

Employee Benefits Guide

2025

Plan Year Effective: Jan 1st – Dec 31st, 2025

You may request paper copies of all notices, free of charge, upon request to the Inotiv Benefits Department, at usbenefits@inotiv.com.



What you need to know for 2025

Inotiv is proud to offer a comprehensive benefits package to those employees working **30** or more hours per week. Benefits are effective on the first of the month following your date of hire. You have 30 days from your date of hire to enroll. After your New Hire Enrollment Period ends, you can only make plan changes or add/drop dependents during 2025 with a qualifying event. More information on the following items can be found throughout this guide.

- If you are adding a dependent to the medical plan, then dependent verification documents (birth certificates, marriage licenses, etc.) are required to be uploaded into Workday before you can submit your elections.
- If you are adding employee voluntary life insurance of more than \$200,000 or spouse life insurance of more than \$50,000, you will need to complete evidence of insurability through Sun Life.
- If you elect a high deductible medical insurance plan, Inotiv will contribute to your health savings account. If you choose to not contribute to a health savings account but still want Inotiv's contribution, you must elect the health savings account with a \$0 (zero-dollar) contribution for yourself. If you choose "waive", you will not get the employer contribution.
- Legal notices and benefit plan summary documents are available on the benefits website at <https://benefits.inotiv.com>.



Eligibility & Making Changes

2025 PLAN YEAR DETAILS

Eligibility

All full-time employees working 30 or more hours per week are eligible for the benefits program. **For new hires, benefits are effective on the 1st of the month following your hire date.**

- You may insure yourself, your legal spouse and eligible children under the benefit program.
- Children are eligible to remain on all benefits to age 26. Benefits will end at the end of the month following their 26th birthday.
- Your children of any age are also eligible if you support them, and they are incapable of self-support due to disability. Documentation is required.



Proof of Dependent Eligibility

As required by our insurance contracts, you may be required to provide proof of eligibility for your dependents. If your dependent becomes ineligible for coverage during the year, you must contact your plan administrator within 30 days.



Making Benefit Changes After Open Enrollment

Your medical, dental, and vision contributions are deducted on a pre-tax basis under a Section 125 Plan. Pre-tax benefits can **ONLY** be changed during annual open enrollment or within 30 days of the effective date of a qualifying event such as:

- Marriage
- Divorce
- Legal Separation
- Birth or adoption of a child
- Change in a child's dependent status
- Death of a Spouse, child, or other qualified dependent
- Commencement or termination of adoption
- Change in your spouse's benefits or employment status



Last Day of Benefits

Upon full-time separation of service, medical, dental, and vision benefits will end at the end of the month of your last day of employment. All other benefits end on your last day of employment.



Compliance

The offered plans meet essential and affordable guidelines in compliance with the Affordable Care Act. All Federal and State required Plan Notices can be found on our website, <https://benefits.inotiv.com>. You may also request a printed copy of all Notices, free of charge, upon request.

Overview of Benefit Contributions

Contributions Effective January 1, 2025, per Pay Period



Cigna Medical Premiums

Coverage Level	Traditional Plan	HDHP 3500	HDHP 4500
Employee Only	\$80.23	\$65.99	\$51.52
Employee + Spouse	\$194.78	\$158.59	\$126.70
Employee + Child(ren)	\$162.47	\$132.29	\$104.46
Family	\$257.76	\$209.82	\$166.12



Delta Dental Premiums

Coverage Level	Standard Low Plan	Premier High Plan
Employee Only	\$12.32	\$18.03
Employee + Spouse	\$26.18	\$38.34
Employee + Child(ren)	\$26.71	\$36.16
Family	\$40.89	\$56.63



VSP Vision Premiums

Coverage Level	26 Biweekly Pay Periods
Employee Only	\$3.72
Employee + Spouse	\$7.44
Employee + Child(ren)	\$7.97
Family	\$8.71



Life/AD&D/Short & Long-Term Disability

Coverage Level	26 Biweekly Pay Periods
Basic Life/AD&D (1x salary)	No cost to eligible employee
Short-Term Disability	No cost to eligible employee
Long-Term Disability	No cost to eligible employee
Voluntary Life/AD&D	Employee pays 100% of cost
Critical Illness/Accident	Employee pays 100% of cost

