

2027 Open Enrollment Presentation

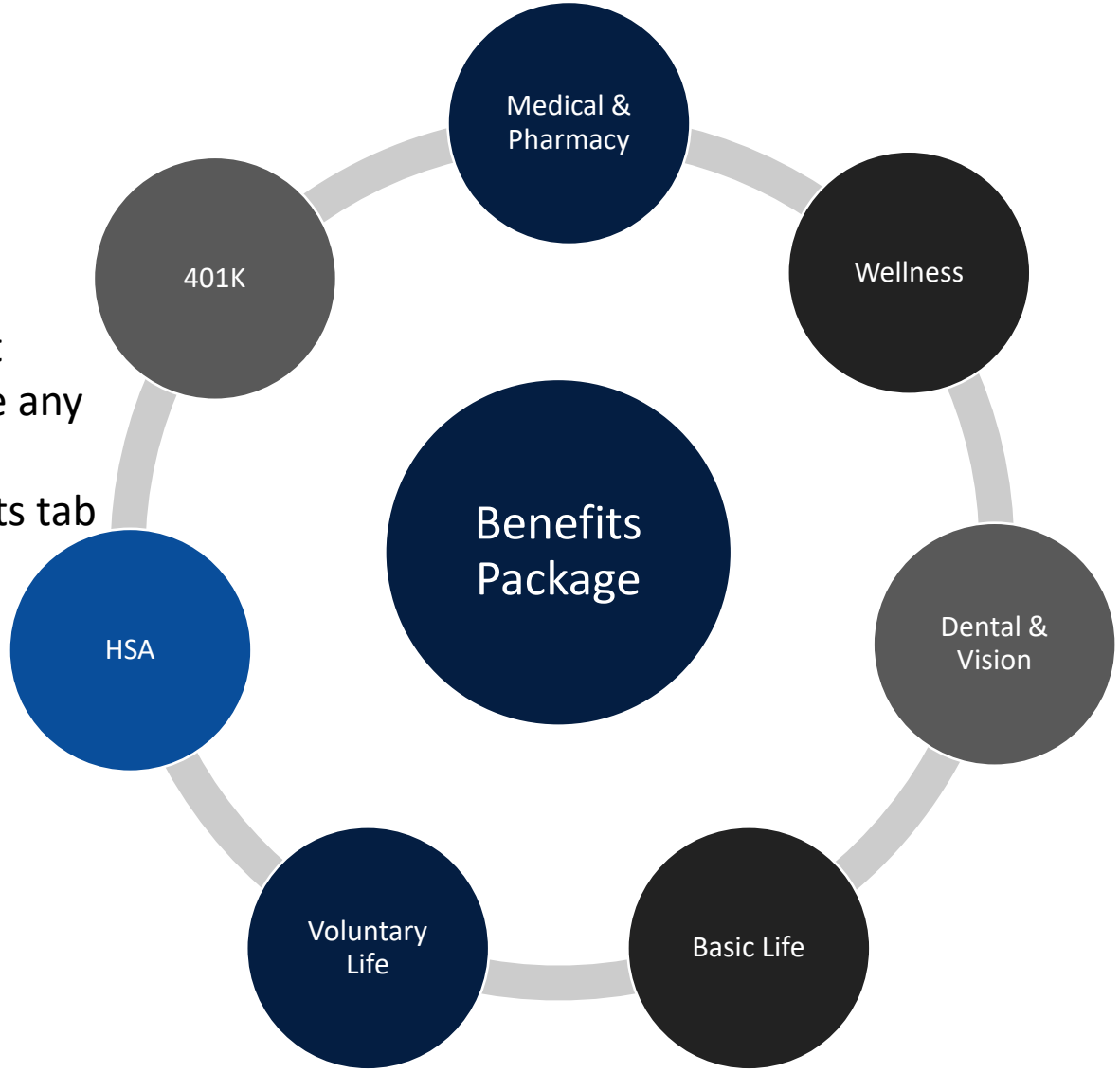
PCC Airfoils, LLC

2027 Open Enrollment

November 16th – November 27th

- This Open Enrollment will be passive. This means current elections will rollover if you do nothing. If you wish to make any changes to your benefits, add/drop dependents, update beneficiaries then login to Workday and click on the benefits tab to make updates for 2027.

