Open Enrollment 2026 Newsletter

Open enrollment is your once-a-year opportunity to review your benefits and make sure they fit your needs. Be sure to confirm your current choices and explore all the Veradigm benefits available to you.

Take these steps to prepare:

1. Read this newsletter to find out what's new for 2026.
2. Explore **myveradigmbenefits.com** to learn about your Veradigm benefits.
3. Watch the 2026 OE presentation video available in the Learning Center.
4. Choose benefits that fit your needs for 2026. Use Health Advocate to compare plans and get answers to your questions.

Enroll between Monday, Oct. 27 and Monday, Nov. 10.

If you are adding dependents to your coverage

You must provide proof of eligibility to add dependents who are not currently covered under the Veradigm benefit plans. The Veradigm benefits enrollment system will alert you to any documentation needed (such as a marriage certificate or birth certificate, etc.) to verify dependent eligibility. You must return documentation promptly to complete your coverage addition and to receive your Medical ID cards by Jan. 1, 2026.

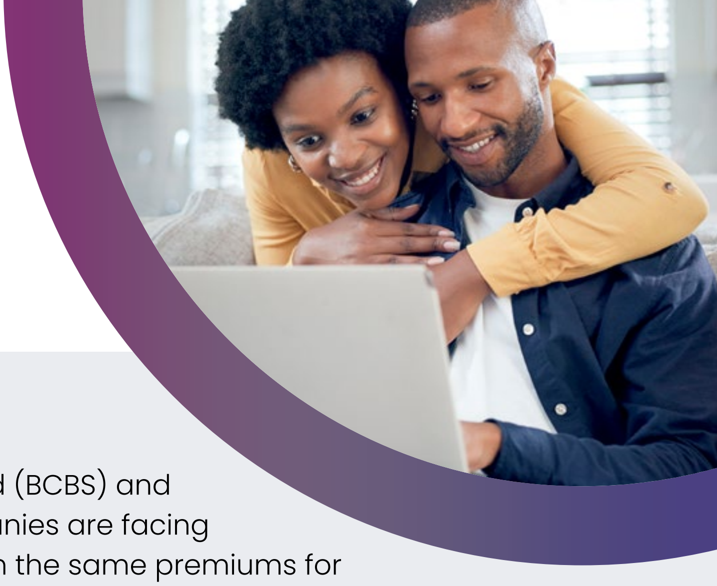
Do I have to enroll?

If you want to keep the benefits you have now and don't want to make changes for 2026, most of your current benefit elections will roll over (at 2026 rates) EXCEPT:

- Health savings account (HSA) contributions.
- Flexible spending account (FSA) elections (general purpose health care FSA, limited purpose health care FSA and/or dependent care FSA).

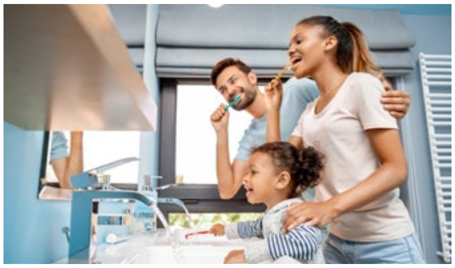
HSA and FSA elections must be made each year.

What's new or changing for 2026



Medical

- **Great news!** Associate premiums for BlueCross BlueShield (BCBS) and Kaiser plans **will not increase in 2026**. While many companies are facing rising medical costs, Veradigm has been able to maintain the same premiums for another year.
- **Plan features will remain the same for BCBS medical plans.** For Kaiser medical plans, all features will also stay the same except the Kaiser HSA plan deductible for each covered family member (for any tier above employee-only), which will increase to $3,400 (from $3,300). The total family deductible remains $5,000.
- **New for BCBS plans: Virta and GLP-1 for weight loss.** Associates currently using or planning to use a GLP-1 for weight loss must participate in the Virta program. Virta provides medical oversight, nutrition support, and coaching to help you use the medication safely and effectively while supporting your weight-loss goals. Veradigm is committed to supporting associates in their efforts to achieve and maintain weight loss.
  – As a reminder, GLP-1 costs depend on your plan. Be sure to review the prescription drug details when choosing your 2026 coverage. In Optum Rx plans, Zepbound and Wegovy are Tier 2 Preferred Brand drugs.