2025 Medical Benefit Overview



	Traditional Plan	HDHP 3500 (HSA)	HDHP 4500 (HSA)
	All plan information provided below is for IN-Network Providers.		
Deductible	Embedded	Embedded	Embedded
Single	\$1,500	\$3,500	\$4,500
Family	\$3,000	\$7,000	\$9,000
Coinsurance	20%	20%	20%
Out-of-Pocket Maximum	Embedded	Embedded	Embedded
Single	\$5,000	\$5,000	\$6,000
Family	\$10,000	\$10,000	\$12,000
Preventive Care	100% Coverage	100% Coverage	100% Coverage
Physician Office Visit	\$25 Copay	20% after deductible	20% after deductible
Specialist Office Visit	\$40 Copay	20% after deductible	20% after deductible
Virtual Care - MDLIVE	\$25 Copay	20% after deductible	20% after deductible
Virtual Specialist Visit	\$40 Copay	20% after deductible	20% after deductible
Urgent Care Centers	\$50 Copay	20% after deductible	20% after deductible
ER Services	\$300 Copay	20% after deductible	20% after deductible
Hospital Services	20% after deductible	20% after deductible	20% after deductible
Out-Patient Services	20% after deductible	20% after deductible	20% after deductible
Maternity Services	20% after deductible	20% after deductible	20% after deductible
Lab and Radiology	20% after deductible	20% after deductible	20% after deductible
	Preventive RX - Free		
	Retail Pharmacy		
Generic	\$10 Copay	20% after deductible	20% after deductible
Preferred	\$50 Copay	20% after deductible	20% after deductible
Non-Preferred	\$90 Copay	20% after deductible	20% after deductible
Non-Preferred	40% to \$250 Copay	20% after deductible	20% after deductible
	Mail Order Pharmacy		
Generic	\$25 Copay	20% after deductible	20% after deductible
Preferred	\$125 Copay	20% after deductible	20% after deductible
Non-Preferred	\$225 Copay	20% after deductible	20% after deductible
Specialty Rx	40% to \$250 Copay	20% after deductible	20% after deductible

***Embedded Deductible** — Each family member has an individual deductible within the overall family deductible. Meaning if an individual in the family reaches his or her deductible before the family deductible is reached, that person will start paying coinsurance.



CHOOSE A PLAN WITH CONFIDENCE

Cigna One Guide service can help.

We understand how confusing and overwhelming it can be to review your health plan options. And we want to help by providing the resources you need to make a decision with confidence.

That's why **Cigna One Guide® service is available to you now.**

Call a Cigna One Guide representative during preenrollment to get personalized, useful guidance.

Your personal guide will help you:

- Easily understand the basics of health coverage.
- Identify the types of health plans available to you.
- Check if your doctors are in-network to help you avoid unnecessary costs.
- Get answers to any other questions you may have about the plans or provider networks available to you.

The best part is, during the enrollment period, your personal guide is just a call away.

Don't wait until the last minute to enroll.

Call **888.806.5042** to speak with a Cigna One Guide representative today.

Together, all the way.®

After enrollment, the support continues for Cigna customers.

Cigna One Guide service will be there to guide you through the complexities of the health care system, and help you avoid costly missteps. Our goal is a simpler health care journey for you and your family.

Cigna One Guide service provides personalized assistance to help you:

- Resolve health care issues.
- Save time and money.
- Get the most out of your plan.
- Find hospitals and health care providers in your plan's network.
- Get cost estimates and avoid surprise expenses
- Understand your bills.

Access Cigna One Guide – after enrollment – in the way that's most convenient for you:

myCigna.com or the
myCigna® app

Live chat

Phone



Offered by: Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company or their affiliates.

Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and complete details of coverage, see your plan documents.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company (CHLIC), Connecticut General Life Insurance Company, Cigna Behavioral Health, Inc., Cigna Health Management, Inc., and HMO or service company subsidiaries of Cigna Health Corporation, including Cigna HealthCare of Arizona, Inc., Cigna HealthCare of California, Inc., Cigna HealthCare of Colorado, Inc., Cigna HealthCare of Connecticut, Inc., Cigna HealthCare of Florida, Inc., Cigna HealthCare of Georgia, Inc., Cigna HealthCare of Illinois, Inc., Cigna HealthCare of Indiana, Inc., Cigna HealthCare of St. Louis, Inc., Cigna HealthCare of North Carolina, Inc., Cigna HealthCare of New Jersey, Inc., Cigna HealthCare of South Carolina, Inc., Cigna HealthCare of Tennessee, Inc. (CHC-TN), and Cigna HealthCare of Texas, Inc. Policy forms: OK - HP-APP-1 et al., OR - HP-POL38 02-13, TN - HP-POL43/HC-CER1V1 et al. (CHLIC); GSA-COVER, et al. (CHC-TN). The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc. All pictures are used for illustrative purposes only.
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2025 HSA