Changes made during this Open Enrollment will take effect January 1, 2027



PCC Airfoils, LLC

2027 Open Enrollment

November 16th – November 27th



You can sign up for or change your benefits elections at the following times:

- As a newly hired full-time employee, elections must be made within 30 days of eligibility
- During the annual benefits open enrollment period (elections take effect January 1st)
- Within 30 days of experiencing a qualifying life event

Examples of Qualifying Life Events	
• Marriage	• Divorce, legal separation
• Birth or adoption of a child	• Gain or loss of coverage
• Change in dependent's status	• Change in work status

***Proof of qualifying event and dependent verification are required.**

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2027 What's New

- The HDHP deductible is increasing to $3,500 for single and $7,000 for family based on updated IRS guidelines. The HDHP out-of-pocket maximum is not changing.
- Health Savings Account (HSA) administration is moving from HealthEquity to Fidelity effective January 1, 2027.
- The 2027 IRS HSA contribution limits are increasing to $4,500 for single and $9,000 for family coverage.
- Effective January 1, 2026, PCC's 401(k) match is 100% of the first 3% you defer plus 50% of the next 2% (a 4% maximum match when you defer 5%). Match contributions made after 1/1/26 are 100% vested.
- The PPO-MMO-500 and PPO-MMO-1,000 medical plans, pharmacy, dental, vision, life insurance and EAP benefits are not changing.

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2027 Eligibility

You are eligible for benefits on the first day of the month following date of hire.

The plans offer coverage for eligible dependents, including:

- Your legal spouse
- Your children to age 26, regardless of student, marital, or tax-dependent status (including a stepchild, a legally-adopted child, or a child for whom you are the legal guardian)
- Your dependent children of any age who are physically or mentally unable to care for themselves
- You will be required to upload documentation to verify eligibility for any dependent you are adding (for example, a birth certificate, marriage license, or similar proof).

2027 Medical PPO-MMO-500 Plan

Medical Mutual of Ohio	PPO-MMO-500	
	Network Providers Individual/Family	Out-of-Network Providers Individual/Family
Calendar Year Deductible: Single / Family	$500 / $1,000	$1,000 / $2,000
Coinsurance	20% after deductible	40% after deductible
Maximum Out of Pocket Limit: Single / Family (Includes the deductible and coinsurance)	$4,000 / $8,000	$8,000/$16,000
Office Visit	$20 copay	40% after deductible
Specialist Office Visit	$40 copay	40% after deductible
Surgical Services	20% after deductible	40% after deductible
Complex X-Ray and Lab – CT, PET, MRI, MRA	20% after deductible	40% after deductible
Urgent Care Centers	$50 copay	40% after deductible
Emergency Medical Care	$250 copay	
In-Patient Hospital Services	20% after deductible	40% after deductible
Out-Patient Hospital Services	20% after deductible	40% after deductible

MMO Website – www.medmutual.com
Please see the MMO Certificate of Coverage for further information regarding benefits, network choice and more detailed coverage information.

HOW THE PLAN WORKS

Preventive Care: The plan pays 100% for in-network preventive care.

Annual Deductible: For non-preventive care there is an annual deductible that must be met. The annual deductible is $500 for Individual coverage and $1,000 for Family Coverage when you use in-network providers.

Out-of-Pocket Maximum: This is the most that you will have to pay for covered services in a plan year. All medical and prescription drug deductible, copayments and coinsurance apply toward the out-of-pocket maximum. Once you meet the out-of-pocket maximum, the plan pays 100% of your eligible expenses, including the cost of all office visits and prescription drugs, for the remainder of the year.