Dental

- Associate premiums will increase slightly for 2026.
- Dental plans will continue to be administered by Cigna and the plan features for both options will stay the same.

Vision

- Associate premiums will not increase for 2026.
- Vision plan will continue to be administered by VSP and plan features will stay the same.

Health reimbursement accounts (HRAs)

- If you enroll in the BCBS HRA or Kaiser Permanente HRA plans, an HRA account is set up for you.
- Veradigm contributes to your HRA account each year. See **page 9** for details.

Health savings accounts (HSAs)

You must re-elect your HSA contributions each year to participate. Your current elections will not roll over.

You may participate in an HSA if you enroll in the BCBS HSA plan or the Kaiser Permanente HSA plan.

How much you can contribute for 2026

If you enroll in the BCBS HSA or Kaiser HSA, you can contribute up to the IRS maximums for 2026:

- **Individual:** $4,400 (currently $4,300)
- **Family:** $8,750 (currently $8,550)
- If you are age 55 and older, you can contribute an additional $1,000 as a catch-up contribution.

To receive Veradigm's contributions

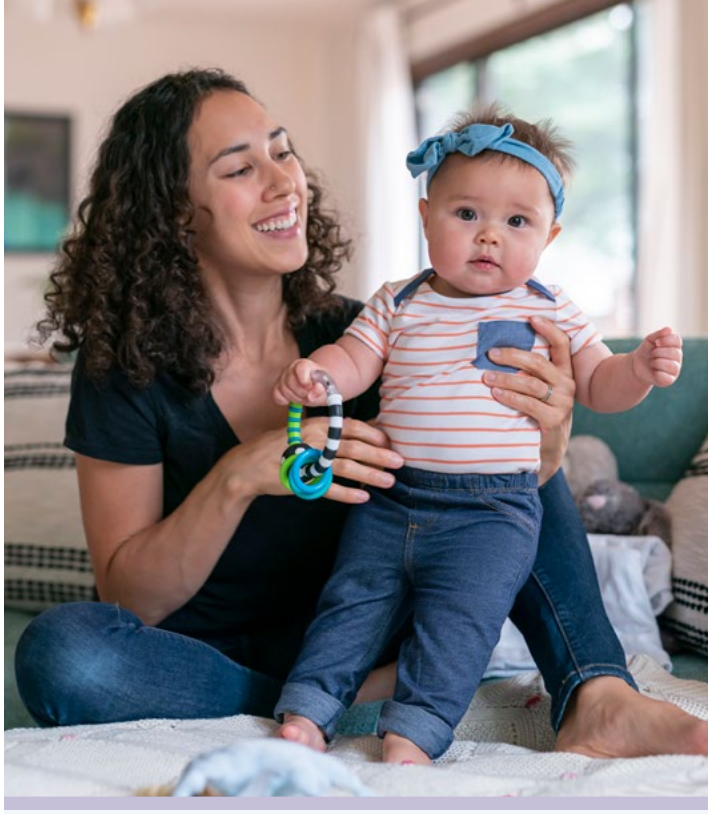
Veradigm will contribute to your Health Savings Account (HSA) only if you enroll in either the BCBS or Kaiser HSA medical plan during Open Enrollment. Follow these steps to ensure you receive the contribution:

1. Elect the BCBS HSA or Kaiser HSA medical plan through the Veradigm benefits enrollment system.
2. Confirm your HSA participation:
   - If you want to participate, select "I Want Coverage."
     - You'll be prompted to choose your contribution amount for 2026.
     - If you don't want to contribute but still want Veradigm's contributions, enter $0 as your contribution amount.
   - If you don't want to participate, select "Waive Coverage." Note: If you waive coverage, you will not receive Veradigm's contributions to your HSA.

