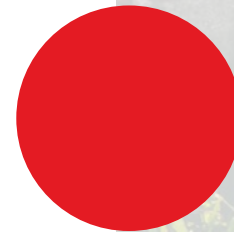


2026

OPEN

ENROLLMENT



WHAT'S STAYING THE SAME FOR 2026

Medical Carrier:	Cigna
Dental Carrier:	Cigna
Life Carrier:	Mutual of Omaha
Disability Carrier:	Mutual of Omaha
HSA Administrator:	UMB
FSA Administrator:	NueSynergy
401(k):	Empower
Retirement:	Two West Advisors
EAP:	Mutual of Omaha

PASSIVE ENROLLMENT

Active Enrollment for FSA and HSA



WHAT'S NEW FOR 2026

NEW!! Vision Carrier: EyeMed
through Mutual of Omaha

NEW!! Accident: Mutual of Omaha

NEW!! Critical Illness: Mutual of Omaha

NEW!! HDHP Deductibles:

Single: \$3,400

Family: \$6,800

NEW!! HSA Contribution Limits:

Single: \$4,400

Family: \$8,750

NEW!! FSA Contribution Limit:

Healthcare FSA: \$3,400

Dependent Care FSA: \$7,500 per household

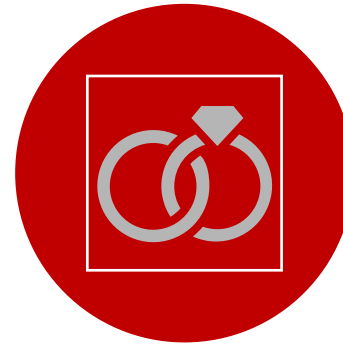


ENROLLMENT CHANGES



OPEN ENROLLMENT

November 3 - 18



QUALIFYING LIFE EVENT

Marriage / Divorce / Birth /
Adoption / Death / Loss of
Coverage / Reduction in work
hours

*You may not make changes to your benefits
unless you have a qualifying life event
You must make changes within 30 days of
the event*

3



THE BIG 3
Medical / Dental / Vision

In-Network Medical at a Glance with Garner

	\$5,000 HDHP	\$2,500 EPO*	\$5,000 PPO	\$2,500 PPO
Network	Open Access Plus	Open Access Plus	Open Access Plus	Open Access Plus
Deductible Single/Family	\$5,000 / \$10,000	\$2,500 / \$5,000	\$5,000 / \$10,000	\$2,500/ \$7,500
Embedded/Aggregate	Embedded	Aggregate	Embedded	Embedded
Deductible w/ Garner Single/Family	\$4,000 / \$8,000	\$1,500 / \$3,000	\$4,000 / \$8,000	\$1,500 / \$5,500
Coinsurance Cigna Pays You Pay	100% 0%	100% 0%	80% 20%	100% 0%
Out of Pocket Max Single/Family	\$5,000 / \$10,000	\$2,500 / \$5,000	\$6,350 / \$12,700	\$4,000/ \$8,000
Office Visits PCP Specialist/Urgent Care	Deductible Deductible	Deductible Deductible	\$35 Copay \$70 Copay	\$30 Copay \$60 Copay
Inpatient Services / ER Outpatient Services	Deductible Deductible	Deductible Deductible	Ded/Coinsurance Ded/Coinsurance	Deductible Deductible
Retail Rx Tier 1 / Tier 2 / Tier 3	Deductible	Deductible	\$15/\$40/\$75	\$15/\$40/\$75
Mail Order Rx Tier 1 / Tier 2 / Tier 3	Deductible	Deductible	\$45/\$120/\$225	\$45/\$120/\$225

*No OON Benefits

Please refer to your Benefits Guide or Employee Navigator for Details and Premiums



HDHP and PPO Differences

HDHP/EPO	
Tax Savings Vehicle	Health Savings Account
Office Visits	Deductible
Inpatient Services	Deductible
Outpatient Services	Deductible
Hi-Tech Diagnostics	Deductible
Prescriptions	Deductible

PPO	
Tax Savings Vehicle	Flexible Spending Account
Office Visits	Copays
Inpatient Services	Deductible/ Coinsurance
Outpatient Services	Deductible/ Coinsurance
Hi-Tech Diagnostics	Deductible/ Coinsurance
Prescriptions	Copays

Both allow contributions to a Dependent Care Flexible Spending Account

Pre-Tax Savings Features



Health Savings Account (HSA)

- Pre- Tax Contributions
- You Own the Account
- Pairs with the HDHP and EPO Plans
- Investment Options
- Portable