2027 Medical PPO-MMO-1,000 Plan

Medical Mutual of Ohio	PPO-MMO-1,000	
	Network Providers Individual/Family	Out-of-Network Providers Individual/Family
Calendar Year Deductible: Single / Family	$1,000 / $2,000	$3,000 / $6,000
Coinsurance	20% after deductible	40% after deductible
Maximum Out of Pocket Limit: Single / Family (Includes the deductible and coinsurance)	$6,000/$12,000	$12,000 / $24,000
Office Visit	$30 copay	40% after deductible
Specialist Office Visit	$60 copay	40% after deductible
Surgical Services	20% after deductible	40% after deductible
Complex X-Ray and Lab – CT, PET, MRI, MRA	20% after deductible	40% after deductible
Urgent Care Centers	$75 copay	40% after deductible
Emergency Medical Care	$250 copay	
In-Patient Hospital Services	20% after deductible	40% after deductible
Out-Patient Hospital Services	20% after deductible	40% after deductible

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Please see the MMO Certificate of Coverage for further information regarding benefits, network choice and more detailed coverage information.

HOW THE PLAN WORKS

Preventive Care: The plan pays 100% for in-network eligible preventive care.

Annual Deductible: For non-preventive care there is an annual deductible that must be met. The annual deductible is $1,000 for Individual coverage and $2,000 for Family Coverage when you use in-network providers.

Out-of-Pocket Maximum: This is the most that you will have to pay for covered services in a plan year. All medical and prescription drug deductible, copayments and coinsurance apply toward the out-of-pocket maximum. Once you meet the out-of-pocket maximum, the plan pays 100% of your eligible expenses, including the cost of all office visits and prescription drugs, for the remainder of the year.

2027 Medical HDHP – 3,500

Medical Mutual of Ohio	HDHP Plan	
	Network Providers Individual/Family	Out-of-Network Providers Individual/Family
Calendar Year Deductible: Single / Family	$3,500 / $7,000	$6,400 / $12,800
Coinsurance	20% after deductible	40% after deductible
Maximum Out of Pocket Limit: Single / Family (Includes the deductible and coinsurance)	$6,400 / $12,800	$12,800 / $25,600
Office Visit	20% after deductible	40% after deductible
Specialist Office Visit	20% after deductible	40% after deductible
Surgical Services	20% after deductible	40% after deductible
Complex X-Ray and Lab – CT, PET, MRI, MRA	20% after deductible	40% after deductible
Urgent Care Centers	20% after deductible	40% after deductible
Emergency Medical Care	20% after deductible	
In-Patient Hospital Services	20% after deductible	40% after deductible
Out-Patient Hospital Services	20% after deductible	40% after deductible

MMO Website – www.medmutual.com
Please see the MMO Certificate of Coverage for further information regarding benefits, network choice and more detailed coverage information.

HOW THE PLAN WORKS

Preventive Care: The plan pays 100% for in-network preventive care.
What is a High Deductible Health Plan (HDHP)? A high-deductible health plan, also called a consumer-driven health plan, is health coverage with lower premiums but higher out-of-pocket cost when you need care. HDHPs are designed to safeguard against catastrophic out-of-pocket cost for covered treatments and services. HDHPs do not have copays instead you pay for any services until you reach your deductible. Once your deductible is met your coinsurance kicks in and you pay a portion of the allowed charges until you reach your out-of-pocket maximum.
Annual Deductible: For non-preventive care there is an annual deductible that must be met. The annual deductible is $3,500 for Individual coverage and $7,000 for Family Coverage when you use in-network providers.
Out-of-Pocket Maximum: This is the most that you will have to pay for covered services in a plan year. All medical and prescription drug deductible, copayments and coinsurance apply toward the out-of-pocket maximum. Once you meet the out-of-pocket maximum, the plan pays 100% of your eligible expenses, including the cost of all office visits and prescription drugs, for the remainder of the year.

