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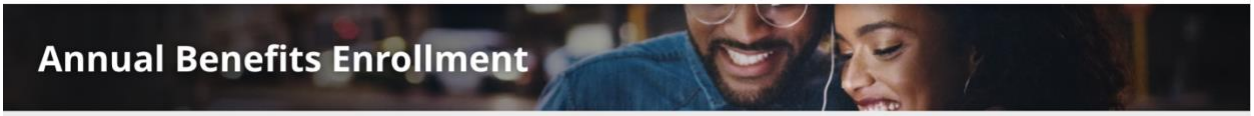

Annual Benefits Enrollment

Overview

At Citi, we understand the importance of having a choice of benefits. That's why we continue to offer a range of options, so you have the flexibility to choose the coverage that best fits your unique needs.

We took a careful look at our benefits program — as we do each year — and made some adjustments. We encourage you to do the same: take a fresh look at all of Citi's benefits as you evaluate your and your family's needs, as applicable.

- Are you in the most cost-effective plan for your level of health care usage?
- Are you taking full advantage of the money-saving potential offered by tax-advantaged accounts, free or low-cost options for medical care and our wellness program?

Annual Benefits Enrollment for 2026 is Monday, October 6 - Friday, October 24.

Read on to learn how to make the most of this enrollment opportunity and your Citi benefits.

- **Learn** what's new and notable.
- **Explore** all your benefit options — you may find you're not taking full advantage of Citi's offerings.
- **Consider** which medical plan may best fit your goals and health care needs for next year.
- **Discuss** your benefit options with your spouse or partner, if applicable.
- **Enroll** between October 6 and 24.
- **Review** these reminders to ensure you're making the most of your Citi benefits, now and throughout the year.

Your Action May Be Needed to Continue Benefits Coverage for Your Dependents

To maintain our comprehensive benefits program, it is essential that we periodically verify the eligibility of all enrolled dependents. That's why Citi is conducting a dependent eligibility review between September 30 and November 14, 2025. The review ensures that we have accurate information on covered dependents, recognizing that family circumstances can change over time. If you need to take part in this review, you will receive an email from the Citi Benefits Center explaining what to do. Review these FAQs to learn more. **Note that this is a separate process from Annual Benefits Enrollment and you must complete both processes to ensure continued coverage for your applicable dependents.**

Your Mental Health Matters

World Mental Health Day on October 10 occurs during our Annual Benefits Enrollment, making it the perfect time to learn how Citi's benefits can help you and your family care for your mental well-being. See the full spectrum of Citi's mental health support.

Sections

CONTACTS

You May Also Like

Live Well at Citi Program ›
Medical Plans ›
Health Care Experts ›

New and Notable for 2026

Review the list of changes below to ensure you're making informed decisions about your benefits:

Health Plan Costs

At Citi, we work closely with our benefit partners to offer high-value, cost-effective benefits for you and your family. In addition, Citi assumes a large share of the overall cost for medical coverage, passing on a smaller percentage to our employees.

- **Medical:** While health care costs have risen significantly, we are keeping the average 2026 Aetna and Anthem medical plan cost increase for employees to **3%**.* This increase is lower than overall market trends. (**Note:** The Kaiser HMO plan will have a higher cost increase.)
- **Dental:** The cost for dental coverage with the MetLife PDP will increase by an average of **9%** in 2026 (which amounts to an increase of about $4 – $11 per paycheck depending upon your coverage level). The Dental HMO will transition from Cigna to Aetna in 2026 with **lower** costs in 2026 compared to 2025.
- **Vision:** Vision plan costs will be the same in 2026.

***Citi is committed to providing equitable access to quality health care.** Your cost for medical coverage varies based on your pay band. We believe that comprehensive health care should be affordable for everyone. That's why we contribute more toward the cost of medical coverage for our lower-paid employees. If you will be in a higher pay band in 2026 than you were previously, your paycheck deductions for medical coverage may increase more than 3% compared to 2025. Starting October 6, visit Your Benefits Resources (YBR™), available through My Total Compensation and Benefits, to review your benefit costs for 2026.

Expanded Breast Cancer Screening Benefits

Citi believes strongly in the power of preventive care to promote better health. Based on updated Women's Preventive Services Guidelines, Citi's medical plans will provide coverage for **additional imaging** when needed to complete the breast cancer screening process or to address findings on the initial screening mammography. If additional imaging (MRI, ultrasound or mammography) and pathology evaluation are indicated, these services will be available to you and your covered family members at no cost as part of your comprehensive Citi medical coverage, when performed by in-network doctors and facilities.

Increased Tax-Saving Potential with the Health Savings Account (HSA)

If you enroll in the High Deductible Plan with HSA for 2026, you will be able to save even more on taxes, thanks to an increase in the IRS contribution limits. In 2026, the HSA contribution limits will increase to:

- $4,400 for employee-only coverage (compared to $4,300 in 2025)
- $8,750 for all other coverage levels (compared to $8,550 in 2025)

The additional "catch-up" contribution allowed for individuals who are age 55 or older in 2026 remains at $1,000.