Can Pair with a Limited FSA



Flexible Spending Accounts (FSA)

- Pre-Tax Contributions
- HCFSA Rollover of \$680 at End of Year
- Anything Over \$680 is Forfeited
- Pairs with the PPO Plans

- Dependent Care FSA (DCFSA)
- No Rollover
- Eligible with any health plan

Pre-Tax Savings: Change in Maximum Contribution Amounts



Health Savings Account (HSA)

2026 Annual Limits

Single: \$4,400

Family: \$8,750

55+ Catchup: \$1,000

Rally House Annual Match

\$5,000 Plan

Employee & EE+SP: \$520

EE+CH & Family: \$1,040



Flexible Spending Account (FSA)

2026 Annual Limits

Healthcare FSA: \$3,400

Limited FSA: \$3,400 (*Vision and Dental only*)

Dependent Care FSA: \$7,500* per household

*new increase for 2026

Dental: Cigna

	In-Network	Non-Network* <i>Dentists Can Balance Bill</i>
Annual Deductible Single / Family	\$50 / \$150	
Annual Max per Enrollee	\$1,750	
Type 1 – Preventive <i>Exams, Cleanings, X-rays, Sealants, Flouride</i>	100% <i>No Deductible</i>	100% <i>No Deductible</i>
Type 2 – Basic <i>Fillings, Oral Surgery, Periodontics, Endodontics</i>	80%	80%
Type 3 – Major <i>Crowns, Dentures, Bridges</i>	50%	50%

**Paid at 90th Percentile of Submitted Charges*

****No Hard Copy Cards/ You must download from your Cigna Member Portal**

Please refer to your Benefits Guide or Employee Navigator for Details and Premiums



Vision: EyeMed through Mutual of Omaha

Network – EyeMed Insight	In-Network	Frequency
Eye Exam	\$10 Copay	1x every 12 Months
Standard Lenses Single Vision Lined Bi-Focal Lined Tri-Focal	\$25 Copay \$25 Copay \$25 Copay	1x every 12 Months
Frames	\$130 Allowance + 20% Off Remaining Balance	1x every 24 Months
Contact Lenses <i>(In lieu of frames and lenses)</i>	\$130 Allowance + 15% Off Remaining Balance	1x every 12 Months

***EyeMed does not issue ID cards; download app for benefits & ID cards**



Please refer to your Benefits Guide or Employee Navigator for Details and Premiums

Basic Life and AD&D Mutual of Omaha

Rally House provides Basic Life Insurance with Accidental Death & Dismemberment coverage in the amount of
\$10,000*
to all eligible full-time team members at no cost to the team member.

Don't forget to update your beneficiaries



*benefits reduce at age 70 & 75

By Using our EAP You Can:

- Improve Your and Your Family's Emotional and Psychological Health
- Gain a Better Work/Life Balance through the EAP Resources
- Access Legal and Financial Help without Extra Cost

Confidential and Voluntary

No information is shared with the employer unless required by law or in emergencies.



Professional Guidance

Licensed counselors, legal and financial advisors are available.

3 Free Visits

Accessible 24/7

Support available any time via phone, online chat, or in-person sessions (depending on the plan).

Free to Use

Services are paid for by Rally House, so employees and their families typically pay nothing.

Worldwide Travel Assistance: Mutual of Omaha

24/7 Services for you, your spouse and dependent children on any single trip
Up to 120 days in length
More than 100 miles from home

Pre-Trip Assistance
Emergency Travel Support
Medical Assistance
Identity Theft



Worldwide Travel Assistance

Services available for business and personal travel.

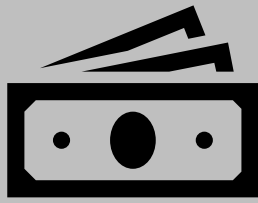
For inquiries within the
U.S. call toll free:

1-800-856-9947

Outside the U.S.
call collect:

(312) 935-3658





VOLUNTARY BENEFITS

Disability: Mutual of Omaha

Short-Term Disability	
Benefit Percentage	60% of Weekly Earnings
Maximum Benefit	\$1,250
Elimination Period	Benefits begin on 8 th Day
Maximum Benefit Period	12 Weeks

Long-Term Disability	
Benefit Percentage	60% of Monthly Earnings
Maximum Benefit	\$7,500 per Month
Elimination Period	90 Days
Maximum Benefit Period	Social Security Normal Retirement Age



Please refer to your Benefits Guide or Employee Navigator for Details and Premiums

Voluntary Life and AD&D: Mutual of Omaha

	Increments	Maximum Benefit	Guarantee Issue	Age Reduction
Team Member	\$10,000	5X Annual Salary up to \$500,000	\$200,000	Age 65 and 70
Spouse	\$5,000	50% of Associate Benefit up to \$250,000	\$50,000	Coverage Terminates at 70
Dependents	\$1,000	\$10,000	\$10,000	Coverage Terminates at 26

This is a true open enrollment. Which means Team members and their dependents may elect up to their Guarantee Issue amount without proof of good health.