2027 Medical Mutual

MEDICAL MUTUAL OF OHIO®

My Health Plan is Medical Mutual's secure website for members

Go to medmutual.com/member to create your account

Other Resources available through Medical Mutual:

- 24-Hour Nurse Line
- WW (Weight Watchers) Program
- QuitLine Program for quitting tobacco usage (required for smokers to receive wellness incentive)
- Fitness Discounts
- Other Discounts – details available on My Health Plan

Information about these resources may be found in the Healthy Living section of Medical Mutual's website

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2027 Health Savings Account

Health Savings Account (HSA)

A Health Savings Account (HSA) is an interest-bearing checking account that you can fund with pre-tax contributions. You can use the money in your HSA to pay for your Qualified Medical Expenses including your prescriptions, medical, dental and vision expenses. Contributions can come straight out of your paycheck, and your HSA can grow tax-free too. You can even use the money to pay for retirement healthcare expenses and premiums.

The HSA is administered by Fidelity starting 1/1/2027. PCC Airfoils will make a contribution to your HSA if you open an account. The annual contribution is $500 if enrolled in Employee only coverage and $1,000 for EE + Spouse, EE+ Children and Family coverage. You do not need to make your own contribution to receive PCC's contribution but you must open the health savings account. Please note the PCC contribution amount will be contributed per pay throughout the year.

To be eligible to open an HSA account you must meet the following criteria:

- You cannot be covered by any other medical plan that is not an HSA-compatible health plan, including your spouse's medical plan or health care flexible spending account
- Be enrolled in the PCC Airfoils High Deductible Health Plan (HDHP).
- Cannot be enrolled in Medicare. However, you may withdraw money from your HSA after you enroll in Medicare to help pay for medical expenses, including Medicare premiums (this does not include Medigap) as long as you are age 65 or older
- Cannot be eligible to be claimed as a dependent on another individual's tax return
- Be a U.S. resident
- If you are a veteran, you may not have received veterans' benefits within the last three months

2027 Health Savings Account

Why choose an HSA?

Fidelity INVESTMENTS

1 Save on premiums

Unlock immediate savings with lower premiums while still enjoying the same doctors, networks and negotiated discounts.

2 Maximize tax savings

Your HSA earns tax-free[1] interest and you never pay taxes or penalties when you withdraw HSA dollars for qualified expenses.

3 Keep your money—forever

Money in your HSA rolls over year after year—even if you change employers or health plans.

4 Save for retirement

Invest[2] your HSA dollars into low-cost mutual funds, then watch your earnings grow tax-free.

[1]HSAs are never taxed at a federal income tax level when used appropriately for qualified medical expenses. Also, most states recognize HSA funds as tax deductible with very few exceptions. Please consult a tax advisor regarding your state's specific rules. | [2]Investments are subject to risk, including the possible loss of the principal invested, and are not FDIC or NCUA insured, or guaranteed by Fidelity. Investing through the Fidelity investment platform is subject to the terms and conditions of the Health Savings Account Custodial Agreement and any applicable investment supplement. Investing may not be suitable for everyone and before making any investments, review the fund's prospectus. After age 65, if you withdraw funds for any purpose other than qualified medical expenses, you will be subject to income taxes. Funds withdrawn for qualified medical expenses will remain tax-free.

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2027 Health Savings Account

Benefits of an HSA:

- It's flexible—pre-tax contribution amounts can be changed at any time and unused dollars roll over from year to year.
- It's portable—if you leave or retire, the HSA Account goes with you.
- You can save up to 40 percent depending on your tax bracket.

Pain relievers	Doctor visits
Dental cleaning	Sleep aids
Eyeglasses/contacts	Cough/cold medicine
Chiropractic care	Insulin testing supplies

HSA Contribution Information:

	HSA Contributions	
PCC Annual Contribution	$500	$1,000
2027 IRS Limits	$4,500	$9,000
Total amount you can contribute annually	$4,000	$8,000
Catch-Up*	+$1,000	+$1,000

*if you are over the age of 55, you may also make an additional 'catch-up' contribution of $1,000

