

Employee Benefits Guide 2026

Plan Year: Jan 1st – Dec 31st, 2026

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 2026

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 2026 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 then \$200,000 or spouse life insurance of more then \$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

2026 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 selfsupport 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.





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 •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

•Legal Separation

•Birth or adoption of a child

Divorce

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, 2026, per Pay Period



Cigna Medical Premiums			
Coverage Level	Traditional Plan	HDHP 3500	HDHP 4500
Employee Only	\$83.44	\$68.63	\$53.58
Employee + Spouse	\$204.52	\$166.52	\$133.04
Employee + Child(ren)	\$170.59	\$138.91	\$109.69
Family	\$270.65	\$220.31	\$174.43



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 Perio		
Employee Only	\$3.72	
Employee + Spouse	\$7.44	
Employee + Child(ren)	\$7.97	
Family	\$8.71	



Life/AD&D/Short &	l ona-Term	Disability
LIIC/ADQD/JITOTEQ	Long Ichin	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

2026 Medical Benefit Overview



//////			
	Traditional Plan	HDHP 3500	HDHP 4500
	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
pecialist Office Visit	\$40 Copay	20% after deductible	20% after deductible
/irtual Care - MDLIVE	\$25 Copay	20% after deductible	20% after deductible
/irtual Specialist Visit	\$40 Copay	20% after deductible	20% after deductible
Jrgent Care Centers	\$50 Copay	20% after deductible	20% after deductible
R Services	\$300 Copay	20% after deductible	20% after deductible
lospital 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	20% after deductible	20% after deductible	
ab 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.





2026 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, 2026, 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 2026 Maximum Contributions – includes both employee and employer contributions

	2026 IRS Max Contributions	IRS Age 55 "Catch-up"
Employee	\$4,400	\$1,000
Family	\$8,750	\$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.

Lively allows you to choose investment options. 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 2026:

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

Annual Maximum Benefit	\$3,400
FSA Debit Card	Included
Carryover	None

$\widehat{}$	Limited Purpose Flexible Spending Account: Also,
2	an FSA but is limited to paying for qualified dental and
	vision care costs only.

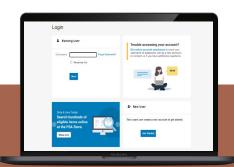
Only HSA enrollees may elect this FSA plan.

Annual Maximum Benefit	\$3,400
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.

Lively is your FSA administrator. You have 24/7 access to your flexible sending accounts.



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

Annual Maximum Benefit	
Married, filing jointly	\$7,500
Single, or married filing separate	\$3,750

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

Standard Low Plan \$25 \$75	Premier High Plan \$25 \$75
\$75	
\$1,500	\$2,000
N/A	\$1,500
100% 50% 25% N/A	100% 80% 50% 50%
	100% 50% 25%



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.

	V	SP Vision
VSP	Choic	ce Network
Routine Eye Exam - (once e	every 12 months)
\$10 copay		
Materials - (once every 24 months)		
\$25 Copay \$150-\$200 allowance then 20% off any remaining balance		
Standard Plastic Len	ses - (once every 12 months)
Single vision (1 pair) Bifocal lenses (1 pair) Trifocal lenses (1 pair)		\$25 copay \$25 copay \$25 copay
Contact Lenses - (once every 12 months in lieu of glasses)		
Elective Non-Elective		\$150 allowance Covered in full
Lens Enhancements (Progressive, Anti-Glare, Scratch Resistant)		
<u>\$0</u>		

vsp. vision care

Members can visit vsp.com to find VSP innetwork 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	
Employee can add or increase up to \$10,000 without evidence of insurability (EOI).		
Spousal Benefit:		
Increments	\$5,000	
Max Benefit	Lesser of 100% of Employee Benefit or \$250,000	
Spouses can add or increase up to \$5,000 without evidence of insurability (EOI).		
Child Benefit: (One premium charge covers all children)	\$10,000	

Rates are age based and will display in the enrollment system as you view coverage levels.



Cigna EAPFOR 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.
- 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.

(877) 622-4327

How can CIGNA EAP help?



Marriage



Divorce or Separation



Grief



Stress



Financial Worries



Alcohol/Drug Problems



Child/Adolescent Issues



Communication Problems



Pet insurance



Pet-loving employees can fetch the best health coverage for their pets with My Pet Protection ChoiceSM, available only through workplace benefit programs. Nationwide offers two ready-made employee plans, plus the ability to customize a coverage plan for individual pets and their specific care needs.¹

Pet protection when it matters most - Nationwide's per insurance plans cover:



My Pet Protection Choice	Accident & Illness	Accident, Illness & Wellness	Customizable
Annual Deductible Options	\$250	\$250	\$100 to \$500
Reimbursement Level	80%	80%	50%, 70%, or 80%

Nationwide is On Your Side...and Your Pet's side too!

- Employees may elect from two pet protection plans through Nationwide.
- If you enroll by the 15th of the month, the effective date will be the 1st of the next month.
- Enroll your pet when they are healthy.
- Exotic pets can be enrolled, except horses and livestock.
- Plan includes 24/7 vet helpline.
- Remember: You can use any vet, anywhere! No networks, no pre-approvals, and you receive preferred pricing as an Inotiv employee.

What's the difference between accident, illness and wellness coverage?



Accident coverage: Support for unexpected injuries



Illness coverage: Support for when pet gets sick



Wellness coverage: Support for proactive care

Enroll online ANYTIME at https://benefits.petinsurance.com/inotiv or 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.

Legal Services, Critical Illness & Accident Insurance

Smart. Simple. Affordable.®

Hyatt Legal Plans

A MetLife Company

Legal Services

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



401(k) Fidelity Investments



- Who is Eligible? All Inotiv employees
- Active following 90 days of employment
- Inotiv creates your account with Fidelity within 2.5 weeks from hire date, and you receive a Notice of Eligibility from Fidelity when you are eligible to start contributing



- You can create your account at NetBenefits.com
- Approximately 60 days after your hire date, you will receive an email from the benefits team as a reminder to log into Fidelity and set your deferral elections and your beneficiaries.



- Inotiv automatically enrolls you with a 6% 401(k) deferral with a 1% contribution adjustment annually
- Inotiv matches up to 3% of your salary (50% of your contribution up to a 3% salary match)



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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.



and resources are available.

Talk to your HR team for more

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

During Open Enrollment: (800) 564-7642 MDLIVE 24/7 Virtual Care (800) 726-3171

- Delta Dental

 www.deltadentalin.com

 (800) 524-0149
- 03 VSP Vision <u>www.VSP.com</u> (800) 877-7195
- Cigna EAP

 www.mycigna.com

 (877) 622-4327

 Employer ID: Inotiv
- Nationwide Pet Insurance
 PetsNationwide.com
 877-738-7874

Enroll online:

https://benefits.petinsurance.com/inotiv

06 Sun Life <u>www.sunlife.com</u> (800) 786-5433