Anything above Guarantee Issue will require completion of Evidence of Insurability

Employees must be enrolled in Voluntary Life to cover spouses and children



Supplemental Benefits: New Carrier Mutual of Omaha



Accident Insurance:

An Accident policy pays you a lump-sum cash benefit based on the type of injury and subsequent treatment is the result of a non-work-related accident.



Critical Illness / Cancer:

This policy helps to pay for hospital stays due to illness by providing you with cash benefits.



Please refer to your Benefits Guide or Employee Navigator for Details and Premiums



ADDITIONAL BENEFITS

Employee Perks

Paid Time Off

PTO starts accruing
Day 1

Shopping Discounts

Please refer to Team
Member Handbook

Employee Referral Bonus

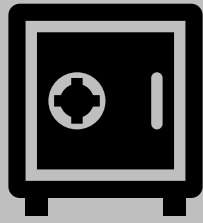
\$100 - \$500 Retail Referrals
\$1,000 Corporate Referrals

401(k) – Upon Meeting Eligibility

100% Company match of first 3%
contribution
50% Company contribution of next 2%
contribution
100% vested on Day 1

Financial Planning

See Benefits Guide for information
about Two West



COST SAVINGS TOOLS / VALUE ADDS

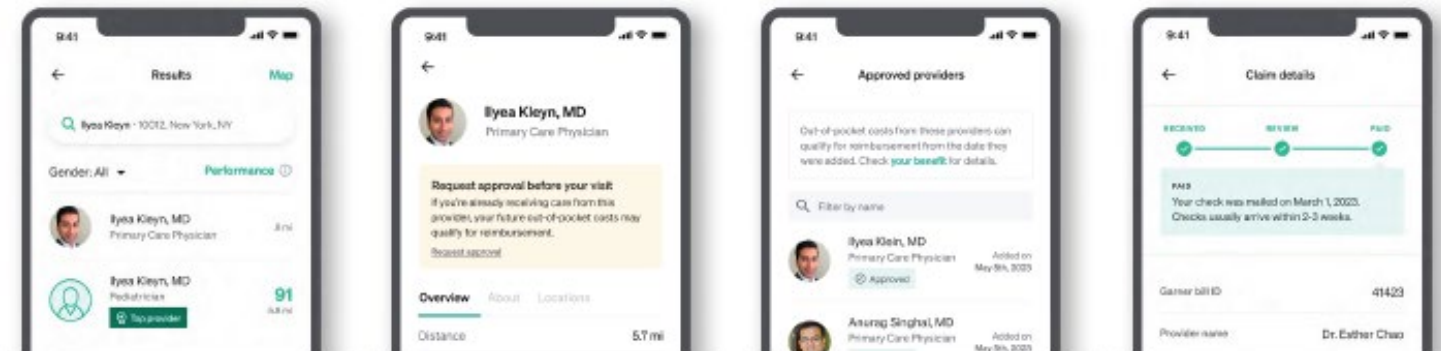
HEALTH NAVIGATION AND REIMBURSEMENT ACCOUNT

How it Works