A Health Savings Account (HSA) is a consumer-oriented, tax-advantaged savings account that is always combined with a High Deductible Health Plan (HDHP). It is an interest-accruing account, like an Individual Retirement Account (IRA), which provides financial control over how you spend your health care dollars and can be used to pay for your out-of-pocket medical expenses. HSA earnings grow tax-deferred and qualified withdrawals are tax-free without “use it or lose it” provisions found with a Flexible Spending Account (FSA). Money not used in your Health Savings Account can be rolled over to the following year. HSA funds can be used for all qualified medical expenses, including medical services, as well as eyeglasses, dental procedures, prescription drug coverage and over-the-counter medications provided you submit a prescription from your provider. See IRS Publication 969 for more information and a listing of Qualified Eligible Expenses at www.irs.gov.

Employer Annual HSA Contributions

If you enroll in the HDHP plan for January 1, 2025, Inotiv contributes to your HSA based on the tier of coverage you are enrolled in. **The annual amount is contributed on a per pay basis.** In order to get the employer contribution to the HSA, you must **Select** the HSA benefit plan even if you choose to contribute zero dollars yourself. If you choose **Waive**, you will not get the employer contribution **To contribute to an HSA account, you cannot be enrolled in Medicare, Medicaid or Tricare.**

Employer Annual HSA Contributions	
Employee Only	\$500
Employee+1 or more Dependents	\$1000

IRS 2025 Maximum Contributions – includes both employee and employer contributions

	2025 IRS Max Contributions	IRS Age 55 “Catch-up”
Employee	\$4,300	\$1,000
Family	\$8,550	\$1,000

If You Will Be Turning 65

- Active employees turning 65 have the option to accept or decline enrollment in Medicare, including Medicare Part A.
- Employees who accept enrollment in any part of Medicare are no longer eligible to make or receive contributions to an HSA.
 - If you elect Medicare at age 65, your maximum HSA contribution for the year you elect will be prorated by the number of months you were not enrolled in Medicare.
 - Employees who decline enrollment may continue to make and receive contributions to an HSA.
 - Qualified distributions remain tax free regardless of your eligibility to contribute.
 - Non-qualified distributions are taxable but no longer carry a 20% penalty after age 65.
 - Medicare Part(s) A, B, D and Medicare HMO premiums may be paid or reimbursed with tax-free HSA dollars. You cannot use your HSA to pay for Medigap premiums.

Bank of America allows you to choose investment options once your account balance is over \$1,000. This is comparable to how you can manage your 401k retirement savings today.



Flexible Spending Accounts (FSA)

Inotiv has chosen to sponsor Flexible Spending accounts, or “FSA’s” as part of your insurance benefits. An FSA is an IRS-approved method of paying for your ‘out-of-pocket’ expenses for health, dental, vision, qualified over-the-counter, and dependent care expenses with pre-tax dollars.

You have three plan options for 2025:

- 1 **Healthcare Flexible Spending Account:** If you enroll in the Traditional Plan, you may elect this plan.

Annual Maximum Benefit	\$3,300
FSA Debit Card	Included
Carryover	None

- 2 **Limited Purpose Flexible Spending Account:** Also, an FSA but is limited to paying for **qualified dental and vision care costs only**. Only HSA enrollees may elect this FSA plan.

Annual Maximum Benefit	\$3,300
FSA Debit Card	Included
Carryover	None

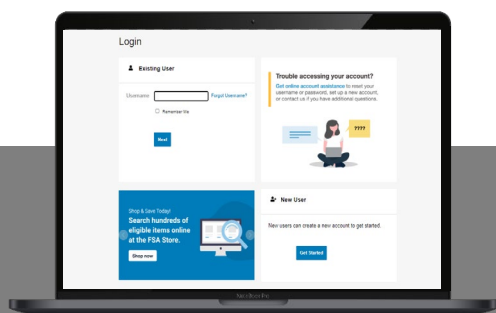
FSA Reminders:

- FSA dollars remaining in your healthcare, limited purpose and dependent care account at the end of the plan year are forfeited.
- Claims must be submitted to the plan in a timely manner or FSA dollars will be forfeited.
- If you separate from the company, you have 90 days from separation to file for reimbursement.

Bank of America is your FSA administrator. You have 24/7 access to your flexible sending accounts.

- 3 **Dependent Care Expense Account:** Available to all employees regardless of other benefit plan elections.

