

Empowering Your Health, Wealth, & Well-Being

Many of the updates highlighted in this guide are the direct result of employee feedback and insights, helping us make meaningful improvements where they matter most. We are excited to share these enhancements and encourage you to explore the opportunities available during this year's Open Enrollment.

Explore What's Coming in 2027

- **New** medical plan and prescription drug carrier
- **New** administrator for your spending accounts and commuter benefits
- **New** option to defer your bonus into your 401(k) savings plan
- **New** pet discount plan for dogs, cats, and exotics
- Medical plan deductible changes
- Increase in company HSA contribution to the Consumer Select PPO
- Enhancement to preventive care screenings and tests
- Increased IRS limits for HSA, FSAs, and 401(k) contributions
- Enhanced dental plan benefits
- Bereavement and parental leave updates
- Identity theft protection enhancements

[What's Changing](#)[Transition Details & Action Steps](#)[Enrollment](#)[Benefits Information](#)[Contacts](#)

What's Changing for 2027

[Medical Plan & Prescription Drug Carrier is Moving to Cigna](#)

Beginning January 1st, 2027, **your medical coverage will transition from Anthem to Cigna**. While you will have the **same four medical plan options** as today, Cigna brings **greater flexibility, convenience, and support** for you and your family, including:

- Greater access to in-network providers
- A more personalized healthcare experience
- Improved tools and resources designed to make managing your benefits easier

Same medical plan options. Your experience gets better.

- > **New Medical Plan and Prescription Drug Carrier**
- > **New Administrator for Your Spending Accounts**
- > New Option to Defer Your Bonus into Your 401(k) Savings Plan
- > Medical Plan Deductible Changes
- > Increased IRS Limits for HSA, FSAs, and 401(k) Contributions
- > Increase in Company HSA Contribution to the Consumer Select PPO
- > Preventive Care Screening Enhancement
- > Enhanced Dental Plan Benefits
- > Greater Support through Bereavement and Parental Leave
- > Identity Theft Protection Enhancements
- > New Pet Discount Plan for Dogs, Cats, and Exotics

While medical plan rates will increase this year, as part of our ongoing commitment, Otsuka will continue to provide an above-market healthcare subsidy in 2027, covering 84% of employee healthcare costs. In addition, we're introducing several plan enhancements to help you get more value from your benefits and reduce your out-of-pocket expenses. You'll find details throughout this guide.

[Health Savings Account \(HSA\), Flexible Spending Accounts \(FSAs\), and Commuter Benefits are Transitioning to Fidelity](#)

Your HSA, FSA, and Commuter Benefits administration will move from Anthem to Fidelity. Bringing your retirement and spending accounts together under one trusted provider makes it **easier to view, manage, and grow your savings in one place.**

Keep the Providers You Know & Trust

Approximately 99% of providers currently used by Otsuka employees already participate in Cigna's network. Follow the provider verification steps on **page 11** to confirm your doctors, specialists, and facilities participate in Cigna's network.



[!\[\]\(e8035e854f06b75bb648601630a41bea_img.jpg\) New Option to Defer Your Bonus into Your 401\(k\) Savings Plan](#)

Beginning January 1st, 2027, you will have the opportunity to **defer all or a portion of your eligible bonus payment(s)** into the Otsuka 401(k) savings plan. This new feature provides additional flexibility in how you save for retirement and allows you to increase your contributions beyond your regular paycheck deferrals.

Directing your bonus into your 401(k) can be a **simple and effective way** to accelerate your retirement savings goals. Whether you are looking to increase your retirement savings, maximize your savings potential, or make meaningful progress toward your long-term financial future, this new option gives you greater control over how you put your bonus to work.

- > New Medical Plan and Prescription Drug Carrier
- > New Administrator for Your Spending Accounts
- > **New Option to Defer Your Bonus into Your 401(k) Savings Plan**
- > **Medical Plan Deductible Changes**
- > Increased IRS Limits for HSA, FSAs, and 401(k) Contributions
- > Increase in Company HSA Contribution to the Consumer Select PPO
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Medical Plan Deductible Changes

The **Premier PPO, Choice PPO, and Consumer Select PPO** medical plan deductibles are increasing.

Medical Plan	Deductible
Premier PPO	\$200 (Individual) \$600 (Family)
Choice PPO	\$500 (Individual) \$1,500 (Family)
Consumer Select PPO	\$1,750 (Individual) \$3,500 (Family)
Consumer Value PPO	No change



Increased IRS Limits for HSA, FSAs, and 401(k) Contributions

Health Savings Account (HSA)

- **\$4,500** (Individual) | **\$9,000** (Family)
- Catch-Up Contributions: **\$1,000**

Flexible Spending Account (FSA)

- Health Care FSA: **\$3,500**
- Dependent Care FSA: **\$7,500**
- Dependent Care FSA: Limit for Highly Compensated Employee **\$4,000**

401(k) Plan*

- Employee Deferral Limit (Pretax & Roth Combined): **\$24,500**
- Age 50+ Catch-Up: **\$8,000**
- Age 60-63 Enhanced Catch-Up: **\$11,250**
- After-Tax Contributions: Up to the remaining amount under the **\$72,000** total annual contribution limit
- Combined Employee + Employer Limit: **\$72,000**

*Limits listed are for 2026. At publication, the IRS had not yet released 2027 limits.

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More Money for Your HSA in 2027

Otsuka is **increasing** the annual company HSA contribution for the **Consumer Select PPO** to **\$1,200** for individual coverage and **\$2,400** for family coverage.

Preventive Care Screening Enhancement

A new preventive care enhancement will **remove age restrictions** for certain recommended screenings and tests when your doctor determines they are medically appropriate. For example, if mammograms are typically recommended starting at age 40, but you are 25 and your doctor recommends one based on your health needs, it would be covered as a **\$0 preventive service**.



Enhanced Dental Plan Benefits

Delta Dental's Next Stage™ Women's Health program offers enhanced dental benefits for employees who are pregnant or experiencing menopause, including additional exams, bitewing X-rays, fluoride treatments, cleanings, and periodontal services. Registration is required through your Delta Dental online account, where you'll attest to your eligibility and provide your physician's contact information. Participants will also have access to curated women's health partner resources, such as educational tools, specialized providers, telehealth services, prescription support, and product discounts.

Greater Support through Bereavement and Parental Leave

- The bereavement policy is being expanded to **include pets** owned by the employee and residing in the employee's home.
- Parental Leave will also increase from **10 weeks to 12 weeks**, giving parents additional time to bond with and care for a new child.

Identity Theft Protection Enhancements

The following benefits are available to employees who are currently enrolled in **Norton LifeLock**, as well as those who elect coverage during Open Enrollment:

- Genie Scam Protection
- Financial wellness for balance change alerts
- Spending tracker and insights

New Pet Discount Plan for Dogs, Cats, and Exotics

The new **Pet Discount Plan** provides coverage and savings for dogs, cats, and exotics, including those with pre-existing conditions. The plan includes unlimited 24/7 pet telehealth, discounts on prescriptions, food, treats, toys, and in-office veterinary services, plus free shipping from PetCare Rx, same-day pickup for eligible prescriptions at Caremark pharmacies, and a pet ID tag with lost pet recovery service.

Note: The Pet Discount Plan is being added as an additional discount option for 2027. Wishbone Pet Health Insurance will continue to be available.

Enrollment in the Pet Discount Plan can be completed through Workday during Open Enrollment.

To enroll in or make changes to your Wishbone Pet Health Insurance coverage, please visit wishboneinsurance.com/otsuka-us at any time.

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A Seamless Transition for Your 2027 Benefits

Explore key details about the transition to Cigna for medical coverage and Fidelity for spending account management, including any actions you may need to take.

Your New Medical Coverage with Cigna

What's Staying the Same

- The medical plan options you know today are not changing. The same four plans will continue to be offered through Cigna, making Open Enrollment simpler and more familiar. **If you're currently enrolled in a medical plan and do not make an active election during Open Enrollment, your current plan and covered dependents will automatically carry over to the corresponding Cigna plan for 2027.**
- Cigna offers access to a broader provider network, but we encourage you to confirm that your current doctors, specialists, and facilities participate in the [Cigna network](#).
- **Telemedicine** through Cigna will remain available at **no cost**, helping you access convenient, affordable care.

What's New & Enhanced

There will be **no age restrictions** on **doctor-recommended** preventive screenings. Screenings recommended by your healthcare provider will be covered at **100%**.

Explore Your 2027 Benefits

Visit the [2027 Open Enrollment Resource Center](#) for plan details, decision-support tools, FAQs, and other resources to help you transition and enroll with confidence.

Get answers to **frequently asked questions** about 2027 benefit changes and enhancements.

We're here to make your transition easier.



Keep Your Care on Track During the Move to Cigna

If you or a covered family member is undergoing treatment that will continue after January 1st, 2027, and **your current provider is out-of-network with Cigna**, call the Cigna Customer Service Pre-Enrollment Line at **888-806-5042** to ask whether Transition of Care may apply. If approved, **Transition of Care** may allow you to keep seeing a current provider for a limited time if that provider is not in Cigna's network and assist in transitioning to an in-network provider or facility.