With an HSA, you get a triple tax advantage — contributions from your paycheck are tax-free, any investment gains are tax-free, and withdrawals for eligible expenses are tax-free. Consider contributing more to your HSA next year to make the most of this tax-saving opportunity.

When you open an HSA, Citi automatically contributes to your account (see below), so keep this in mind when considering your own contribution amount. The IRS limits apply to the **total contributions** made by both you and Citi.

New Citi HSA Contribution Amounts

In 2026, Citi will provide HSA contributions of:

- Up to $300 for employee-only coverage (compared to $500 in 2025)
- Up to $600 for all other coverage levels (compared to $1,000 in 2025)

While this is a decrease over prior years, Citi remains aligned with market practices. Citi's contributions will continue to be made on a quarterly basis.

Review a side-by-side comparison of your 2026 medical plan options.

Separate In-network and Out-of-network Deductibles/Out-of-Pocket Maximums

The Choice Plan and High Deductible Plan with HSA will have a different approach to in-network and out-of-network deductibles and out-of-pocket maximums. Currently, if you're enrolled in the Choice Plan or High Deductible Plan, your eligible costs count toward both the in-network and out-of-network deductibles and out-of-pocket maximums. Beginning in 2026, in-network and out-of-network expenses will accumulate separately. With this change, you may pay more out of pocket for care before the plan begins to pay coinsurance if you use out-of-network providers. To get the most value from your health care benefits, we encourage you to use in-network providers whenever possible.

You can log in to your Aetna or Anthem account to search for in-network providers or call your Citi Health Concierge for assistance.

Both Aetna and Anthem recently expanded their in-network options for virtual **mental health providers**. You have access to psychiatrists, psychologists, therapists and professionals who specialize in specific conditions, such as eating disorders, depression and more.

Review a side-by-side comparison of your 2026 medical plan options.

In-network Only Plan Medical Deductible

The In-network Only Plan provides copay-based medical coverage with no deductible for most services, including all doctors' office, telehealth and urgent care visits. The annual deductible, which only applies to hospital care such as emergency room treatment or inpatient stays, will increase in 2026 to $400 individual/$800 family. (Keep in mind: There is a separate prescription drug deductible of $100 per person/$200 per family, which is not changing in 2026.)

Review a side-by-side comparison of your 2026 medical plan options.

New Dental HMO Provider

As part of our commitment to offer high-value benefits for you and your family, we have chosen Aetna as our new Dental HMO provider. The Aetna plan will have a lower cost for coverage compared to Cigna and offers increased access to in-network dentists. Like the Cigna plan, the Aetna plan will follow a patient charge schedule, with copays that vary by type of service.

With a Dental HMO, you must use a network provider to receive benefits. The majority of providers who were in the Cigna HMO network are also in the Aetna network; however, it's important to check the network (select DMO®/DNO as the plan) before enrolling.

As a result of the transition to Aetna, the Aetna Dental HMO service area will not exactly match the Cigna Dental HMO service area. When you enroll in benefits, you will be able to see which dental option(s) are available to you based on where you live. If you are currently enrolled in the Cigna Dental HMO, you will receive additional information mailed to your home address on file about this change.

Note: If you do not make a new selection during Annual Benefits Enrollment and you're currently enrolled in the Cigna Dental HMO, you will be defaulted into the new Aetna Dental HMO if it is available for you. If the Aetna Dental HMO is not available in your area, you will be defaulted into the MetLife Preferred Dentist Program (PDP) dental plan. Please note: The paycheck deductions for the MetLife PDP dental plan are higher than the Aetna Dental HMO.

Review a side-by-side comparison of your 2026 dental plan options.

Changes to MetLife PDP Plan Design

The benefit maximums for the MetLife Preferred Dentist Program (PDP) will change in 2026:

- Annual maximum benefit will decrease from $3,000 to $2,000 per person.
- Lifetime orthodontia maximum benefit will decrease from $3,000 to $2,000 per person.

You may want to keep these new maximums in mind as you consider how much to contribute to a tax-free Health Care Spending Account (HCSA), Limited Purpose Health Care Spending Account (LPSA) or Health Savings Account (HSA) for 2026 in order to minimize out-of-pocket costs.

Review a side-by-side comparison of your 2026 dental plan options.

Higher Contribution Limit for Dependent Day Care Spending Account

For the first time in many years, the IRS contribution limit for the Dependent Day Care Spending Account (DCSA) will increase in 2026. The maximum annual contribution will be $7,500 (up from $5,000) for single parents or married couples filing joint tax returns (or $3,750 for married couples filing separate tax returns; up from $2,500).