2027 Save with an HSA

PPO vs. HSA Comparison

John Doe
Low Utilizer of Healthcare

Goes for his Annual Physical Exam + Labwork

Visits the Dr. 2x/year for Illness

Filled 3 Generic Prescriptions

1 Visit with Specialist

	Single Coverage		
	PPO – MMO - 500	PPO – MMO - 1000	HDHP 3500
	CLAIMS		
Annual Physical + Labwork	$0.00	$0.00	$0.00
2 Doctors Visits (Sick)	$40.00	$60.00	$140.00
3 Generic Prescriptions	$30.00	$30.00	$60.00
1 Specialist Visit	$40.00	$60.00	$200.00
TOTAL OOP MEDICAL COSTS	**$110.00**	**$150.00**	**$400.00**
	HSA FUNDS		
PCC HSA Contribution (used to pay for medical expenses)			-$500
	TOTAL MEMBER OUT-OF-POCKET SPEND		
TOTAL Member OOP Claims Spend	$110.00	$150.00	$0.00 **John still has $100 in his HSA that will roll over into the next year**

***Employee contributions should be factored in as well**

2027 Save with an HSA

PPO vs. HSA Comparison

The Smith Family
Medium Utilizers of Healthcare

Everyone goes for Annual Physical Exams + Labwork

Visits the Dr. 6x/year for Illness

Filled 10 Generic Prescriptions

Filled 25 Brand-Name (Tier 3) Prescriptions

1 Surgery + Inpatient Stay

	Family Coverage		
	PPO – MMO - 500	PPO – MMO- 1000	HDHP 3500
		CLAIMS	
Annual Physical + Labwork	$0.00	$0.00	$0.00
6 Doctors Visits (Sick)	$120.00	$180.00	$420.00
10 Generic Prescriptions	$100.00	$100.00	$200.00
25 Brand-Name (Tier 3) Prescriptions	$1,500.00	$1,500.00	$3,125.00
1 Surgery + Inpatient Stay	$3,250.00	$3,250.00	$4,000.00
TOTAL OOP MEDICAL COSTS	**$4,970.00**	**$5,030.00**	**$7,745.00**
		HSA FUNDS	
PCC HSA Contribution (used to pay for medical expenses)			-$1,000
		TOTAL MEMBER OUT-OF-POCKET SPEND	
TOTAL Member OOP Claims Spend	$4,970.00	$5,030.00	$6,745.00

***Employee contributions should be factored in as well**



The Smiths used the $1,000 HSA contribution from PCC to pay their medical expenses. They can contribute $8,000 into their HSA through pre-tax payroll contributions to fund at the maximum level for 2027 ($9,000 for Families)

2027 Pharmacy Program

CVS Caremark is the prescription plan carrier. Your prescription drug program allows you to obtain medications via mail or your in-network, local retail pharmacy. If you take certain medications on an ongoing basis, you save time and money by having those drugs filled for a 90-day supply through the CVS Caremark Mail Service or your local CVS pharmacy. Be sure to ask your doctor for a 90-day supply of your maintenance medications. NOTE: You can use pharmacies other than CVS.

Your prescription drug benefits are included with your medical benefit election regardless of the plan that you choose. Your Medical Benefits ID card should be used at the pharmacy when filling prescriptions. Your prescription copays will count towards your medical out-of-pocket maximum.

CVS Cost Saver makes sure you get the lowest possible cost for medications covered under your plan. All you need to do is present your CVS Caremark member ID card when you pick up your prescriptions, and CVS will manage the rest by automatically applying the lowest available discount price.

Benefit	Retail 30 Day Supply Co-Pay	Mail Order 90 Day Supply Co-Pay
Generic	$10	$20
Preferred Brand	$30	$60
Non-preferred Brand	$60	$120
Specialty	$100	N/A

*If enrolled in the HDHP you must reach your deductible before copays kick-in



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2027 Monthly Premium Incentives

PCC offers you the ability to reduce your monthly medical premiums if the Covered Employee and Covered Spouse complete the following:

- Incentive 1: Tobacco-Free status with signed affidavit (employee & spouse, if covered)
- Incentive 2: Preventative Care Compliance – Physician sign-off (employee & spouse, if covered)
- Incentive 3: Biometric Health Screening (employee & spouse, if covered)

As a reminder, the wellness incentives are not results-based. To receive the wellness discount, you will need to complete the tobacco free affidavit, physician sign-off for preventative care, and complete your biometric health screening.