Transition of Care may apply if you or a covered family member is:

- Pregnant and due in early 2027
- Receiving cancer treatment or on dialysis
- Recovering from recent major surgery
- Undergoing transplant-related care
- Continuing treatment for behavioral health
- Managing a complex or ongoing condition

Support to help you plan ahead.



Steps to Transition Your Care Smoothly

1. **Check Cigna's network.** Use the [Cigna Health Care Provider Directory](#) or call the Cigna Customer Service Pre-Enrollment Line at **888-806-5042**.
2. **Notify your provider** that you are changing insurance carriers to Cigna effective January 1st, 2027.
3. **Contact the Cigna Customer Service Pre-Enrollment Line** at **888-806-5042** and a representative can help you confirm coverage. If Transition of Care is needed, you will need to submit the Transition of Care form as early as the 3rd week of December and no later than 30 days after January 1st, 2027. For more detailed information regarding Transition of Care, please refer to the [Frequently Asked Questions](#).

Prepare Your Prescriptions for the Move to Cigna

To help ensure uninterrupted access to your **short-term and maintenance medications**, we encourage you to refill eligible prescriptions, if possible, in **December 2026 before the transition** takes effect on January 1st, 2027.

Important Actions to Take Before January 1st, 2027

- **If possible, refill eligible prescriptions in December**, so you have medication on hand when coverage changes.
- **Most mail-order prescriptions that are active and valid as of January 1st, 2027, will automatically transfer from CarelonRx to Express Scripts.** However, certain medications, including controlled substances, may not be eligible for transfer and may require a new prescription from your provider. If your prescription has expired or has no remaining refills, please ask your provider to submit a new prescription to Anthem (CarelonRx) by December 15th, 2026, or to Cigna (Express Scripts) on or after January 1st, 2027.
- **Call the Cigna Customer Service Pre-Enrollment Line at 888-806-5042** if you have questions about your short-term or maintenance medications during the transition.

Important Actions to Take After January 1st, 2027

- **Show your new Cigna ID card when filling prescriptions.** This allows your pharmacy to process your prescriptions under your new Cigna coverage.
- Log in to myCigna.com or use the **myCigna app** to view and manage transferred prescriptions.
- **Confirm** your shipping, payment, and delivery preferences before your first home delivery shipment for successfully transferred maintenance medications.
- **Contact Cigna Customer Service at 800-Cigna24 (800-244-6224)** if a prescription does not appear, does not transfer, or requires additional action.

Prescription Pre-Authorizations

Any pre-authorizations approved by Anthem on or before December 31st, 2026, will be honored by Cigna.



Maintenance Medications

If you take an eligible **maintenance medication—a prescription you take regularly for an ongoing condition**—you'll have a short transition period when your 2027 coverage begins.

Maintenance medications will transfer from Anthem to Cigna whenever possible; however, some medications, including certain controlled substances, may not transfer automatically.

After January 1st, 2027, log in to [myCigna.com](https://mycigna.com) or the **myCigna app** to confirm that your medication transferred successfully.

If your maintenance medication does not appear in myCigna after January 1st, contact Cigna Customer Service.

If you choose home delivery through **Express Scripts**, you will need to verify certain information to complete the setup process.

If you previously filled your maintenance medications at CVS, simply provide your Cigna ID card the next time you pick up your medication.

With Cigna, you'll have **expanded options** for filling eligible 90-day maintenance medications:

- Home delivery through Express Scripts Pharmacy
- CVS
- Beginning January 1st, create your myCigna account to access personalized pharmacy information and explore all your available options.

Your New Prescription Home Delivery Experience

Beginning with your Cigna coverage, **Express Scripts** will serve as the home delivery pharmacy provider for eligible prescription medications.



Completing the Transition of Maintenance Medications

Although eligible maintenance medication prescriptions will transfer automatically to Cigna, beginning January 1st, 2027, you will need to log in to [myCigna.com](https://mycigna.com) or use the **myCigna app** to confirm your shipping address, payment information, and delivery preferences to complete the home delivery setup process.



Have Cigna Questions? Start Here

Moving to a new medical and prescription drug carrier can raise questions, and we're committed to providing the resources and support you need to make the transition as smooth as possible. **The Cigna Pre-Enrollment Customer Service Line** gives you access to **dedicated support before and after your 2027 coverage begins**, helping you prepare for the transition and use your plan with confidence throughout the year.

Before January 1st, 2027

Cigna can help you prepare for the transition to Cigna and understand what steps to take before coverage begins. **Contact the Cigna Customer Service Pre-Enrollment Line at 888-806-5042** for questions about:

- Whether your doctors, specialists, hospitals, or facilities are in-network
- How your medications may be covered under Cigna
- What to do if you or a covered family member has treatment continuing into 2027
- Whether a scheduled 2027 service or medication may need Cigna approval or pre-authorization

You can also use the [Cigna Health Care Provider Directory](#) to check whether your current providers are in-network before you enroll. Instructions are on the next page.

After January 1st, 2027

Once your coverage is effective, log in to [myCigna.com](https://mycigna.com), use the **myCigna app**, or contact Cigna Customer Service at **800-Cigna24 (800-244-6224)** for help finding care, understanding your benefits, estimating costs, and using your Cigna coverage information and plan-specific tools:

- View or download your Cigna ID card
- Search for in-network care through your personal account
- Confirm your existing Anthem pre-certifications or prior authorizations were successfully transitioned to Cigna or if further action is required
- Complete setting up your 90-day maintenance medications through Express Scripts, CVS, or a participating pharmacy

Get answers.
Feel confident.



Cigna will honor medical pre-certifications approved by Anthem by December 31st, 2026, until the original approval ends or for up to 90 days after your coverage begins on January 1st, 2027, whichever comes first. If your provider is not in-network, contact the Cigna Customer Service Pre-Enrollment Line at **888-806-5042** for assistance.

Steps to Confirm Your Current Providers Participate in Cigna's Network

Before 2027 Open Enrollment, you can confirm whether your doctors, specialists, hospitals, or facilities participate with Cigna.

To search online before January 1st, 2027:

- 1) Visit the [Cigna Health Care Provider Directory](#).
- 2) Enter your ZIP code or address.
- 3) Select the type of provider, doctor by name, or health facility/group practice you want to search for.
- 4) Select **Continue as Guest**.
- 5) Confirm your ZIP code.
- 6) Choose **Open Access Plus, OA Plus, Choice Fund OA Plus** under **OAP**.
- 7) Review the results for in-network providers or facilities in your area.

If your provider does not appear to be in-network, call the Cigna Customer Service Pre-Enrollment Line at **888-806-5042** to confirm network participation, receive assistance finding an in-network provider, and discuss options for managing any ongoing care needs.

Find a Doctor, Dentist, or Facility in

Denville, NJ 07834



Doctor by Type



Doctor by Name



Health Facilities
and Group
Practices

HMO

Cigna Healthcare of New Jersey - Northern NJ HMO

Network, Network POS

Seamless - Metro New York

LocalPlus

LocalPlus

LocalPlus One

OAP

Clarity

OAP NJ Network

Open Access Plus, OA plus, Choice Fund OA Plus

PPO

PPO, Choice Fund PPO

Managing Your Spending Accounts During the Move to Fidelity

Health Savings Account (HSA)

Beginning January 1st, 2027, if you remain in or elect the Consumer Select or Consumer Value PPO, any new contributions from you or the company will go to your new HSA through Fidelity. **If you have an HSA balance with Anthem today, you get to decide** whether to leave your current balance with Anthem or move it to Fidelity. Otsuka is offering you the opportunity to transfer your balance from Anthem and will reimburse the transfer fee, as well as any monthly account fees, if you complete the transfer by **March 31st, 2027**.

Consolidating your HSA funds with Fidelity may make it easier to manage your health savings in one place.

Choice 1: Leave Your Current HSA Balance with Anthem

- Your current HSA balance will remain with Anthem and **transition to an individual retail account**.
- A **monthly maintenance fee of \$4.95** will apply for balances under \$5,000.
- **If you wish to keep your Anthem HSA**, no action is required. **If you have invested HSA funds**, your investments will transition to a retail account.
- **Beginning January 1st**, all new HSA contributions will be deposited into your Fidelity HSA.

Choice 2: Move Your Current HSA Balance to Fidelity

- You may choose to **transfer your current Anthem HSA balance to Fidelity** and keep all of your HSA assets in one place.
- **Otsuka will reimburse eligible transfer fees and accrued monthly account fees with Anthem** if you transfer your funds by **March 31st, 2027**.
- **You may transfer your balance to Fidelity at any time**. However, if you complete the transfer **after March 31st, 2027, you will be responsible** for any applicable transfer fees and monthly maintenance fees.
- If your HSA funds are invested, **you must first** liquidate all investments, transfer the proceeds back to your HSA cash account, and close your investment account. Once completed, you may transfer your HSA balance to Fidelity. **Detailed transfer instructions will be available after January 1st**.

Your Anthem HSA Card & Reimbursements after January 1st

Your current Anthem HSA Spending Account Card will be **deactivated on January 1st, 2027**, regardless of whether you transfer your balance to Fidelity or keep your account with Anthem.