For 2026 Veradigm contribution details, see **page 9**.

Advantages of an HSA

- Contribute, grow, and withdraw money tax-free when used for eligible expenses.
- Keep your HSA for life—even if you change jobs or retire.
- Unused funds roll over from year to year.
- Use your HSA to pay for current healthcare costs or invest for the future.



Flexible spending accounts (FSAs)

You must re-enroll in the FSAs each year to participate. Your current elections will not roll over.

For 2026, IRS contribution limits are:

- **General purpose health care FSA and limited purpose health care FSA:** $3,400
- **Dependent care FSA:**
  - **Single individuals or married couples filing jointly:** $7,500 for (up from $5,000), or
  - **Married couples filing separately:** $3,750 for (up from $2,500)

Note: Any funds remaining in your health care and/or dependent care FSAs at the end of the year cannot be rolled over to the next year. You must use your 2025 account funds by Dec. 31, 2025, and submit claims by March 31, 2026. For 2026 contributions, you must use funds by Dec. 31, 2026, and submit claims by March 31, 2027.

New! Identity theft and cyber protection program

You have the option to enroll in a robust digital security plan to help protect you and your family from financial and identity fraud with Aura Protection Plus plan.

This plan helps safeguard you and your family against today's most common digital threats—all in one easy-to-use app.

- **Identity and financial fraud protection:** Get automatic feature activation, a secure digital vault, and comprehensive monitoring with real-time alerts and proactive controls to help stop fraud before it escalates.
- **Scam and cybercrime prevention:** Stay protected with call, text, and email scam filters, malicious URL blocking, VPN and antivirus tools, plus safe browsing features with ad-blocking and anti-tracking.
- **Resolution and reimbursement:** If fraud does occur, you'll have 24/7/365 access to U.S.-based experts for remediation, plus insurance coverage that includes a $5 million ID theft policy and a $50,000 cyber insurance policy.
- **Smart family safety (included with family coverage):** Extend coverage to unlimited dependent minors and up to 10 adult loved ones, each with their own private Aura account and insurance protection. You can also securely share alerts, passwords, and other critical information.
- **Digital parenting and well-being (included with family coverage):** Protect your children from online risks with child identity protection, cyberbullying and predator monitoring, parental controls, safe gaming tools, and insights into how online activity may affect mental well-being.

With broad protection and easy-to-use tools, this benefit gives you and your family peace of mind in today's connected world.

You can enroll in this plan during Open Enrollment. The monthly rates are $8.03 for individual coverage or $13.25 for family coverage, paid through payroll deduction.

Medical

Here is an overview of your medical plan options for 2026.

BCBS Medical Options

Plan features	BCBS HRA		BCBS HSA		BCBS PPO	
	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network
Deductible	$1,500 person $3,000 family	$4,500 person $9,000 family	$2,500 person $5,000* family	$5,000 person $10,000* family	$3,000 person $6,000 family	$6,000 person $12,000 family
Coinsurance	20% after deductible	50% after deductible	25% after deductible	50% after deductible	30% after deductible	50% after deductible
Out-of-pocket maximum	$5,000 person $10,000 family	$10,000 person $20,000 family	$6,000 person $12,000 family	$12,000 person $24,000 family	$7,300 person $14,600 family	$14,600 person $29,200 family
Preventive care visit	Fully covered	50% after deductible	Fully covered	50% after deductible	Fully covered	50% after deductible
Primary care physician office visit	20% after deductible	50% after deductible	25% after deductible	50% after deductible	$20 copay	50% after deductible
Specialist office visit	20% after deductible	50% after deductible	25% after deductible	50% after deductible	$50 copay	50% after deductible
Urgent care	20% after deductible	20% after deductible	25% after deductible	25% after deductible	$75 copay	$75 copay
Emergency room	20% after deductible	20% after deductible	25% after deductible	25% after deductible	$200	$200

**Under the HSA Plan, if more than one individual is enrolled, the family deductible must be met. Once the family deductible has been met, the plan will pay each enrolled family member's covered expenses based on the coinsurance level. One individual may satisfy the per person out-of-pocket maximum.*

Optum Rx prescription drug benefits

If you enroll in one of the BCBS medical plans, the prescription drug benefits will be administered by Optum Rx.

