

# 2025 BENEFITS PLAYBOOK HIGHLIGHTS

## The BrightSpring Team cares about your wellbeing

Our comprehensive benefits package is more than just support - it's a commitment to your total wellbeing. The benefits are designed to protect and enhance all aspects of your health, including your financial and mental wellbeing.

### Benefits Eligibility

Full-time employees (working 30 hours or more per week) are eligible for benefits on the first of the month following 30 days of employment.

#### As a full-time employee, you will have access to:

- + Comprehensive medical, prescription, dental and vision coverage
- + Group Term Life and AD&D with access to coverage for your family
- + Short and Long-Term Disability and an Employee Assistance Program (EAP)
- + Health Savings and Flexible Spending Accounts
- + Paid time off with up to 15 days in the first year plus seven holidays

### 2025 Health & Wellness Benefits – Medical Plan Options

You have four medical plan options to choose from and all of our Imagine360 plans include enhanced benefits and programs at no additional cost. These include Livongo, Noom, Hinge Health and more!

*Score More Insights!*

Find more information about your benefits by scanning the QR Code:




Discover more about our Imagine360 Medical Plans by scanning this QR Code for a quick video:

BRIGHTSPRING MEDICAL PLAN OPTIONS*				
Benefit Provision	\$900 Copay	\$2,800 Copay	\$2,000 Deductible w/ HSA*	\$4,000 Deductible w/ HSA
Individual Deductible	\$900	\$2,800	\$2,000	\$4,000
Family Deductible	\$1,800	\$5,600	\$4,000	\$8,000
Coinsurance (plan pays)	80% after deductible	70% after deductible	80% after deductible	70% after deductible
Individual Out-of-Pocket Maximum	\$4,000	\$5,600	\$4,600	\$6,000
Family Out-of-Pocket Maximum	\$8,000	\$11,200	\$9,200	\$12,000

MONTHLY MEDICAL RATES				
COVERAGE LEVEL	\$900 Copay	\$2,800 Copay	\$2,000 Deductible w/HSA	\$4,000 Deductible w/HSA
Employee Only	\$359.25	\$274.01	\$200.00	\$60.00
Employee Plus Spouse	\$909.55	\$720.27	\$698.31	\$334.72
Employee Plus Child(ren)	\$780.70	\$619.79	\$400.00	\$187.43
Family	\$1,250.52	\$897.72	\$873.93	\$448.07

\*This plan is an aggregate deductible (true family deductible) which means that the entire family deductible must be paid out of pocket before the plan begins to pay for services for one family member. If you have other family members on the plan, the overall family deductible must be met.

### Score Tax-Savings with Health Savings Account (HSA) and Flexible Spending Accounts (FSAs)

The HDHP and HSA make a great team! When you contribute to your HSA, BrightSpring will contribute up to \$350 for the calendar year. BrightSpring also offers a Health Care FSA for Copay Plan participants, a Limited-Purpose FSA for HDHP with HSA participants, and a Dependent Care FSA option to all employees.

#### Dental Benefits at a Glance

Our dental coverage is provided by Delta Dental. The PPO Plus Plan provides coverage for basic and major services as well as child and adult orthodontia with a lifetime maximum of \$1,500.



#### Vision Benefits at a Glance

Our vision coverage is provided by Delta Vision administered by VSP with a Low and High Plan options. Both plans cover annual exams, copays for lenses and allowances for frames and contact lenses.