If you choose to remain with Anthem, your HSA will automatically be converted to a retail account, and you will receive a **new HSA card** once the conversion is complete.

If you need to use your account funds before your new card arrives, you can submit eligible expenses through the Sydney Health app or online at [anthem.com](https://www.anthem.com) and receive payment directly from your account.

Your savings, easier to manage with Fidelity.

Activating Your New Fidelity HSA Account

- Beginning January 1st, 2027, if you elected the Consumer Select or Consumer Value PPO, log in to your existing Fidelity account at netbenefits.com.
- Select **Spending Accounts**.
- From there, click **Open** to begin the HSA activation process.
- The pages that follow will walk you through the steps required to complete the online HSA application and open your account.

Your New Fidelity Spending Account Cards

You will receive a **separate card** for your spending accounts (Health Care, Dependent Care, and/or Health Savings Account) and one for your commuter benefit account.

Navigating Your 2026 & 2027 Flexible Spending Account (FSA) Funds

Here's how to navigate having both Anthem and Fidelity FSA balances during the transition:

- 1) Use your remaining 2026 Anthem FSA funds through March 15th, 2027** for eligible 2026 FSA expenses while 2026 funds remain available. **Any eligible expenses you do not submit for through Anthem by March 31st, 2027 will be forfeited.**
- 2) Start using your Fidelity FSA funds for 2027 expenses** once your 2026 FSA funds are depleted.
- 3) Activate your Fidelity debit card starting January 1st, 2027** so it is ready when you need it for eligible 2027 expenses.
- 4) Use your separate Fidelity commuter card**, if you participate, for eligible 2027 commuter expenses.

Please note that **your Anthem debit cards will be deactivated effective January 1st, 2027**. To submit claims after that date, please use the Sydney Health app or visit anthem.com to submit your claims for reimbursement online.



Commuter Benefits

Beginning in 2027, your commuter benefits will be **administered by Fidelity**. Through Workday, you may elect either transit or parking benefits, **but not both**.

- If you enroll**, Fidelity will issue a commuter benefits debit card that can be used to pay for eligible expenses. When you use the card with participating commuter vendors, **no receipt submission** is required.
- If your vendor is not a participating merchant**, Fidelity will notify you if documentation is needed.
- If you choose not to use the Fidelity commuter benefits debit card**, you may pay for eligible transit or parking expenses with a personal payment method and submit your expenses for reimbursement through netbenefits.com.

Deadline to Submit Eligible 2026 Commuter Benefit Expenses

The **standard run-out period** will continue to apply for 2026 expenses, and you will have until **March 31st, 2027**, to submit for reimbursement through the Sydney Health app or by visiting anthem.com.

Boost Your Retirement Savings with Your Bonus

Beginning January 1st, 2027, you will be able to contribute **all or a portion of your eligible bonus to your 401(k)**, giving you another opportunity to increase your retirement savings and help maximize your long-term financial goals.

Important: Your current paycheck deferral election **will not automatically apply** to eligible bonus pay. If you want to contribute part of your bonus(es) paid out in 2027—or any future eligible bonus—to the Otsuka America 401(k) Savings Plan, **you'll need to make a separate bonus deferral election at Fidelity on netbenefits.com.**

Five Things You Need to Know

- 1) Bonus elections are separate from base salary deferral elections that are deducted from your paycheck.
- 2) Bonus contributions count toward annual IRS limits.
- 3) You may elect pretax, Roth, after-tax, or any combination.
- 4) If you choose to defer a portion of your bonus into your 401(k), the company match will not be included with your 2027 bonus payment(s). Any eligible matching contribution will be provided through the annual true-up process in Q1 2028.
- 5) The employer match opportunity remains **unchanged**. Otsuka will continue to provide an employer match of up to 10% of your eligible **base earnings**.

A new way to save
for retirement.



How Does the Employer Match Work for Bonus Deferrals?

When you defer all or a portion of your bonus into the 401(k) plan, those contributions count toward your annual retirement savings limits and company match eligibility.

Bonus Deferral Match: Unlike regular deferrals that are matched each pay period, employer match for 2027 bonus deferrals will be calculated and credited during the annual true-up process in Q1 2028.

Defer Your 2027 Bonus Starting January 1st, 2027

Choose How Much of Your Bonus to Save	How to Make Your Bonus Election
• Before your bonus is paid, think about how much you want to contribute to your 401(k) and how much you want to receive in cash. • You can direct your eligible bonus to one or more of these contribution types: – Pretax – Roth – After-tax • Remember that your bonus election counts toward annual 401(k) contribution limits, along with contributions from your regular paycheck.	1) Log in to NetBenefits or call Fidelity at 800-835-5097 between 8:30 a.m. and 8:30 p.m. ET. 2) Choose the separate bonus deferral election. 3) Enter the percentage you want to contribute to pretax, Roth, and/or after-tax. 4) To defer all or a portion of your bonus, elections must be submitted at least 30 days before your bonus pay date. 5) Review your regular paycheck deferral election if you want to make changes to ongoing paycheck contributions.

Set It Once, Update It Anytime

Your bonus deferral election **remains in effect** for future bonus payments. If you'd like to update or stop your deferral, simply make changes in [NetBenefits](#) at least 30 days **before** your next bonus.



Your 2027 Action Plan

The transition to 2027 benefits includes several important steps. This checklist brings them together in one place so you know what to do through the whole process.

Before Open Enrollment Ends

- ☐ Visit the [2027 Open Enrollment Resource Center](#) on the Benefits Portal for transition resources and updates.
- ☐ Review the [Frequently Asked Questions](#) on the Benefits Portal.
- ☐ Check whether your current providers are in Cigna's network using the [provider directory](#) or by calling the Cigna Customer Service Pre-Enrollment Line at **888-806-5042**.
- ☐ Call the Cigna Customer Service Pre-Enrollment Line if you have questions about providers, prescription drug coverage, plan coverage details, pre-authorization, or ongoing care needs.
- ☐ Complete your 2027 Open Enrollment Event in Workday by November 6th.

Before January 1st, 2027

- ☐ Tell your providers your coverage is moving to Cigna effective January 1st, 2027 and provide your updated Cigna information once you receive your ID card.
- ☐ Prepare your prescriptions by refilling eligible medications in December to ensure you have enough medication during the transition period.
- ☐ If you have questions about Transition of Care for ongoing care needs, contact the Cigna Customer Service Pre-Enrollment Line at **888-806-5042**. In addition, please review the [Frequently Asked Questions](#) for important information and any steps that may need to be completed in December.

Beginning January 1st, 2027

- ☐ Visit [myCigna.com](#) or use the **myCigna app** and register to:
 - Access ID cards, find care, review benefits, manage claims, and check prescriptions.
 - Verify your maintenance medication information and review the status of any existing prior authorizations.
- ☐ Show your new Cigna ID card when visiting providers or filling prescriptions.
- ☐ Follow up on ongoing care, approvals, prescriptions, or Transition of Care needs if anything needs to continue into 2027.
- ☐ Activate your Fidelity spending account and/or commuter benefit cards when they arrive.
- ☐ Submit for remaining 2026 Anthem FSA funds before March 31st, 2027. Don't forget that your Anthem cards will be deactivated effective January 1st, so you will need to submit claims manually via the **Sydney Health app** or [anthem.com](#).
- ☐ If you decide to move your Anthem HSA balance to Fidelity, do so by March 31st, 2027, to receive reimbursement for any transfer and monthly maintenance fees.
- ☐ Make a separate bonus deferral election 30 days prior to your bonus payout date through Fidelity [NetBenefits](#).

Want a handy, printable resource to keep track of your action items?

Download a printable [2027 Transition Checklist](#)

Feel prepared for what's changing.

Enrollment & Eligibility

It's time to take action! Open Enrollment happens only once a year.

You will receive an email with a link to enroll in your benefits in Workday. The elections you make during Open Enrollment are **effective January 1st through December 31st, 2027**.

If you do not enroll by the **November 6th deadline**, you will remain in your current benefits, with the exception of Flexible Spending Accounts and the Health Savings Account, both of which require re-enrollment.

Please note that with the transition from Anthem to Cigna, no action is required if you wish to keep your current plan option. If you do not make an active election, you and your covered dependents will be automatically **defaulted into the corresponding Cigna plan** that aligns with your current Anthem plan.

You are encouraged to review all of your benefits to ensure that your coverage meets your and your family's needs.



Who Can I Cover?

All plans have the same dependent eligibility rules. You can cover certain dependents under medical, dental, vision, and other coverage. Eligible dependents include your:

- Spouse or domestic partner*
- Children/domestic partner's children, up to the end of the month of their 26th birthday, with the exception of individuals with disabilities

The amount you pay for medical, dental, vision, and other coverage will be based on the option(s) you elect and who you choose to cover.

*Spouses/domestic partners added during Open Enrollment must be verified for coverage.