Annual Maximum Benefit	
Married, filing jointly	\$5,000
Single, or married filing separate	\$2,500
A Dependent Care FSA (DCFSA) is a pre-tax benefit account used to pay for eligible dependent care services, such as preschool, summer day camp, before or after school programs, and child or adult daycare . It's a smart, simple way to save money while taking care of your loved ones so that you can continue to work.	



Dental & Vision Benefit Summary



Delta Dental

	Standard Low Plan	Premier High Plan
Annual Deductible		
Individual	\$25	\$25
Family	\$75	\$75
Annual Plan Maximum	\$1,500	\$2,000
Orthodontia Lifetime Maximum	N/A	\$1,500
Plan Coinsurance Levels		
Preventive	100%	100%
Basic Services	50%	80%
Major Services	25%	50%
Orthodontia (Child or Adult)	N/A	50%
Provider Directory: www.deltadentalin.com		



Delta Dental has three levels of benefit coverage available; you can choose from any of these networks.

PPO Coverage - Offers significant discounts; no balance billing; acceptance of processing policies; and 108,000 dentist locations.

Premier Coverage - Negotiated fees; no balance billing; acceptance of processing policies; and 186,000 dentist locations.

Non-Participating Coverage - Balance billing and does not offer discounts.



VSP Vision

VSP Choice Network	
Routine Eye Exam - (once every 12 months)	
\$10 copay	
Materials - (once every 24 months)	
\$25 Copay \$150-\$200 allowance then 20% off any remaining balance	
Standard Plastic Lenses - (once every 12 months)	
Single vision (1 pair)	\$25 copay
Bifocal lenses (1 pair)	\$25 copay
Trifocal lenses (1 pair)	\$25 copay
Contact Lenses - (once every 12 months in lieu of glasses)	
Elective	\$150 allowance
Non-Selective	Covered in full
Lens Enhancements (Progressive, Anti-Glare, Scratch Resistant)	
\$0	
Provider Directory: www.VSP.com	



Members can visit vsp.com to find VSP in-network doctor, discover special offers and savings, and find the eye care and eyewear information they need.

When members create an account on vsp.com, they can:

- View personalized benefit information .
- Print a member ID card, if they prefer to have one.
- Customize their email preferences.

Utilize the Premier Program to maximize your savings.



Basic and Voluntary Life & AD&D



Basic Life and AD&D

Eligible Employees	All Full-Time Employees
Employee Benefit	1x Annual Salary
Min Benefit	\$50,000
Max Benefit	\$250,000
Reduction Schedule	Age 70 – 65% Age 75 – 50%

A life insurance policy is a contract with an insurance company. In exchange for premium payments, the insurance company provides a lump-sum payment, known as a death benefit, to your beneficiary. This is a good time to review and update your beneficiaries.



Voluntary Life and AD&D

Employee Benefit:

Increments	\$10,000
Max Benefit	Lesser of 5x Salary or \$500,000

Evidence of insurability (EOI) is required for new enrollments above the guaranteed issue amount.

Guaranteed Issue:	\$200,000
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Spousal Benefit:

Increments	\$5,000
Max Benefit	Lesser of 100% of Employee Benefit or \$250,000

Evidence of insurability (EOI) is required for new enrollments above the guaranteed issue amount.

Guaranteed Issue:	\$50,000
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Child Benefit:

(One premium charge covers all children)	\$10,000
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Rates are age based and will display in the enrollment system as you view coverage levels.



Cigna EAP

FOR EMPLOYEES & FAMILIES

Cigna's EAP can connect you with a range of services, including emotional support, financial assistance, home/life support, and legal assistance.¹

- Connect over the phone or through live chat and receive a referral to licensed clinicians and consultants.
 - Provides up to **three** sessions to connect with licensed clinicians in our EAP network per person, per issue, per year.
 - Meet with counselors virtually on your phone, tablet or home computer.
 - Live, on-demand EAP webcasts.
 - 100% confidential.
 - Available to anyone in your household.
 - No additional cost to you.
1. Employee assistance program services are in addition to, not instead of, your health plan benefits. These services are separate from your health plan benefits and do not provide reimbursement for financial losses. Customers are required to pay the entire discounted charge for any discounted legal and/or financial services. Legal consultations related to employment matters are excluded. Additional restrictions may apply. Program availability may vary by plan type and location and are not available where prohibited by law.

How can CIGNA EAP help?



Marriage



Divorce or Separation



Grief



Stress



Financial Worries



Alcohol/Drug Problems



Child/Adolescent Issues



Communication Problems

(877) 622-4327

Pet insurance

from Nationwide®



Fetch the best health coverage for your pet through your voluntary benefits package. With two budget-friendly plans plus a \$500 wellness benefit option,¹ there's never been a better time to sign up for My Pet Protection®, available only through your workplace benefits program.