GLP-1s and your deductible: GLP-1s for weight loss are Tier 2 Preferred brand drugs for all BCBS plans. If you're enrolled in the HSA plan, you'll need to meet your deductible before coinsurance applies for Tier 2 Preferred brand drugs.

Maintenance medications (prescriptions taken regularly over an extended period to manage ongoing health conditions) must be filled through CVS or Optum mail order pharmacy.

Plan features	BCBS HRA		BCBS HSA		BCBS PPO	
	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network
30-day supply through retail or mail order						
Preventive*	No copay	50% after deductible	0%, no deductible	50% after deductible	No copay	50%
Generic	$15 copay	50% after deductible	25% after deductible	50% after deductible	$15 copay	50%
Preferred brand	30% up to $125 max	50% after deductible	30% after deductible (up to $125 max)	50% after deductible	$30 copay	50%
Non-preferred brand	40% up to $225 max	50% after deductible	40% after deductible (up to $225 max)	50% after deductible	$60 copay	50%
Specialty (limited to a 30-day supply)	40% up to $225 max	50% after deductible	40% after deductible (up to $225 max)	50% after deductible	$80 copay	50%
90-day supply through retail or mail order (Note: Mail order is not covered out-of-network.)						
Preventive*	No copay	50% after deductible	0%, no deductible	50% after deductible	No copay	50%
Generic	$37 copay	50% after deductible	25% after deductible	50% after deductible	$37 copay	50%
Preferred brand	30% up to $312 max	50% after deductible	30% after deductible (up to $312 max)	50% after deductible	$75 copay	50%
Non-preferred brand	40% up to $562 max	50% after deductible	40% after deductible (up to $562 max)	50% after deductible	$150 copay	50%

** You can obtain specific preventive medications in-network with no cost-share as follows:*

- *There is no cost for medications on Optum Rx's Preventive Drug (ACA) list for all plan participants.*
- *For Optum Rx HSA Plan participants, other preventive medications listed on Optum Rx's 2025 Preventive Drug list are covered at 100% with no deductible or coinsurance.*
- *To view Optum Rx's preventive medication lists, visit* **optumrx.com**.
- *For cost details regarding preventive medications and the Optum Rx Premium Formulary, contact Optum Rx at 1-844-368-0693.*

Kaiser Permanente Medical Options (for CA residents)

This overview chart shows in-network benefits only. For full details, see the Kaiser plans' Summaries of Benefits and Coverage (SBCs) in Resources > **Downloads**.

Plan features	Kaiser HRA	Kaiser HSA	Kaiser HMO
Deductible	$1,500 person $3,000 family	$2,500/person for employee only coverage $3,400/person for employee plus spouse/DP or employee plus child(ren) coverage* $5,000* family	$3,000 person $6,000 family
Coinsurance	20% after deductible	0% after deductible	30% after deductible
Out-of-pocket maximum	$3,000 person $6,000 family	$4,600 person $9,200 family	$6,000 person $12,000 family
Preventive care	No copay (deductible does not apply)	No copay (deductible does not apply)	No copay (deductible does not apply)
Primary care physician office visit	$20 per visit after deductible	$30 per visit after deductible	$40 per visit
Specialist office visit	$20 per visit after deductible	$50 per visit after deductible	$50 per visit
Urgent care	$20 per visit after deductible	$30 per visit after deductible	$40 per visit
Emergency room	20% after deductible	$200 per visit after deductible	30% after deductible

**For any coverage above employee-only, each enrolled member has a $3,400 deductible, up to a $5,000 maximum for all enrolled members. The plan begins paying coinsurance once an individual or the overall deductible is met.*

Kaiser Permanente Prescription drug benefits (for California residents)