**Open Enrollment is October 26th
through November 6th, 2026**

How to Enroll in Your Otsuka Benefits

Enroll using these simple steps:

- 1** Log in to [Workday](#) to access your enrollment. If signing into Workday manually, use your Otsuka network username and password.
- 2** Click on the **Benefits Enrollment** task in your Workday Inbox.
- 3** Follow the step-by-step process to **enroll from October 26th through November 6th**.
- 4** **Print or save a copy of your election summary.**

Be prepared: To add dependents to your coverage, you will need your dependents' information, including dates of birth and Social Security numbers.

< Contact the Otsuka AVA Contact Center at **877-4-OTSUKA** (877-468-7852) if you have questions.



Medical Plan Evaluator

Easily evaluate which medical plan is right for you and your family. Simply answer a few questions and you'll be offered a suggestion and can view how other employees (like you) choose their medical plan.



Considerations as You Enroll

- ✓ **Verify that your personal information is up to date**, including your primary mailing address, mobile phone number, marital status, and emergency contacts.
- ✓ **Add or remove dependents** and confirm their Social Security numbers, dates of birth, and mailing addresses.
- ✓ **Take time to review your life insurance needs and your current beneficiary assignments.**
 - You'll have the opportunity to enroll in, increase, or decrease your optional life insurance coverages.
- ✓ **Visit the [2027 Open Enrollment Resource Center](#) on the Benefits Portal to:**
 - Use the [Medical Plan Evaluator](#) tool to help you decide which medical plan best fits your needs.
 - **Learn more** about 2027 changes and view the Open Enrollment Webinar and/or Office Hours dates and times.
 - [Find detailed FAQs](#) about Cigna medical and prescription drug coverage and Fidelity HSA, FSA, and commuter benefits.
- ✓ **Elect Health Savings Account (HSA) or Flexible Spending Account (FSA) contribution amounts for 2027.**

Note: HSA and FSA contributions must be re-elected each year.



> Medical

- > Prescription Drugs
- > Dental & Vision
- > Plan Rates
- > Life Coverages
- > Spending Accounts
- > Other Choices
- > 401(k) Plan

Your Benefits Decisions

Get to Know Your Medical Plan Options

Prepare for Open Enrollment by understanding your medical plan options to make the best benefits decisions for you and your family.

Otsuka offers four Preferred Provider Organization (PPO) plans through **Cigna**, divided into two categories: **Traditional PPOs** and **Consumer Directed PPOs**. Below are some plan highlights of how they compare for in-network services.

See the full Cigna Plan Comparison Chart on **pages 25-26** to get more details on how each plan would work for you.

	Premier PPO	Choice PPO	Consumer Select PPO	Consumer Value PPO
Annual well-being visit and preventive care	Covered 100%	Covered 100%	Covered 100%	Covered 100%
Health Savings Account (HSA) included	No	No	Yes, and Otsuka contributes: • \$1,200/individual • \$2,400/family	Yes, and Otsuka contributes: • \$500/individual • \$1,000/family
Per-paycheck rates	\$\$\$\$	\$\$\$	\$\$	\$
What you pay for in-network services	• Copays for office visits, ER visits, and prescriptions • 100% of costs for other services until you meet the annual deductible • 10% after meeting your deductible	• Copays for office visits and prescriptions • 100% of costs for other services until you meet the annual deductible • 10% after meeting your deductible	• 100% of costs for most services and prescriptions until you meet the annual deductible • 10% after meeting your deductible	• 100% of costs for most services and prescriptions until you meet the annual deductible • 20% after meeting your deductible
In-network deductible	• \$200/individual • \$600/family	• \$500/individual • \$1,500/family	• \$1,750/individual • \$3,500/family	• \$3,000/individual • \$6,000/family
The most you pay out of pocket for in-network services*	• \$1,500/individual • \$4,500/family	• \$1,500/individual • \$4,500/family	• \$2,700/individual • \$5,400/family	• \$4,000/individual • \$8,000/family

***Family Coverage Out-of-Pocket Maximum (OOPM):**
Each family member has an individual OOPM within the family OOPM. Once a member reaches their individual OOPM, the plan covers 100% of their eligible expenses—even if the family OOPM hasn't been met.

> **Medical**

- > Prescription Drugs
- > Dental & Vision
- > Plan Rates
- > Life Coverages
- > Spending Accounts
- > Other Choices
- > 401(k) Plan

Questions to Help You Decide

Consider these questions about you and your dependents who will be covered in 2027.

- **Will your healthcare needs increase, remain the same, or decrease compared to this year?** Consider chronic conditions, prescriptions, and any planned procedures. A more expensive plan may be too much coverage—and a less expensive plan may not be enough.
- **Can you afford higher out-of-pocket costs if unexpected medical needs occur?** Determine whether a less expensive plan with lower paycheck contributions is a good fit, considering the potential for higher deductibles and out-of-pocket costs. Consider your ability to pay for these costs using HSA contributions from you and Otsuka if enrolled in a consumer-directed health plan.
- **Are you interested in using an HSA to save tax-free for current and future healthcare expenses?** Remember, the funds contributed by you and Otsuka are yours to keep, even if you retire or leave the company.

Important Terms to Know

Copay: A set amount you pay for certain medical services (e.g., \$20 for a doctor visit).

Deductible: The amount you must pay out of pocket before your insurance starts paying for medical services.

Coinsurance: Once you meet the deductible, you'll pay a percentage of medical costs (e.g., 10% of the cost of a doctor visit), and your medical plan covers the rest.

Out-of-Pocket Maximum: This is the most you'll pay in a year for covered services, including copays, deductible, and coinsurance. After you meet this amount, your medical plan pays 100% for the rest of the year.

In-Network Providers: These providers have negotiated prices with Cigna to provide services at a discounted price.

Take the Guesswork Out of Choosing a Medical Plan

The **Medical Plan Evaluator** will ask you questions and provide a suggestion for the best plan for you in 2027 based on your answers.

Reminder: The **out-of-pocket maximum** is the most you'll pay for covered medical expenses during the plan year. Once you reach this limit, the plan pays 100% of eligible costs for the rest of the year.

Comparing Medical Plan Costs in Real Life

To help you choose a medical plan, the fictional examples below show how the same healthcare needs could play out under each option—including what was billed for care and how much the person paid out of pocket under each plan.

Scenario 1: Employee-Only Coverage with Moderate Healthcare Needs

Estimated Total Annual Cost Per Plan

Premier PPO Out-of-pocket costs: \$845 Annual payroll deductions: \$3,199 Estimated total annual cost: \$4,044	Choice PPO Out-of-pocket costs: \$1,060 Annual payroll deductions: \$1,790 Estimated total annual cost: \$2,850
Consumer Select PPO Out-of-pocket costs: \$2,120 Annual payroll deductions: \$1,531 Otsuka HSA contribution: -\$1,200 Estimated total annual cost: \$2,451	Consumer Value PPO Out-of-pocket costs: \$3,370 Annual payroll deductions: \$997 Otsuka HSA contribution: -\$500 Estimated total annual cost: \$3,867

Why Costs Differ by Plan

- All plans are subject to deductible, out-of-pocket maximum, and coinsurance amounts.
- Under the Premier PPO and Choice PPO Plans, some services are covered by copays.
- The Consumer Select PPO and Consumer Value PPO Plans include an HSA contribution from Otsuka that can help offset eligible out-of-pocket costs.

Refer to the Medical Plan Comparison chart on [pages 25-26](#) and the Prescription Drug Benefits chart on [page 28](#) for full details.

Care Received and Amount Billed	Premier PPO	Choice PPO	Consumer Select PPO	Consumer Value PPO
What Your Doctor or Hospital Bills for Care	What You Pay			
Preventive care visit: \$150	\$0	\$0	\$0	\$0
Primary care visit: \$150	\$15	\$20	\$150	\$150
Specialist visit: \$200	\$30	\$40	\$200	\$200
Emergency room visit: \$2,000	\$300	\$650	\$1,460	\$2,000
MRI: \$1,300	\$310	\$130	\$130	\$780
Three physical therapy visits: \$600	\$90	\$120	\$60	\$120
Six generic (Tier 1) retail prescriptions: \$120	\$60	\$60	\$60	\$60
Two preferred brand (Tier 2) retail prescriptions: \$500	\$40	\$40	\$60	\$60
Out-of-Pocket Costs	\$845	\$1,060	\$2,120	\$3,370

Look at the Full Cost Picture

Out-of-pocket costs are only one part of choosing a medical plan. **Compare the estimated total annual cost**, which includes what you pay from your paycheck, what you may pay when you receive care, and any Otsuka HSA contribution.

> Medical

- > Prescription Drugs
- > Dental & Vision
- > Plan Rates
- > Life Coverages
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Scenario 2: Employee + Family Coverage with a Higher-Cost Healthcare Year

Estimated Total Annual Cost Per Plan

Premier PPO Out-of-pocket costs: \$4,500 Annual payroll deductions: \$10,280 Estimated total annual cost: \$14,780	Choice PPO Out-of-pocket costs: \$4,500 Annual payroll deductions: \$5,737 Estimated total annual cost: \$10,237
Consumer Select PPO Out-of-pocket costs: \$5,400 Annual payroll deductions: \$4,450 Otsuka HSA contribution: -\$2,400 Estimated total annual cost: \$7,450	Consumer Value PPO Out-of-pocket costs: \$8,000 Annual payroll deductions: \$2,937 Otsuka HSA contribution: -\$1,000 Estimated total annual cost: \$9,937

Why Costs Differ by Plan

- All plans are subject to deductible, out-of-pocket maximum, and coinsurance amounts.
- Under the Premier PPO and Choice PPO Plans, some services are covered by copays.
- The Consumer Select PPO and Consumer Value PPO Plans include an HSA contribution from Otsuka that can help offset eligible out-of-pocket costs.