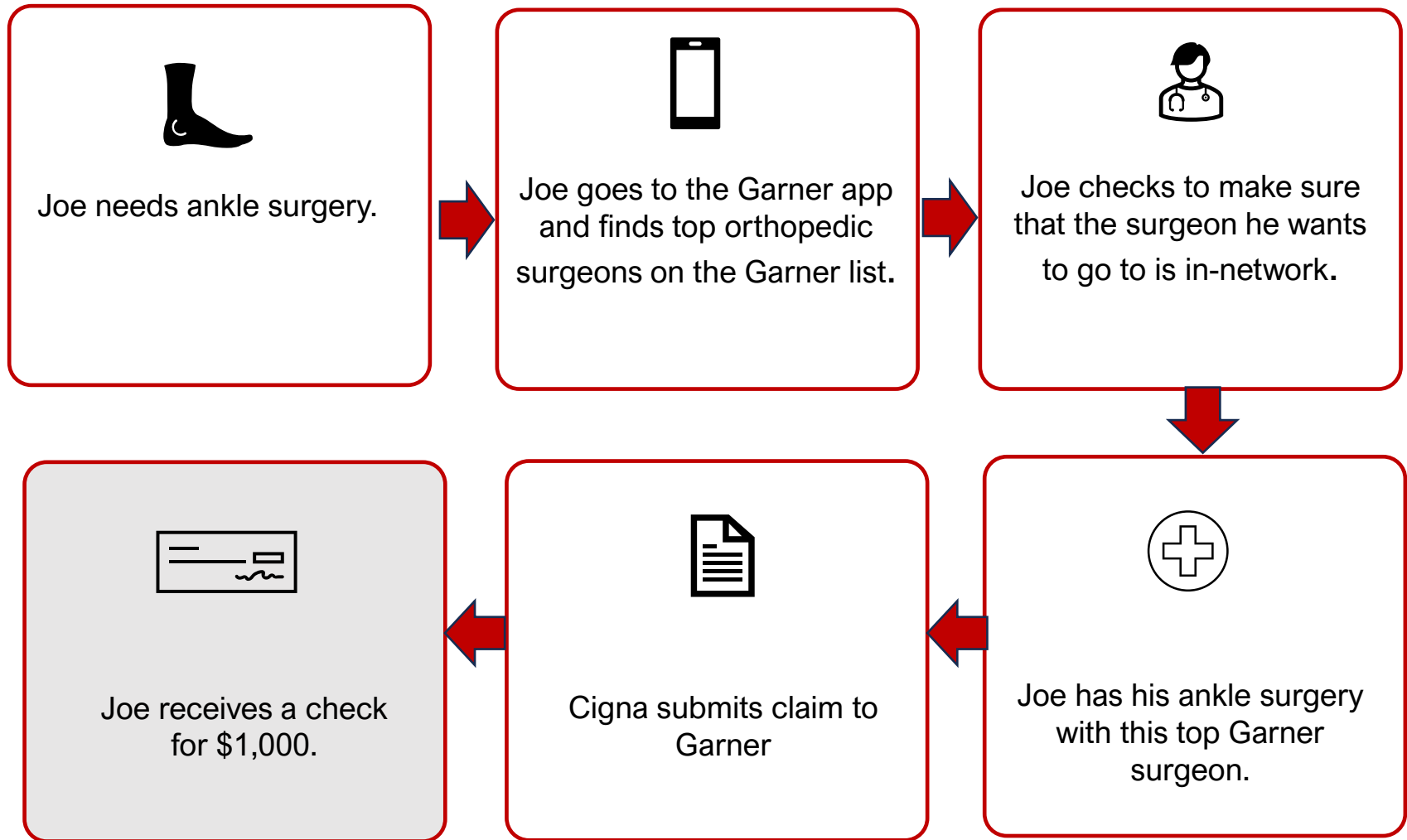
- Download the Garner App
- Start Searching for Top Quality Providers
- Check Approved Provider List
- Cigna will Submit Documentation to Garner on your behalf
- Get Reimbursed

Health Reimbursement Amounts

- Team Member: Up to \$1,000
- Team Member + Dependent: Up to \$2,000



GARNER EXAMPLE AND PROCESS



garner

I used Garner to help find an orthopedic surgeon in our area. The process was easy, and I loved seeing the ratings on patient reviews. And receiving money back was incredible.

Garner is a great resource for staff! I had surgery with two approved doctors and received the full reimbursement amount of the benefit within 6 weeks of my procedure. Customer service is great to work with. They needed to verify the total amount of a claim to ensure they were accurate. They were responsive and efficient.

Coming in January!

- Informational Meetings with Garner. Learn all you can about this cost savings tool!
 - Tuesday, January 13, 2026: 8:30 – 9:30 am (CST)
 - Wednesday, January 14, 2026: 12:00 – 1:00 pm (CST)

Member Portal and Mobile App

We encourage you to create your member portal to review claims, deductibles, find Cigna's value-added products/programs and manage your prescriptions