Plan features	Kaiser HRA	Kaiser HSA	Kaiser HMO
Retail generic (up to a 30-day supply)	$10 copay	$10 copay after deductible	$10 copay
Retail brand formulary (up to a 30-day supply)	$30 copay	$30 copay after deductible	$30 copay
Mail generic (up to a 100-day supply)	$20 copay	$20 copay after deductible	$20 copay
Mail brand formulary (up to a 100-day supply)	$60 copay	$60 copay after deductible	$60 copay
Specialty (up to a 30-day supply)	20% coinsurance (not to exceed $150)	20% coinsurance after deductible (not to exceed $250)	20% coinsurance (not to exceed $250)

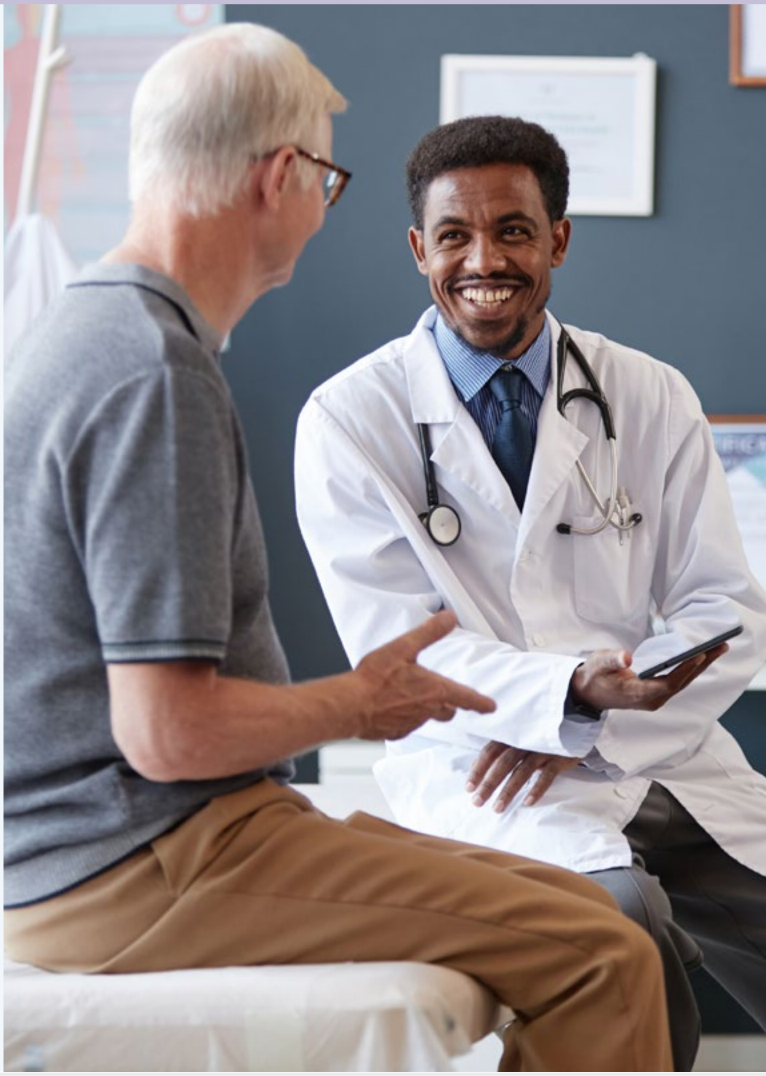
Preventive care

All Veradigm medical plans cover in-network preventive care services, such as annual check-ups, immunizations and age-appropriate screenings at 100 percent.

You pay nothing for these *in-network* services that help keep you healthy:

- Well-adult exams
- Well-child exams
- Child immunizations
- Age and gender-related screenings
- Flu shot (once a year)

Preventive care received out-of-network is not covered.



Veradigm contributions to your HRA or HSA account

If you enroll in the BCBS HRA or HSA plan or the Kaiser Permanente HRA or HSA plan, Veradigm will contribute to your HRA or HSA account each year.