Refer to the Medical Plan Comparison chart on [pages 25-26](#) and the Prescription Drug Benefits chart on [page 28](#) for full details.

Care Received and Amount Billed	Premier PPO	Choice PPO	Consumer Select PPO	Consumer Value PPO
What Your Doctor or Hospital Bills for Care	What You Pay			
Preventive care visit: \$150	\$0	\$0	\$0	\$0
Colonoscopy screening: \$3,850	\$0	\$0	\$0	\$0
Two emergency room visits: \$4,000	\$600	\$1,750	\$3,550	\$4,000
Two-day inpatient hospital stay: \$10,000	\$1,540	\$1,000	\$1,000	\$3,600
Inpatient surgery: \$25,000	\$2,360	\$1,750	\$850	\$400
Six generic (Tier 1) retail prescriptions: \$120	\$0	\$0	\$0	\$0
Two preferred brand (Tier 2) retail prescriptions: \$1,500	\$0	\$0	\$0	\$0
Out-of-Pocket Costs	\$4,500	\$4,500	\$5,400	\$8,000

Reminder: These examples are for educational purposes only. They do not predict your actual costs or recommend a specific plan. Your costs will depend on the care you receive, the providers you use, the prescriptions you take, the coverage level you elect, and your tax-free contributions to an HSA, if eligible.

Look at the Full Cost Picture

Out-of-pocket costs are only one part of choosing a medical plan. **Compare the estimated total annual cost**, which includes what you pay from your paycheck, what you may pay when you receive care, and any Otsuka HSA contribution.

> Medical

- > Prescription Drugs
- > Dental & Vision
- > Plan Rates
- > Life Coverages
- > Spending Accounts
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The Health Savings Account (HSA): An Investment in Your Long-Term Well-Being

Enrollment in the **Consumer Select PPO** or **Consumer Value PPO** includes access to an HSA, which can help you cover costs today and build healthcare savings for tomorrow.

5 Ways the HSA Works for You

SAVE IT



You and Otsuka contribute pretax dollars (up to the IRS annual maximum) that you can use for eligible healthcare expenses now or later.

GROW IT



Your balance earns tax-free interest, and once it reaches \$1,000, you can invest additional funds.

MANAGE IT



Track your contributions, spending, and balance throughout the year.

USE IT



Pay with your HSA debit card or reimburse yourself later for eligible healthcare expenses.

KEEP IT



Your HSA is yours to keep, even if you leave Otsuka.

How the HSA Works in Real Life

Let's say you enroll in the **Consumer Select PPO** with employee-only coverage and contribute **\$200** pretax from your paycheck each month.

January: Your HSA starts with Otsuka's first contribution of **\$600**.



July: Otsuka adds a second contribution of **\$600**.



August: After accruing **\$1,800** in eligible medical expenses during the first half of the year, **you have met your deductible**.



September: Your HSA balance is **\$3,000—enough to cover your deductible plus more!** You can either pay with your HSA funds or get reimbursed later.

2027 Contribution Limits

	Consumer Select PPO		Consumer Value PPO	
	Employee-Only	Family	Employee-Only	Family
IRS limit:	\$4,500	\$9,000	\$4,500	\$9,000
Otsuka contributes:*	\$1,200	\$2,400	\$500	\$1,000
You can contribute up to:	\$3,300	\$6,600	\$4,000	\$8,000
Your maximum contribution if age 55 or older:**	\$4,500	\$9,000	\$5,000	\$9,000

*Otsuka annual contributions are made in two installments, one in January and another in July.

**If you will be age 55 or older in 2027, you may contribute an additional \$1,000 in catch-up contributions.

Invest Your HSA

Once your balance reaches \$1,000, you can invest your funds for future healthcare expenses.

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Medical Plan Comparison

	Premier PPO		Choice PPO		Consumer Select PPO with HSA		Consumer Value PPO with HSA	
	In-Network	Out-of-Network*	In-Network	Out-of-Network*	In-Network	Out-of-Network*	In-Network	Out-of-Network*
Annual Deductible (What You Pay)								
Employee only	\$200	\$2,000	\$500	\$2,000	\$1,750	\$1,750	\$3,000	\$3,000
Family	\$600	\$6,000	\$1,500	\$6,000	\$3,500	\$3,500	\$6,000	\$6,000
Health Savings Account Contribution from Otsuka								
Employee only	N/A	N/A	N/A	N/A	\$1,200	\$1,200	\$500	\$500
Family	N/A	N/A	N/A	N/A	\$2,400	\$2,400	\$1,000	\$1,000
Annual Out-of-Pocket Maximum** (The most you will pay in 2027)								
Employee only	\$1,500	\$5,000	\$1,500	\$5,000	\$2,700	\$5,400	\$4,000	\$8,000
Family	\$4,500	\$15,000	\$4,500	\$15,000	\$5,400	\$10,800	\$8,000	\$16,000
Hospital and Other Facility Expenses (What You Pay)								
Inpatient***	10% after deductible	30% (10% MH/SA) after deductible	10% after deductible	30% (10% MH/SA) after deductible	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Outpatient***	10% after deductible	30% (10% MH/SA) after deductible	10% after deductible	30% (10% MH/SA) after deductible	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Emergency room	\$300 copay	\$300 copay	10% after deductible	10% after deductible	10% after deductible	10% after deductible	20% after deductible	20% after deductible

Family Coverage Out-of-Pocket Maximum (OOPM): Each family member has an individual OOPM within the family OOPM. Once a member reaches their individual OOPM, the plan covers 100% of their eligible expenses—even if the family OOPM hasn't been met.

*The cost of services received from out-of-network providers may be subject to balance billing.

**Copays and out-of-pocket costs paid toward meeting the annual deductible will be applied to your annual out-of-pocket maximum.

***Mental health (MH) and substance abuse (SA) services performed out-of-network are covered at higher reimbursement levels.

> Medical

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Medical Plan Comparison (continued)

	Premier PPO		Choice PPO		Consumer Select PPO with HSA		Consumer Value PPO with HSA	
	In-Network	Out-of-Network*	In-Network	Out-of-Network*	In-Network	Out-of-Network*	In-Network	Out-of-Network*
Professional Expenses (What You Pay)								
Telehealth visits	\$0	N/A	\$0	N/A	\$0	N/A	\$0	N/A
Maternity office visits and delivery	\$30 copay	30% after deductible	10% after deductible	30% after deductible	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Office visits (PCP)	\$15 copay	30% after deductible	\$20 copay	30% after deductible	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Office visits (specialist)	\$30 copay (\$15 copay MH/SA)	30% (10% MH/SA) after deductible	\$40 copay (\$20 copay MH/SA)	30% (10% MH/SA) after deductible	10% after deductible	30% (10% MH/SA) after deductible	20% after deductible	40% (20% MH/SA) after deductible
Physical, speech, and occupational therapy	\$30 copay	30% after deductible	\$40 copay	30% after deductible	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Surgery (inpatient and outpatient)	10% after deductible	30% after deductible	10% after deductible	30% after deductible	10% after deductible	30% after deductible	20% after deductible	40% after deductible
Other Eligible Expenses (What You Pay)								
Lab, X-rays, and diagnostic tests (outside the doctor's office)	10% after deductible	30% after deductible	10% after deductible	30% after deductible	10% after deductible	30% after deductible	20% after deductible	40% after deductible

*The cost of services received from out-of-network providers may be subject to balance billing.

**Copays and out-of-pocket costs paid toward meeting the annual deductible will be applied to your annual out-of-pocket maximum.

Cigna Prescription Drug Benefits

All four Cigna medical plans include prescription drug coverage, also administered by Cigna.

How Much You Pay for Prescription Drugs

Prescription drugs are grouped into three tiers, based on a drug's effectiveness and affordability.

PHARMACY

\$ Tier 1	\$\$ Tier 2	\$\$\$ Tier 3
• The most cost-effective choice among the three tiers. • Typically are generic drugs, which have the same active ingredients and effectiveness as their brand-name equivalents and meet FDA standards for safety and quality.	• Priced higher than Tier 1. • May be preferred brand drugs, based on how they work and how much they cost compared to other drugs used to treat the same conditions. • May also be generic drugs if those drugs are new to the pharmaceutical market.	• Highest cost of all three tiers. • Often include non-preferred brand and generic drugs. • May include drugs that were recently approved by the FDA, or specialty drugs used to treat a serious, long-term health condition.

As an Otsuka employee you pay \$0 for any Otsuka US-branded drug. See next page for details.