*All incentive documentation should be sent to HR within 30 days of benefit eligibility to receive a reduced premium share. If it is medically inadvisable due to a medical condition for the participant to achieve the standards for the reward under this program, the participant may contact HR within 30 days of eligibility and we will work with the participant to develop an alternative program.



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2027 Dental Benefits

PCC Airfoils currently provides dental benefits through Delta Dental.

DELTA DENTAL®

	2027 Dental Benefits Summary		
	PPO Dentist	Premier Dentist	Non-Participating Dentist*
Annual Deductible	$25 per person / $50 per family (regardless of network)		
Preventive Care **Exams and Cleanings (once every 6 months)** **X-rays**	100%	100%	100%
Basic Care **Fillings** **Extraction** **Repair of crowns, bridges, dentures**	80%	80%	80%
Major Care **Single crowns** **Bridges & dentures**	50%	50%	50%
Annual Maximum Benefit	$1,500		
Orthodontia Lifetime Maximum (all ages)	$1,500		



* When you receive services from a Non-participating Dentist, the percentages in the column indicate the portion of Delta Dental's Non-participating Dentist Fee that will be paid for those services. This amount may be less than what the Dentist charges or Delta Dental approves, and you are responsible for that difference.

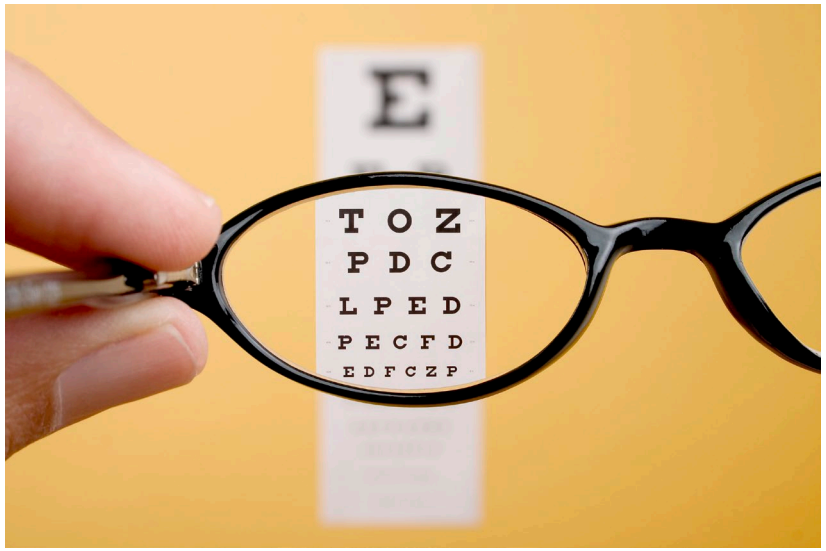
Due to recently adopted legislation, effective Jan. 1, 2025, Delta Dental of Ohio can no longer offer or apply discounts to services not covered by a member's dental plan.

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2027 Vision Benefits

PCC Airfoils currently provides vision benefits through EyeMed.

	2027 Vision Benefits Summary	
	Network	**Non-Network**
Routine Eye Exam (Once every 12 months)	$20 copay	$30 copay
Eyeglass Frames (Once every 24 months)	$130 allowance + 20% off balance	Up to $50 allowance
Eyeglass Lenses (Once every 12 months) **Single Lenses** **Bifocal Lenses** **Trifocal Lenses**	 $20 $20 $20	 $25 allowance $40 allowance $55 allowance
Contact Lenses **Conventional** **Disposable** **Non-Elective (Medically necessary)**	 $130 allowance, 15% off balance $130 allowance $0, paid-in-full	 $105 allowance $105 allowance $210 allowance



2027 Life Insurance



Basic Life & Accidental Death and Dismemberment (AD&D)

PCC Airfoils provides basic life and accidental death and dismemberment (AD&D) insurance equal to 1.25x your base annual earnings at no cost to you with a maximum coverage of $250,000. AD&D pays a full benefit in the event of your death due to an accident, and a portion is paid for serious injury.