Veradigm HRA contributions

If you enroll in the BCBS HRA or Kaiser HRA medical plan, you will receive 100% of Veradigm annual contributions on Jan. 1, 2026.

Coverage level	Veradigm annual contributions (on Jan. 1, 2026)
Associate only	$500
Associate + spouse/DP	$750
Associate + child(ren)	$750
Associate + family	$1000

Veradigm HSA contributions

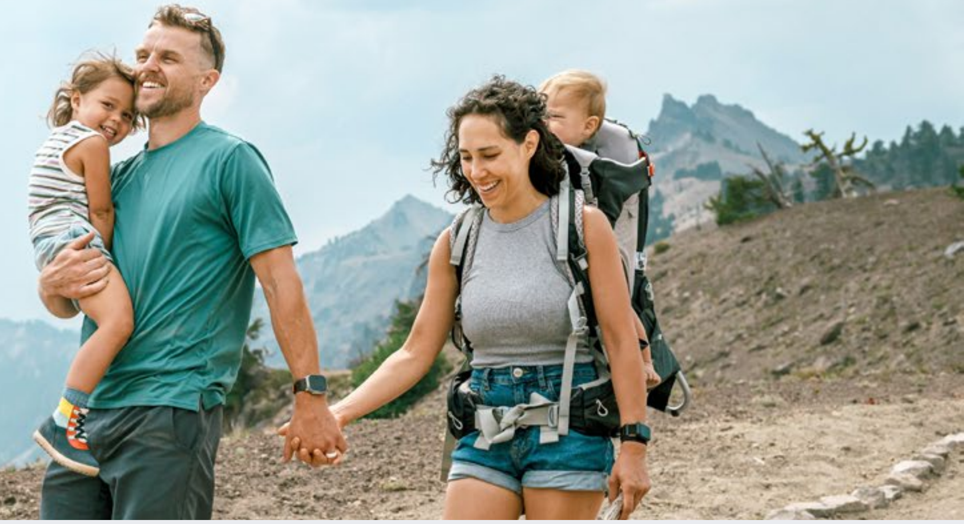
If you enroll in the BCBS HSA or Kaiser HSA medical plans, Veradigm will contribute to your HSA each quarter.

Coverage level	Veradigm Quarterly Health Account Contributions				Maximum Veradigm Contributions
	Q1	Q2	Q3	Q4	Annual
Associate only	$160	$80	$80	$80	$400
Associate + spouse/DP	$240	$120	$120	$120	$600
Associate + child(ren)	$240	$120	$120	$120	$600
Associate + family	$320	$160	$160	$160	$800

Reminders

You must re-elect your HSA contributions each year to participate. Your current elections will not roll over.

If you enroll in the BCBS HRA or Kaiser Permanente HRA plan, an HRA account is set up for you.



2026 Rates

Medical rates

Here are 2026 per-pay-period rates for associates.

Coverage level	BCBS medical rates	Kaiser medical rates
	BCBS HRA	**Kaiser HRA**
Associate only	$95.00	$101.50
Associate + spouse/DP	$239.50	$256.00
Associate + child(ren)	$136.00	$145.50
Associate + family	$239.50	$256.00
	BCBS HSA	**Kaiser HRA**
Associate only	$85.00	$71.50
Associate + spouse/DP	$202.00	$170.00
Associate + child(ren)	$119.00	$100.00
Associate + family	$214.50	$180.50
	BCBS PPO	**Kaiser HMO**
Associate only	$48.00	$41.00
Associate + spouse/DP	$152.50	$130.50
Associate + child(ren)	$83.00	$71.00
Associate + family	$159.00	$136.00

Dental rates

Here are 2026 per-pay-period rates for associates.