- > Medical
- > **Prescription Drugs**
- > Dental & Vision
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Premier PPO & Choice PPO Plans (What You Pay)

	Retail (Up to 30 Days)	Mail Order (31–90 Days)
Tier 1	\$10 copay	\$20 copay
Tier 2	\$20 copay	\$40 copay
Tier 3	\$35 copay	\$70 copay

Consumer Select PPO & Consumer Value PPO Plans (What You Pay)

	Retail (Up to 30 Days)	Mail Order (31–90 Days)
Tier 1	\$10 copay after deductible	\$20 copay after deductible
Tier 2	\$30 copay after deductible	\$60 copay after deductible
Tier 3	\$50 copay after deductible	\$100 copay after deductible

Important: Maintenance Medications

If you take maintenance medications (drugs taken for ongoing conditions such as high blood pressure or high cholesterol), you must order a 90-day supply through an approved Cigna fulfillment option. You can choose the option that works best for you: home delivery through Express Scripts, CVS, or another participating pharmacy in the selected network.

To get started after January 1st, use the **myCigna app**, visit [myCigna.com](https://www.mycigna.com), or call **800-Cigna24 (800-244-6224)**.



Pay \$0 for Otsuka Prescription Drugs

As an Otsuka employee, you pay \$0—no copay, no deductible, no coinsurance—for any Otsuka US-branded drug if you are covered under the **Premier PPO** or the **Choice PPO**. If you are covered under the **Consumer Value PPO** or **Consumer Select PPO**, you pay \$0 after meeting the plan's annual deductible. Review the 2027 Otsuka Custom Prescription Drug list below to see where you can save.

Otsuka Group Branded Drugs					Otsuka Collaborations
Abilify Asimtufii	Abilify Maintena	Abilify MyCite	Abilify Tablets	IV Busulfex	Balversa
Dacogen	Inqovi	Jynarque	Lonsurf	Nuedexta	Kisqali
Rexulti	Samsca	Rejoyn	Simtriyo	Voyxact	Kisqali & Femara

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Dental & Vision Insurance

Delta Dental Plan

Getting routine cleanings and exams is an important part of staying healthy. Dental coverage is provided through **Delta Dental** and includes access to in-network and out-of-network providers. You will pay the least when you use a provider in Delta Dental's PPO Core Plus network and slightly more when you see Delta Dental Premier network providers.

But you will always pay the most when you see out-of-network providers.

The dental plan covers preventive care and other general dental expenses. Register for your account via [Delta Dental's website](#). You can also download the Delta Dental app on the [App Store](#) or [Google Play](#).



Plan Provision	How It Works
Annual deductible	You pay \$25 per person; \$75 per family
Preventive and diagnostic	100% covered; no deductible for in-network services
Basic restorations, endodontics, periodontics	100% covered after annual deductible
Crowns, dentures, and bridgework	You pay 30% after annual deductible
Maximum benefit	\$3,000 per covered person per calendar year
Orthodontia (children and adults)	You pay 30% after separate \$50 annual deductible; \$3,000 per covered person maximum lifetime benefit

Extra Dental Support for Women's Health

Delta Dental's Next Stage™ Women's Health program provides enhanced dental benefits for those who are pregnant or experiencing menopause, including extra exams, cleanings, bitewing X-rays, fluoride treatments, and periodontal services.

Register through your Delta Dental online account to confirm your eligibility and provide your physician's contact information.

VSP Vision Plan

Otsuka's vision coverage is offered through VSP. VSP delivers convenience and flexibility, with access to **36,000 vision care providers** nationwide, including locations like Visionworks, Pearle Vision, AccuVision, Walmart, and Costco.

You have **two** coverage options:

- **VSP Vision Core:** A lower-cost vision plan with higher copays and lower allowances for vision correction services and materials.
- **VSP Vision Enhanced:** A higher-cost vision plan with richer benefits, including lower copays and higher allowances for vision correction services and materials.

Your vision coverage includes annual eye exams, eyeglass frames and lenses, and contact lenses. While you have the flexibility to choose between in-network or out-of-network providers, opting for out-of-network providers typically results in higher costs. To find an in-network provider near you, call VSP at **800-877-7195**, visit vsp.com, or download their free app in the [App Store](#) or [Google Play](#).



VSP Vision Plan

	VSP Vision Core		VSP Vision Enhanced	
Frequencies				
Exam	Once per calendar year		Once per calendar year	
Lenses/Contacts	Once per calendar year		Once per calendar year	
Frames	Once every two calendar years		Once per calendar year	
Service	In-Network (What You Pay)	Out-of-Network (What You Pay)	In-Network (What You Pay)	Out-of-Network (What You Pay)
Exam	\$10 copay	\$40 copay	\$10 copay	\$40 copay
Contact Lens Exam	\$40 copay	N/A	\$40 copay	N/A
Essential Medical Eye Care	\$20 copay	N/A	\$20 copay	N/A
Retinal Screening	\$39 copay	N/A	\$39 copay	N/A
Frames				
Retail Frame Allowance	100% after plan pays up to \$210	100% after plan pays up to \$80	100% after plan pays up to \$180	100% after plan pays up to \$80
Featured Frame Brand Allowance	100% after plan pays up to \$230	100% after plan pays up to \$80	100% after plan pays up to \$200	100% after plan pays up to \$80
Costco Equivalent Frame	100% after plan pays up to \$115	100% after plan pays up to \$80	100% after plan pays up to \$100	100% after plan pays up to \$80
Lenses				
Single	\$20 copay	100% after plan pays up to \$40	\$20 copay	100% after plan pays up to \$40
Bifocal	\$20 copay	100% after plan pays up to \$60	\$20 copay	100% after plan pays up to \$60
Trifocal	\$20 copay	100% after plan pays up to \$80	\$20 copay	100% after plan pays up to \$80
Lenticular	\$20 copay	N/A	\$20 copay	N/A
Contact Lenses				
Elective	100% after plan pays up to \$150	100% after plan pays up to \$110	100% after plan pays up to \$150	100% after plan pays up to \$110
Additional Benefits				
Additional Frames & Allowances	N/A		Your choice of one of the following once per calendar year : • Additional \$100 allowance for frames or contacts; OR • Progressive lenses covered in full; OR • Anti-Reflective coating covered in full; OR • Photochromic lenses covered in full Note: The additional allowance can be used differently by each person covered (e.g., one person can use it toward frames, one can use it toward lenses, etc.)	

- > Medical
- > Prescription Drugs
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Plan Rates

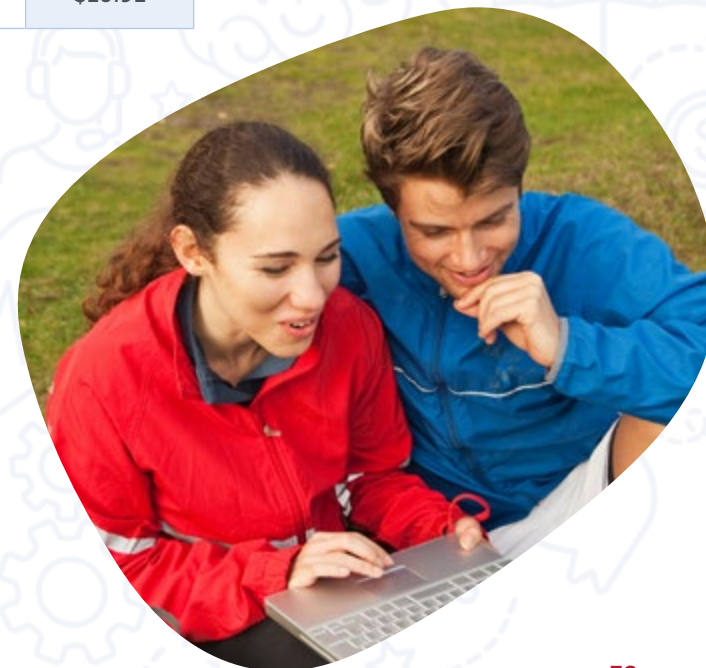
Your per-paycheck cost for the medical, dental, and vision plans depends on the plan you choose, and the coverage tier you elect, including the number of dependents you choose to cover. Your costs are deducted automatically from your paycheck each pay period.

2027 Employee Rates (Semi-Monthly, Per Pay Period, Pretax)

Rates	Premier PPO	Choice PPO	Consumer Select PPO	Consumer Value PPO	Dental	VSP Vision Core	VSP Vision Enhanced
Employee	\$133.31	\$74.58	\$63.79	\$41.55	\$7.20	\$0.48	\$3.20
Employee + Spouse	\$285.76	\$161.07	\$133.39	\$87.05	\$14.97	\$0.96	\$6.40
Employee + Child(ren)	\$258.87	\$145.40	\$121.74	\$79.07	\$16.55	\$1.03	\$6.85
Employee + Family	\$428.34	\$239.05	\$185.42	\$122.36	\$24.67	\$1.64	\$10.91

Did You Know?

On average, Otsuka contributes 84% of the total cost of healthcare coverage.



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Tax Impacts for Domestic Partners

Otsuka extends health coverage to the domestic partners of employees and the dependent children of those domestic partners.