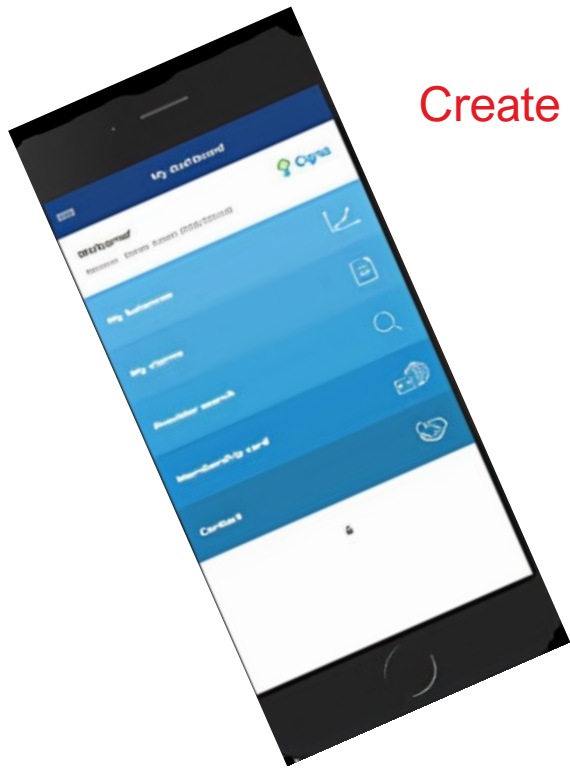
Go to mycigna.com website or launch the mycigna app and select "register now"

Enter your requested information

Confirm your identity

Create your security information and provide your primary email address

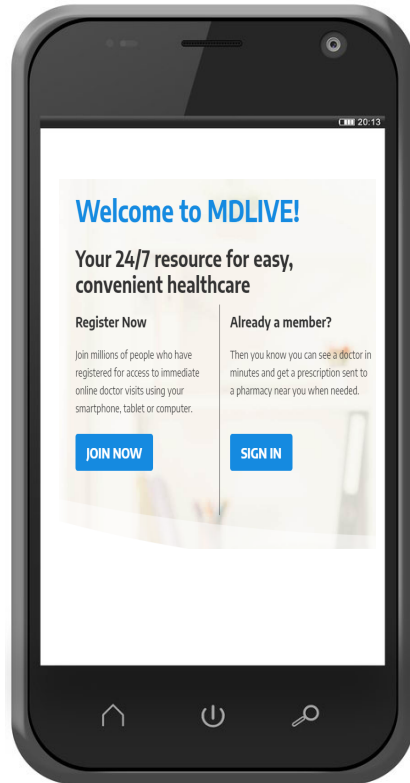
Review and submit



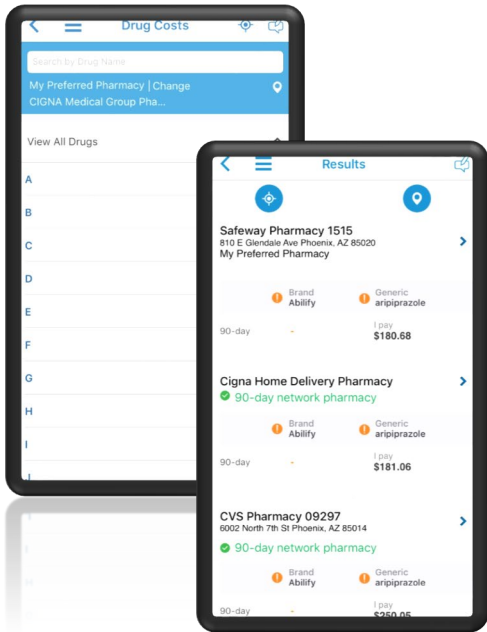
Telehealth

MDLiveforCigna.com
888-726-3171

- 24/7 Access
- Treats Minor Conditions:
 - Sore Throat
 - Flu
 - Colds
 - Poison Ivy
 - Behavioral Health
 - Dermatology
 - More...



Cigna Drug Pricing Tool



Get Drug Costs

What drug are you looking for?

View estimates for: Subscriber | DOB: 06/07/ | **Enter a City or ZIP Code:** Phoenix, AZ | **Enter or Select a Drug Name:** Prinivil **FIND DRUG**

[Use current location](#)
Select your favorite pharmacy below for faster searching

