• If you're enrolled in current coverage with LegalEase, enrollment will automatically continue in the MetLife high option, unless you change your coverage election.
Identity and financial protection—New provider	<ul style="list-style-type: none">• The Norton LifeLock Benefit Premier Plus plan offers comprehensive coverage for lower premiums.• Get all-in-one protection against threats to your identity, personal devices and online privacy with features including Identity Theft Protection, Cyber Crime Coverage, Personal Device Security, Online Privacy, Parental Controls and more.• If you're enrolled in current coverage with Allstate Identity Protection, enrollment will automatically continue in the new plan at your current coverage tier, unless you change your coverage election.

Don't forget these other benefits

These additional choices available during annual enrollment also support your wellness, generally with no changes for June 1:

- Additional supplemental health options: accident, hospital indemnity
- Dental plans
- Vision plans
- Supplemental life insurance for you or family
- Supplemental accidental death and dismemberment insurance for you or family
- Universal life with living benefits
- Long-term disability (LTD) buy-up

Something for everyone, year-round

At any time of year, visit [CVSHealthBenefitExtras.com](https://www.CVSHealthBenefitExtras.com) for pet insurance, auto and home/renters' insurance, purchasing plans and the discount marketplace. Other benefits you can access all year long include the 401(k) savings plan, tuition reimbursement, discounts on CVS store purchases and more.

And, even if you don't enroll in CVS Health benefits, many **NO COST** resources are available including:

- MinuteClinic wellness services, including vaccinations, smoking cessation and weight management
- Confidential counseling for anxiety, depression, stress (20 sessions per issue) with 24/7 in-the-moment support
- Financial coaching and webinars for help with budgeting, credit management, saving and investing
- Online live fitness classes and one-on-one consultations with a member of the Aetna fitness team

Visit [BenefitMoments.com](https://www.BenefitMoments.com) for details.

Learn more, so you can choose well



BenefitMoments.com: Start with the **Annual Enrollment** page.

Virtual Benefits Fair: See key dates below for live webinars/chat; visit anytime for resources: cvshealth.vfairs.com (or access from Colleague Zone or Benefit Moments)



Benefits enrollment website: [Colleague Zone](#) > **My applications** > **View all** > **Benefits – Your Benefit Coverage**.

Enroll with guided steps and decision-support tools.

- **Resource library:** Find rate sheets, medical option summaries, FAQs, vendor/product brochures and more. Select **Learn** > **Resource Library**.
- **Virtual benefits assistant:** Use Emma EnrollPro™ to compare plans, coverages, costs and more. Click **Help me decide** to get personalized recommendations.



Personalized support: Get one-on-one guidance from a CFP® Financial Coach from Financial Finesse at **1-866-291-7134**, Mon. – Fri., 9 a.m. – 8 p.m. ET. Or use web chat on the Financial Finesse hub ([Colleague Zone](#) > My applications > View all > Financial Finesse).



Enrollment questions: HR Service Center at **1-888-694-7287** and say Health Care or press 1. Available Mon. – Fri., 8 a.m. – 12 a.m. ET, and Sat. – Sun. (April 11-12, April 18-19), 8 a.m. – 4 p.m. ET.

Other medical plan or health questions: Aetna One® Advocate at **1-800-558-0860**.

Key dates for annual enrollment

Date	Event
Monday, April 6	Annual enrollment opens; Virtual Benefits Fair opens
Tuesday, April 7	9 a.m. – 5 p.m. ET
Wednesday, April 8	12 p.m. – 7 p.m. ET
Thursday, April 16	9 a.m. – 5 p.m. ET
Friday, April 24	Annual enrollment closes; Virtual Benefits Fair remains open for resources

This publication provides a brief overview of company benefits and is for informational purposes only. If there's any difference between this and plan documents, official plan documents govern. CVS Health reserves the right to amend, modify or terminate all or part of its benefit plans at any time. This description isn't an employment contract or guarantee. Colleagues may need to meet certain eligibility requirements to participate. Colleague contributions are not used to pay plan expenses for vendors or other service providers that are subsidiaries of CVS Health, except as may be permitted under ERISA. Union colleagues aren't covered unless their collective bargaining agreement specifically provides for a benefit.