Unlike benefits for a spouse, health benefits for domestic partners are taxable, per IRS regulations. Please note that if you are covering your domestic partner and/or their children, your tax burden may be higher. This taxable portion of your rates is called imputed income. It is shown in the table below.

2027 Domestic Partner Rates and Imputed Income (Semi-Monthly, Per Pay Period)

Rates	Premier PPO	Choice PPO	Consumer Select PPO	Consumer Value PPO	Dental	VSP Vision Core	VSP Vision Enhanced
Employee + Domestic Partner							
Employee rate	\$285.76	\$161.07	\$133.39	\$87.05	\$14.97	\$0.96	\$6.40
Imputed income	\$932.27	\$1,026.42	\$1,004.99	\$970.83	\$48.07	\$5.58	\$4.75
Employee + Employee's Child(ren) + Domestic Partner							
Employee rate	\$428.34	\$239.05	\$185.42	\$122.36	\$24.67	\$1.64	\$10.91
Imputed income	\$898.23	\$1,012.07	\$1,016.71	\$975.22	\$47.38	\$7.18	\$6.10
Employee + Domestic Partner + Domestic Partner's Child(ren) + Employee's Child(ren)							
Employee rate	\$428.34	\$239.05	\$185.42	\$122.36	\$24.67	\$1.64	\$10.91
Imputed income	\$1,659.32	\$1,851.77	\$1,836.96	\$1,768.97	\$106.43	\$13.56	\$11.51

HMSA Hawaii PPO Medical Plan

Otsuka employees residing in Hawaii have access to the following benefits.

You can find more details on your benefits by accessing HMSA's website at hmsa.com or by calling HMSA's customer service team at **808-948-6111** (Oahu) or **800-776-4672** (neighboring islands).

HMSA Hawaii PPO Medical Plan (What You Pay)		
Annual Deductible	In-Network	Out-of-Network
Employee only	\$0	\$100
Family	\$0	\$300
Annual Out-of-Pocket Maximum*		
Employee only	\$2,500	\$2,500 (+ \$3,600 for Rx only)
Family	\$7,500	\$7,500 (+ \$4,200 for Rx only)
Hospital and Other Facility Visits (What You Pay)		
Inpatient	10% after deductible	30% after deductible
Outpatient	20% after deductible	30% after deductible
Emergency room	20% after deductible	20% coinsurance (deductible does not apply)
Office Visits (What You Pay)		
Maternity office visits and delivery	10% after deductible	30% after deductible
Office visits (PCP)	\$12 copay	30% after deductible
Office visits (specialist)	\$12 copay	30% after deductible
Physical, speech, and occupational therapy	20% after deductible	30% after deductible
Other Eligible Expenses (What You Pay)		
Ambulance	20% after deductible	30% after deductible
Lab, X-rays, and diagnostic tests (outside the doctor's office)	10% after deductible	30% after deductible

*Copays and out-of-pocket costs paid toward meeting the annual deductible will be applied to your annual out-of-pocket maximum.

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- > Dental & Vision
- > **Plan Rates**
- > Life Coverages
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HMSA Prescription Drug Plan

Here's how the plan covers prescription drugs.

Prescription Drug Costs	Generic	Preferred Brand	Non-Preferred Brand
Retail pharmacy (up to a 30-day supply)	\$7 copay	\$30 copay	\$30 copay + \$45 Tier 3 cost share
Mail order (84- to 90-day supply)	\$11 copay	\$65 copay	\$65 copay + \$135 Tier 3 cost share

HMSA Vision Coverage

The plan offers you access to quality vision care benefits. Covered services include glasses, contact lenses, and a routine eye exam **once each plan year (July 1st – June 30th)**.

Vision Services	In-Network	Out-of-Network	Frequency
Exam	\$10 copay	Not covered	Once per plan year
Exam allowance	N/A	100% after plan pays up to \$40	Once per plan year
Lenses			
Single	\$25 copay	100% after plan pays up to \$25	Once per plan year
Multifocal	\$25 copay	100% after plan pays up to \$55	Once per plan year
Polycarbonate	Not covered	Not covered	Not covered
Contact lenses	100% after plan pays up to \$110	100% after plan pays up to \$55	Once per plan year
Fitting	Not covered	Not covered	Not covered
Retail frame allowance	100% after plan pays up to \$110	100% after plan pays up to \$55	Once every two plan years

2027 Employee Rates (Semi-Monthly, Per Pay Period, Pretax)

Rates	Hawaii Medical & Vision
Employee	\$71.22
Employee + One	\$154.00
Employee + Family	\$228.96

2027 Domestic Partner Rates and Imputed Income (Semi-Monthly, Per Pay Period)

Rates	Hawaii Medical & Vision
Employee + Domestic Partner	
Employee rate	\$154.00
Imputed income	\$889.37
Employee + Employee's Child(ren) + Domestic Partner	
Employee rate	\$228.96
Imputed income	\$905.02
Employee + Domestic Partner + Domestic Partner's Child(ren) + Employee's Child(ren)	
Employee rate	\$228.96
Imputed income	\$1,794.39

Life Coverages

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

Otsuka pays for your basic life and accidental death and dismemberment (AD&D) coverage through Lincoln Financial, and you are automatically enrolled. During Open Enrollment, you may also purchase additional coverage as follows for you and your family up to the guaranteed issue without providing a statement of health:

- **Basic Life insurance:** 2 times your annual base salary, up to \$1.5 million—provided by Otsuka—at no cost to you.
- **Optional Life insurance:** Available for you and your spouse, domestic partner, and dependent children. Optional life insurance costs are deducted from your paycheck on an after-tax basis. You may elect up to 6 times your annual base salary, up to \$1.5 million. A guaranteed issue benefit is available of \$250,000 for employee and \$50,000 for a spouse/domestic partner.

If you are enrolled in optional employee life or optional spouse life insurance, you can increase your coverage by \$20,000 during enrollment without being required to submit evidence of insurability (EOI).*

- **Basic AD&D insurance:** Up to 5 times your annual base salary, up to \$1.5 million—provided by Otsuka—at no cost to you.

Remember to Update Your Beneficiaries

Open Enrollment is a good time to review your beneficiary information and make sure it still reflects your wishes. Keeping your beneficiaries up to date helps ensure your benefits are paid according to your current preferences.

*Any increase elected at Open Enrollment may be subject to EOI if you were previously denied coverage.



- > Medical
- > Prescription Drugs
- > Dental & Vision
- > Plan Rates
- > Life Coverages
- > **Spending Accounts**
- > Other Choices
- > 401(k) Plan

Spending Accounts

Health Care and Dependent Care Flexible Spending Accounts (FSAs)

The Health Care and Dependent Care FSAs, administered by Fidelity, are another great way to save tax dollars on eligible expenses. If you choose to participate in a Health Care or Dependent Care FSA, remember that you'll need to re-enroll each year during Open Enrollment. FSA elections do not automatically carry over to the next plan year, and any unused funds cannot be rolled over.

Please note: If you enroll in the Consumer Select or Consumer Value PPO with a Health Savings Account (HSA), you **cannot participate** in the Health Care FSA.

You can incur expenses through March 15th for the previous year. For example, 2027 expenses can be incurred through **March 15th, 2028**.

You must file for reimbursement with Fidelity by March 31st, 2028. If you participate in the Health Care FSA and you terminate employment, your coverage will end on your termination date. You will have 90 days after your termination date to file claims for eligible services received while employed. If you participate in the Dependent Care FSA, you will have until March 15th, 2028, to incur additional eligible dependent care expenses; claims must be filed by March 31st, 2028.

To learn more about the transition of your spending accounts to Fidelity, please [click here](#).

Have 2026 FSA Funds with Anthem?

Don't forget to submit for any remaining 2026 Health Care or Dependent Care FSA funds before the March 31st, 2027 deadline. [Click here](#) for important guidance on using your Anthem and Fidelity FSA accounts.

Use It or Lose It!

Any money remaining in your FSA accounts after **March 31st, 2028**, is non-refundable. Before you enroll, review your expenses from the previous year. Elect to contribute only what you think you will need.



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FSA FAQs	Health Care FSA	Dependent Care FSA
When are funds available?	Your full annual election is available on the effective date of your election. You can be reimbursed for eligible expenses up to the total amount you elected for the year.	Funds become available as payroll deductions are deposited into your account. You can only be reimbursed up to the amount in your account at the time of reimbursement.
What can I use it for?	Use it for eligible healthcare expenses , including: - Deductibles, copays, and coinsurance - Prescription drugs and over-the-counter medications - Dental, vision, and hearing care - Feminine care products	Eligible dependent care expenses that allow you and your spouse to work or that allow your spouse to attend school full-time , including: - Child care for children age 12 and under - After-school care - Adult day care for dependents who live with you
How much can I contribute?	Up to \$3,500 per employee in 2027.	Up to \$7,500 per household in 2027.*
Is there extra time to use unused funds?	Yes. You have a grace period through March 15th, 2028 , to incur new eligible expenses using unspent 2027 FSA funds. Claims must be filed by March 31st, 2028 .	
What happens if I leave Otsuka?	Any unused Health Care FSA funds are forfeited. Be sure to use the money in your account before your last day at Otsuka.	You have until March 15th, 2028 , to incur additional eligible dependent care expenses. Claims must be filed by March 31st, 2028 .