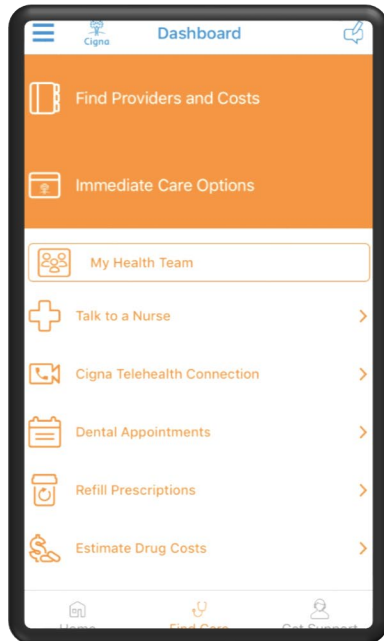
Enter or select drug information

Form/Dosage	Quantity	Frequency	Duration	GET COST ESTIMATE
<input type="radio"/> TAB 5MG	1	<input checked="" type="radio"/> per day	<input type="radio"/> 90 days	
<input type="radio"/> TAB 10MG		<input type="radio"/> per week	<input checked="" type="radio"/> 30 days	
<input checked="" type="radio"/> TAB 20MG		<input type="radio"/> per month	<input type="radio"/> 15 days	
		<input type="radio"/> per year	<input type="radio"/> 7 days	
		<input type="radio"/> as needed	<input type="text"/> days	

Select My Preferred Retail Pharmacy

Cigna Cost Estimator Tool

Cigna Cost Estimator Tool



Cigna search myCigna.com

REVIEW MY COVERAGE | MANAGE CLAIMS & BALANCES | FIND A DOCTOR, DENTIST OR FACILITY | HOME DELIVERY PHARMACY | ESTIMATE HEALTH CARE COSTS

Home » Find a Doctor, Dentist or Facility » Search Results Print This Page

Colonoscopy, Diagnostic

[BACK TO SEARCH RESULTS](#) [Start Over](#)

Compare your costs because they can vary significantly from one location to another.

Lowest: \$585
Smith, John O, MD's Office

Highest: \$2,083
Springfield Medical Center

For: GUEST
Doctor: Smith, John O, MD

Compare costs where Dr. Mustu performs this procedure:
Smith, John O, MD's Office - \$585

Compare costs where Dr. Mustu performs this procedure:
New Hospital Inc - \$1,298

1	Estimated Out-of-Pocket Cost Tip: Use account funds to pay out-of-pocket expenses	\$585	Estimated Out-of-Pocket Cost Tip: Use account funds to pay out-of-pocket expenses	\$1,298
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Item	Cost
Dr. Smith, John O, MDs Primary Procedure	\$512
Dr. Smith, John O, MDs Additional Procedure	\$67
Smith, John O, MD	\$0
Other Professional Services	\$0
Other	\$6
Total cost before applying coverage	\$585

Item	Cost
Dr. Smith, John O, MDs Primary Procedure	\$512
Dr. Smith, John O, MDs Additional Procedure	\$0
New Hospital, Inc	\$786
Other Professional Services	\$0
Other	\$0
Total cost before applying coverage	\$1,298

Your Coverage: Who Pays?

This procedure may be paid for by your plan as preventive care (depending on the doctor's diagnosis and/or your plan's preventive care coverage). If covered, you may owe nothing. Check your preventive coverage details.

Plan Pays Plan pays 85% after your deductible's met and 100% after your out-of-pocket max is met.	\$0
Copy	\$0

Plan Pays Plan pays 85% after your deductible's met and 100% after your out-of-pocket max is met.	\$0
Copy	\$0



ENROLLMENT

How Do I Enroll?

www.employeenavigator.com/benefits

Company Identifier: Rally House

- **Step 1:** Login
- **Step 2:** Click Start Enrollment
- **Step 3:** Provide Personal and Dependent Information
- **Step 4:** Select or Waive Each Benefit
- **Step 5:** If You Elect Benefits that Require EOI, you will be prompted to go to the carrier website
- **Step 6:** Review the Summary and Click to Accept

For Assistance with Employee Navigator

Please email Bukaty's Employee Navigator Service Team at

EnrollmentSupport@bukaty.com



SIGN UP FOR BENEFITS

REMEMBER:
This is a PASSIVE Enrollment!
You MUST Re-elect FSA and HSA Contributions

**If you want to make NO changes or FSA/HSA elections for 2026, you do NOT have to login to Employee Navigator.
Your 2025 benefits will rollover to 2026**



Your Benefits Team:
benefits@rallyhouse.com



OPEN ENROLLMENT DATES
November 3 – November 18

NEED HELP?

Contact Your Benefits Team

benefits@rallyhouse.com

Open Enrollment Hotline

844-249-0664

Your Bukaty Team



Prudence Rexroat
Bukaty Companies

Enrollment Support
EnrollmentSupport@bukaty.com

Escalated Service Issues
prexroat@bukaty.com



Krystle Lorigan
Bukaty Companies



THANK YOU