Coverage level	Dental PPO	Dental HMO
Associate only	$8.78	$4.73
Associate + spouse/DP	$27.71	$8.93
Associate + child(ren)	$17.29	$10.51
Associate + family	$27.71	$15.50

The tobacco surcharge—and how to avoid it

If you enroll in a Veradigm medical plan (BCBS or Kaiser Permanente), you must certify whether you use tobacco. If you certify that you are a tobacco user, you will pay a **$25 per paycheck** surcharge ($50 per month). This is in addition to your regular medical premium.

A "tobacco user" refers to the use of tobacco products within the **past six months**.

Tobacco products include:

- Cigarettes, cigars, pipes, snuff, chewing tobacco.
- All forms of smokeless tobacco.
- Clove cigarettes.
- Any other smoking devices that use tobacco, such as hookahs, or simulate the use of tobacco, such as electronic cigarettes.

How to avoid or stop the surcharge

If you successfully complete one of our medical providers' free Tobacco Cessation programs or are tobacco free for at least six months, you can apply to no longer pay the surcharge and you may be eligible for credit of any surcharge that you have paid. You must log into **veradigmbenefitsus.com** and change your Tobacco Use status to a non-user. Please note, it may take up to two pay periods before the surcharge is removed from your paycheck.

Commit to quit!

Veradigm understands the health benefits of a smoke-free lifestyle. To help all associates, both BCBSNC and Kaiser offer no-cost programs to help with quitting smoking.

BCBS

The BCBS tobacco cessation program is available to all associates and family members enrolled in the BCBS medical plans through PIVOT.

- Pivot App provides personalized activities and challenges built for all schedules.
- Nicotine Replacement Therapy to help reduce cravings.
- The Pivot Breath Sensor to track progress.
- Active user community for collective wisdom and text with experts for personalized support.

To learn about the BCBS tobacco cessation programs, call the number on the back of your ID Card or visit **pivot.co/BlueCrossNC5**.

Kaiser

Kaiser offers a quit-smoking program with a variety of support resources:

- Visit **kp.org/quitsmoking** for details and more information.
- Talk with a health coach or a tobacco cessation quit line.
- Your coach will work with you to create a customized quit plan, identify triggers and develop strategies to manage cravings.

Emotional well-being resources

Taking care of your emotional well-being is just as important as your physical health. Veradigm offers support through both the Employee Assistance Program (EAP) and your medical plan benefits.

Employee Assistance Program (EAP) – Health Advocate

Available to all associates and their household members, the EAP provides confidential counseling and resources to help with personal, family, financial, and work-related concerns.

- Call 866.799.2728
- Visit **HealthAdvocate.com/veradigmllc**
- Registration code: 7QR4TKP

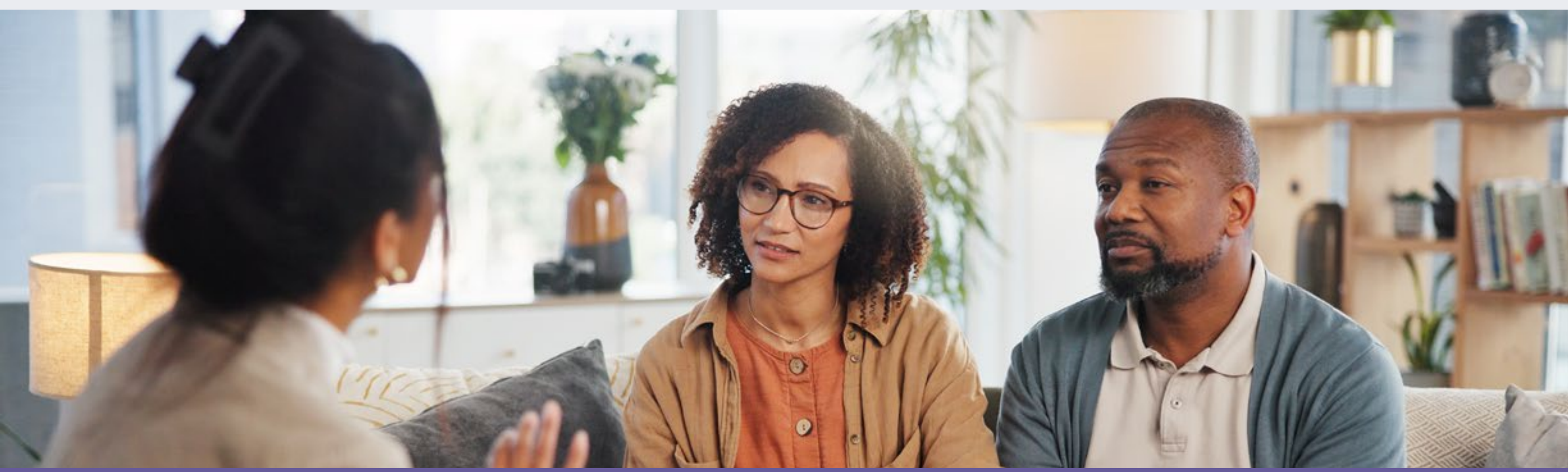
BlueCross BlueShield (BCBS) behavioral health benefits