*The maximum annual election for highly compensated employees will be limited to \$4,000.



Other Important Benefit Choices

Commuter Benefits

Save on commuting expenses with commuter benefits, administered by Fidelity. You may elect coverage for transit or parking—**but not both**—through Workday. Jnana will subsidize the benefit up to **\$420** per month, subject to applicable tax rules.

Once you enroll, you can pay for eligible commuter expenses with your Fidelity debit card or pay from your pocket and file a claim for reimbursement—tax-free.

Check out the [Benefits Portal](#) for a list of eligible expenses.

Your Commuter Benefits Debit Card

You will receive a **separate card** for your commuter benefit account and one for your spending accounts (Health Care, Dependent Care, and/or Health Savings Account). Please activate your commuter benefits debit card upon receipt to ensure it is ready for use when you need it.

Voluntary Benefits

Illnesses and injuries can impact your long-term financial well-being well after recovery. Otsuka offers Accidental Injury, Critical Illness, and Hospital Care insurance from Lincoln Financial to help you focus on being well—not the finances.

- **Accidental Injury insurance** pays you a fixed benefit amount to help offset unexpected out-of-pocket expenses resulting from covered accidental injuries on or off the job.
- **Critical Illness insurance** provides a lump sum payment directly to you in the event of a covered condition such as a heart attack, stroke, cancer, major organ transplant, or renal (kidney) failure.
- **Hospital Care insurance** provides additional coverage to cover costs such as hospital admissions or ICU expenses for accidents and sickness resulting in confinement in a hospital—including maternity.

All three plans provide a \$100 annual incentive for completing one approved wellness activity such as a health screening test.

Coverage is available for you, your spouse/domestic partner, and your child(ren). You are not required to participate in Otsuka's medical plan to take advantage of these benefits.

Learn more about Voluntary Benefits on the [Benefits Portal](#).

[> Medical](#)
[> Prescription Drugs](#)
[> Dental & Vision](#)
[> Plan Rates](#)
[> Life Coverages](#)
[> Spending Accounts](#)
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Identity Theft Protection

Identity theft is increasingly common and can seriously affect your long-term financial and mental well-being. That's why Otsuka offers Norton LifeLock monitoring to help detect fraud early and reduce potential harm. This coverage provides comprehensive protection for your identity, devices, and online activity, including:

- Identity and credit monitoring
- Annual credit report and monthly credit score
- Genie Scam Protection
- Financial wellness for balance change alerts
- Spending tracker and insights
- Up to 10 devices for single plans or unlimited devices for family plans
- Up to 500GB of Cloud backup
- Up to \$50,000 in Cyber Crime insurance
- Anti-virus protection
- Social media reputation monitoring
- Digital wallet storage and monitoring
- Full-service remediation
- Digital exposure report

Norton LifeLock Identity Theft Protection

Call **800-607-9174** to find more details.

Rates:

Employee only: \$12.49 per month | **Family: \$21.48** per month

MetLife Legal Insurance

To learn more, go to members.legalplans.com or call **800-821-6400** to find more details.

Rate: \$16.50 per month

Legal Insurance

Legal issues can be stressful, and not all legal issues are the same depending on your situation. Legal insurance through MetLife can help you access affordable legal care when/if you have a planned or unplanned legal issue. Whether disputing with a contractor, facing a traffic ticket, or working with estate planning, **MetLife** is here to help. Additional services include tax preparation and online notary services (where available). When you enroll, you can choose from a nationwide network of attorneys who will:

- **Consult** with you on legal issues in person, over the phone, or online
- **Review or prepare** personal documents
- **Make follow-up calls** or write letters on your behalf
- **Represent you**, if needed

Pet Insurance

Wishbone Pet Health Insurance

Pets hold a special place in our families, and their health is just as important. With Wishbone Pet Health Insurance, your furry friends can receive routine or emergency care without breaking the bank. This 100% employee-paid benefit covers 90% of costs for accidents and illnesses for dogs and cats, with an option for routine care coverage. Key features include:

- Coverage for office visits, exam fees, and prescription medications
- Visit any licensed U.S. veterinarian; no network required
- 90% reimbursement on accidents and illnesses for cats and dogs
- No lifetime maximum
- Easy claims submission at wishboneinsurance.com/otsuka-us



Note: Pre-existing conditions will not be covered. Monthly rates average around \$35, based on your pet's age, breed, and location. Adding a routine care plan is optional at an additional cost. By enrolling multiple pets, you will receive an additional 5% multi-pet discount.

Pet Discount Plan

The Pet Discount Plan provides coverage and savings for all dogs, cats, and exotics, including pets with pre-existing conditions. The plan includes unlimited 24/7 pet telehealth, discounts on prescriptions, food, treats, toys, and in-office veterinary services, plus free shipping from PetCare Rx, same-day pickup for eligible prescriptions at Caremark pharmacies, and a pet ID tag with lost pet recovery service.

Pet Discount Plan Rates

\$11.75 per month for a single pet or **\$18.50** per month for a family plan



Pet Benefits Made Easy

- Enroll in the Pet Discount Plan through Workday during Open Enrollment. Premiums are conveniently deducted from your paycheck.
- Enroll in Wishbone Pet Health Insurance at any time by visiting wishboneinsurance.com/otsuka.us. Premiums are paid directly to Wishbone through their billing process.

The Otsuka 401(k) Savings Plan

The Otsuka 401(k) savings plan, administered by Fidelity, offers you the opportunity to accumulate savings for your future.

Fidelity Financial Resources

Fidelity offers an array of services to support your financial goals, including online tools, on-demand workshops, and advice from financial experts.

Feature	How It Works
Your contributions	Contribute up to 60% of your eligible compensation (excludes bonus and overtime) per pay period, on a pretax, Roth, and/or after-tax basis. 2027 contribution limits:* \$24,500—Pretax and/or Roth contribution limit \$7,500—Catch-up contribution limit if you are age 50 or older by December 31st, 2027 \$11,250—Catch-up contribution limit if you are age 60 to 63 by December 31st, 2027
Otsuka Matching Contributions	Otsuka matches your contributions dollar for dollar, up to 10% of your eligible base salary, per pay period.
Bonus Deferral Contribution	Beginning January 1st, 2027 , you can defer all or part of your eligible bonus, providing additional flexibility to increase your retirement savings beyond regular paycheck contributions. Keep the annual IRS contribution limits in mind when planning what to defer.
Changing your contribution percentage	You can increase (up to applicable limits) or decrease your savings percentage at any time. Please note: Your new savings percentage will be effective within one to two pay periods following the date your election was submitted in Fidelity's system.
Otsuka match: vesting schedule	Employer matching contributions vest in 25% increments per year, beginning after one year of service and with full vesting occurring after four years.

*IRS limits are subject to change annually. Limits listed are for 2026. At publication, the IRS had not yet released 2027 limits.



2027 Catch-Up Contributions

All catch-up contributions you elect **must be made as separate elections.**

Additional Catch-Up Regulations for Higher Earners

Your catch-up contributions must be made separately as Roth contributions only if:

- You earned **\$145,000 or more*** in 2026 (reported as FICA wages on your Form W-2), AND
- You will be **age 50 or older** in 2027.

Contacts & Resources

The following helpful resources include contact information for your Otsuka benefit plan service providers as well as links to a range of important benefit laws and notices.

Otsuka Benefits Service Providers

Vendor	Service	Phone	Website or Email
Otsuka AVA Contact Center	Benefits Enrollment & Eligibility Questions	877-4-OTSUKA (877-468-7852)	otsukaus.service-now.com/ava
Cigna Customer Service Line	Medical and Prescription Drugs	Before January 1 st : 888-806-5042 After January 1 st : 800-Cigna24 (800-244-6224)	mycigna.com
Crisis24	Global Travel Insurance	Global Hotline: 443-569-0646	You can download the app in the App Store or Google Play.
Delta Dental	Dental	800-932-0783	deltadentalins.com
Fidelity	401(k) Plan, FSAs, HSA, and Commuter	800-835-5097	netbenefits.com
HMSA	Hawaii Medical and Vision	800-776-4672	hmsa.com
Lincoln Financial	Accidental Injury, Critical Illness, Hospital Care Insurance	New Claims: 800-423-2765 Claims Assistance: 800-210-0268	LincolnFinancial.com
	Disability & Leave Claims	888-408-7300	LincolnFinancial.com
	Life & AD&D Insurance	888-287-8494 (option 3)	Company code: OTSUKAAMERICA
MetLife	Legal Insurance	800-821-6400	members.legalplans.com
Norton LifeLock	Identity Theft Protection	800-607-9174	nortonlifelock.com/us/en
Wishbone	Pet Insurance, Pet Discount Plan	800-887-5708	wishboneinsurance.com/otsuka-us
Trustmark	Whole Life Insurance	Contact via email.	support@mybenefitsadvice.com
VSP	Vision	800-877-7195	vsp.com

Benefits Laws & Notices

To view Benefits Laws & Notices, [click here](#).