- ✓ Get cash back on eligible vet bills: Choose 50% or 70% reimbursement².
- ✓ Easy to use: Base plans have a \$250 annual deductible and \$7,500 in annual benefits.
- ✓ Just for employees: Preferred pricing offered only through your company.
- ✓ Use any vet, anywhere: No networks, no pre-approvals.

Did you know? Nationwide is the first provider with coverage plans for birds and exotic pets.



How to use your pet insurance plan

1 Visit any vet, anywhere.

2 Submit Claim.

3 Get reimbursed for eligible expenses.

Visit: <https://benefits.petinsurance.com/inotiv> / Call: 877-738-7874



¹Starting on 9/1/23 new members can select the My Pet Protection® Wellness500 coverage option, with the earliest effective date of 10/1/23 and forward. Existing members can add My Pet Protection® Wellness500 during their respective renewal period only.

² Some exclusions may apply. Certain coverages may be subject to pre-existing exclusion. See policy documents for a complete list of exclusions.

Products underwritten by Veterinary Pet Insurance Company (CA), Columbus, OH; National Casualty Company (all other states), Columbus, OH. Agency of Record: DVM Insurance Agency. All are subsidiaries of Nationwide Mutual Insurance Company. Subject to underwriting guidelines, review and approval. Products and discounts not available to all persons in all states. Insurance terms, definitions and explanations are intended for informational purposes only and do not in any way replace or modify the definitions and information contained in individual insurance contracts, policies or declaration pages, which are controlling. Nationwide, the Nationwide N and Eagle, and Nationwide is on your side are service marks of Nationwide Mutual Insurance Company. ©2023 Nationwide. 23GRP9430

Legal Services, Critical Illness & Accident Insurance

MetLife Legal Plan

Money Matters

- Identity theft
- Negotiating with creditors
- Tax audit representation
- Financial planning workshops¹

Home and Real Estate

- Sale, purchase, or refinancing of a primary or vacation home
- Property tax assessment
- Foreclosure

Vehicle and Driving

- Defense of traffic tickets²
- License suspension due to DUI
- Repossession

Estate Planning Documents

- Simple or complex wills
- Living wills
- Revocable or irrevocable trusts

Civil Lawsuits

- Civil litigation defense
- Small claims assistance
- Pet liabilities

Family and Personal

- Adoption
- Prenuptial agreement
- Personal property issues

Elder Care Issues³

- Medicare
- Nursing home agreements
- Powers of attorney

Additional Services

- Law Firm E-Panel[®]
- Self-help documents



Critical Illness Insurance

Covered Conditions	Heart attack, Stroke, Major Organ Failure, Cancer, Paralysis, Coma
Employee Benefit Amounts	Benefit amounts range from \$10,000 to \$40,000 in \$10,000 increments
Spouse Benefit Amounts	Same as employee; cannot exceed 100% of the employee amount.
Child Benefit Amount	\$5,000 to \$20,000 in increments of \$5,000; cannot exceed 50% of employee amount

Accident Insurance

Covered Conditions	Accidental death, loss of limb, dislocations, fractures, burns
Employee Benefit Amounts	Benefit amounts range from \$100- \$100,000 depending on the accident
Spouse Benefit Amounts	Benefit amounts range from \$100- \$100,000 depending on the accident
Child Benefit Amount	Benefit amounts range from \$100- \$50,000 depending on the accident

Notes

Date: _____

Notes

Date: _____

Contact Information

Important Contact Information:

Please utilize the website resources for provider information, pharmacy information, and general claims information.

The Customer Service phone numbers can assist you with benefits and specific claims questions.



Additional education pieces and resources are available. Talk to your HR team for more information.

Inotiv Benefits Department Contacts

Email us at usbenefits@inotiv.com or

Visit <https://benefits.inotiv.com> for additional information

01

Cigna Medical

www.myCigna.com

Cigna OneGuide: (888) 806-5042

MDLIVE 24/7 Virtual Care (800) 726-3171

02

Delta Dental

www.deltadentalin.com

(800) 524-0149

03

VSP Vision

www.VSP.com

(800) 877-7195

04

Cigna EAP

www.mycigna.com

(877) 622-4327

Employer ID: Inotiv

05

Nationwide Pet Insurance

PetsNationwide.com

877-738-7874

Enroll online:

<https://benefits.petinsurance.com/inotiv>

06

Sun Life

www.sunlife.com

(800) 786-5433