If you enroll in a BCBS medical plan option, you have coverage for behavioral health services, including therapy, counseling, and treatment for mental health and substance use conditions. You can see in-network providers without a referral. For details on coverage and costs, visit **blueconnectnc.com**.

Kaiser behavioral health benefits

If you enroll in a Kaiser Permanente medical plan, you have coverage for mental health and addiction care. Services include therapy, counseling, and treatment for emotional wellness and substance use. You can access care without a referral in most cases, and many services are available virtually. Visit **kp.org/mentalhealth** to learn more, find providers, and explore self-care resources.

For more information on all your emotional support resources, visit:
myveradigmbenefits.com/emotional-support



24/7 crisis support

If you or someone you know is experiencing a mental health or substance use crisis, dial **988** for immediate help. The National Suicide & Crisis Lifeline connects you to trained counselors who can provide free, confidential support anytime, day or night.

It’s time to take action!

Don’t miss your chance to choose benefits that are right for you and your family for the upcoming year.

Enroll between Monday, Oct. 27 and Monday, Nov. 10.

Remember, if you don’t enroll…

If you want to keep the benefits you have now and don’t want to make changes for 2026, most of your current benefit elections will roll over (at 2026 rates) EXCEPT:

- Health savings account (HSA) contributions.
- Flexible spending account (FSA) elections (general purpose health care FSA, limited purpose health care FSA and/or dependent care FSA).

HSA and FSA elections must be made each year.

Your benefit elections start Jan. 1

The benefits you elect during Open Enrollment will start Jan. 1, 2026, and will remain in effect until Dec. 31, unless you have a qualified life event (like a marriage, birth, or divorce) or become ineligible for benefits. Your next opportunity to make changes to your benefits will be during our benefits Open Enrollment, which is held each fall.

How to enroll

To enroll, log into the **Veradigm benefits enrollment system**, then follow the steps below.

If you are already registered

1. Enter your username and password. If you can't remember one or both, click on *Trouble Logging In?* or call **1-844-705-4101**.
2. Once you are in the benefits enrollment system, click on the Start Here button and follow the instructions to enroll in your benefits or waive coverage.

If you are not registered

1. Enter your Social Security number or Employee ID, Company Key and Date of Birth. Company Key is: MDRX in all uppercase letters.
2. Create your user name and password. (Make a note of your user name and password for future use.) Select your security phrase and answer. Click Continue.
3. Log in with the new user name and password you just created in step 2. Read the Electronic Signature notification and click Accept to move forward.
4. Once you are in the benefits enrollment system, click on the Start Here button and follow the instructions to enroll in your benefits or waive coverage.

Remember to update your beneficiaries

Life changes—such as marriage, divorce, the birth of a child, or other family changes—may affect who you want to receive your benefits. Be sure your beneficiary information is current for your life insurance and health savings account (HSA). You can make any changes during Open Enrollment to review and update your beneficiary information through **veradigmbenefitsus.com**. Also, you can update your 401(k) plan beneficiary anytime through **workplace.schwab.com**.