2027 Optional Life Insurance

In addition to basic life insurance you can choose to purchase voluntary life insurance for yourself, dependent spouse or dependent child equal to 1.25 your base annual earnings with a maximum coverage of $250,000. AD&D is automatically included in the voluntary life insurance so you'll need to combine the life and AD&D rates on the next page to get your total monthly rate.

Covered Individual	Benefit Amount
Employee	1.25x base annual salary to a maximum of $250,000
Dependent Spouse	50% of employee's supplemental benefit to a maximum of $100,000 EOI (evidence of insurability) required for any amount over $25,000.
Dependent Children	**10% of employee's supplemental benefit to a maximum of $10,000**

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2027 Optional Life Insurance

Employee/Dependent Spouse rate per $1,000	
Employee Age	Monthly Rate
Under 25	$0.058
25-29	$0.071
30-34	$0.093
35-39	$0.105
40-44	$0.117
45-49	$0.175
50-54	$0.269
55-59	$0.502
60-64	$0.770
65-69	$1.483
70-74	$2.406
75+	$2.406

Supplemental Life - Child	$0.200 per $1,000
Supplemental AD&D	$0.029 per $1,000
Supplemental AD&D – Dependent Spouse	$0.029 per $1,000
Supplemental AD&D – Dependent Child	$0.029 per $1,000

To calculate your monthly premium:

Steps	Your Calculation
1. Amount Elected: Write the amount of Optional Life you are electing	Line 1:
2. Line 1 divided by $1,000 = Enter this amount in Line 2	Line 2:
3. Find your rate from the rate table and enter on Line 3	Line 3:
4. Line 2 multiplied by Line 3 = Your Monthly Cost	Line 4:

- Rates based on per $1,000 of covered benefit
- You must add the life and AD&D rate to get your total rate. You cannot only elect life or AD&D; they both must be elected.

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2027 Employee Assistance Program (EAP)

TotalCare EAP

- The TotalCare Employee Assistance Program is a free benefit for you and your family members.
- They offer a broad array of tools and services to help with problems that might affect your personal or work life. A few examples of these include:

Marriage & Family	Childcare/Elder Care	Wills
Stress	Grief	Substance Abuse
Legal Problems	**Depression**	**Mental Health**
Debt	Taxes	Divorce

In addition, the EAP offers hundreds of personal and professional development opportunities, from trainings to one-on-one telephonic coaching in the following areas:

Balancing Life at Work & Home	Student Debt	Succeeding as a Supervisor
Resilience	Workplace Conflict	Home Purchasing
Effective Communication	**Retirement**	**Mental Health**

Call 800-252-4555 or visit www.theEAP.com for assistance. They are available 24 hours a day / 7 days a week.

The EAP is a free benefit and your confidentiality is assured. No information about your use of the program is given to us as your employer unless you sign a release of information authorizing this. If you have personal difficulties of any kind, we encourage you to take advantage of this no cost, confidential benefit.

- The EAP provides up to 4 in-office counseling sessions per issue per year
- Unlimited telephonic counseling



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2027 Important Reminders

- The Annual Enrollment process will be ONLINE ONLY
- Benefits may be elected through Workday from November 16th - November 27th
- To make benefit changes, review your plan elections, dependents or update Beneficiary, please log onto Workday.
- If you are enrolled in the HDHP, your HSA will be administered by Fidelity starting January 1, 2027.
- Open Enrollment ends November 27th.
- Make sure to complete all wellness forms and return to HR by December 1st 2026



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2027 Questions?



Review Benefit information on the Benefits website:
PCC Airfoils (mypccairfoilsbenefits.com)
Questions can also be sent to the following email address:
PCCAirfoils@oswaldcompanies.com
Reach out to your local HR team for any additional questions.