Increased Contribution Limit for Health Care Spending Accounts

The maximum amount you can contribute to a Health Care Spending Account (HCSA) or Limited Purpose Health Care Spending Account (LPSA) in 2026 is $3,400 (up from $3,300). If you enrolled before the 2026 contribution limit was finalized and indicated that you wish to contribute the maximum allowed in 2026, your contribution amount will be $3,400.

Upcoming Changes to the Citi Retirement Savings Plan

To comply with a new provision of the SECURE 2.0 legislation, employees who are age 50 or older in 2026 and earned $145,000 or more in 2025 (according to FICA earnings, which may include base salary, bonus, and commissions) will be required to make any catch-up contributions to the Citi Retirement Savings Plan on a Roth after-tax basis. This change is in addition to new IRS contribution limits, which are to be announced later in 2025.

More detailed information will be shared in January.

Note About Payroll Periods in 2026

Please be aware that based on the 2026 calendar, there will be 27 pay periods over the course of the year instead of the usual 26. You will still make 26 payroll deductions for your health and insurance benefit costs, as you do every year. This means that for the last week in December 2026, there won't be any deductions for health and insurance benefits from your paycheck. However, your retirement plan contributions will occur from all your paychecks, including the last week of December.

Key Considerations

We've outlined some key considerations to guide your decision-making now and help you get the most value and support from your Citi benefits throughout the year.

Decisions to Make During Annual Benefits Enrollment

Here's a list of the benefits you can elect for 2026 by enrolling between October 6 and 24:

Type of Coverage	Options	Think About...
Medical (Review the 2026 plan comparison table below)	• In-network Only Plan • Choice Plan • High Deductible Plan with HSA	• If your doctors are in the plan's network (see the instructions for checking networks under this table) • Your health care needs and what you want to pay for it (learn about each plan's coverage below) • If you want a tax-free Health Savings Account
Dental (Review the 2026 plan comparison table below)	• MetLife Preferred Dentist Program (PDP) • Aetna Dental Health Maintenance Organization (HMO)	• If you need to see out-of-network dental providers • If your dental providers are in the new Aetna Dental HMO network • If you no longer have access to the Cigna Dental HMO and may choose to enroll in the MetLife plan
Vision	• Aetna Vision Plan	• If you need vision care coverage
Supplemental Health	• Accident Insurance • Critical Illness Insurance ($15,000 or $30,000) • Hospital Indemnity Insurance	• If you/your family are at risk of accidental injuries (e.g., from sports) • If you are at risk for a serious illness • If you/your family expect to need a surgery or hospitalization
Savings and Spending Accounts	• Health Savings Account (HSA) • Limited Purpose Health Care Spending Account (LPSA) • Health Care Spending Account (HCSA) • Dependent Day Care Spending Account (DCSA)	• If you want long-term tax-free savings (only available with the HSA) • If you want to contribute additional tax-free money for vision/dental expenses • How much you expect to spend on health care next year • How much you expect to spend on dependent day care next year
Life and AD&D Insurance*	• Group Universal Life (GUL) Insurance	• If you want additional life insurance coverage above the basic coverage Citi provides • If you want access to a Cash Accumulation Fund (CAF) that allows you to save money at a guaranteed interest rate
MetLife Legal Plans	• MetLife Legal Plans • MetLife Legal Plans with Plus Parents	• If you have legal needs, such as real estate transactions, family law, estate planning, elder care/caregiving and more • If you want to include coverage for your parents/parents-in-law
Vacation Purchase Program	• Up to five additional vacation days	• If you expect to need additional paid time off next year

*Subject to plan provisions and evidence of insurability.

IMPORTANT REMINDER: Check the Medical and Dental Provider Networks

If you're considering changing plans for 2026, it's especially important to check that your preferred providers will be in-network. Because plan networks change, we recommend that **all** employees review the online network directories during Annual Benefits Enrollment, even if you're planning to keep your current coverage in 2026. Staying in network keeps your health care costs as low as possible.

Checking the Aetna and Anthem medical plan networks:

If you enroll in the Choice Plan or High Deductible Plan with HSA, you'll be able to choose from Aetna's or Anthem's national network of providers. However, the In-network Only Plan uses a smaller provider network that is a subset of the broader network used by the other two plan options. The In-network Only Plan uses the Aetna Premier Care Network Plus (APCN Plus) Open Access Aetna Select network and the Anthem National Blue High Performance Network. Use the instructions below to search for an in-network provider. Also keep in mind that the In-network Only Plan does not provide coverage if you receive care outside of this plan's select network (except in emergencies). You must stay in the network for plan benefits to apply.

If you find that your preferred doctors will not belong to your plan's network next year, you have the option to choose a different plan or different plan provider (Aetna or Anthem) for 2026 during Annual Benefits Enrollment, between October 6 and 24. (Note: You cannot change plans or plan providers outside of Annual Benefits Enrollment unless you experience certain life events, known as qualified changes in status.)

To check the 2026 networks for each plan, you can search the network directories on the Aetna and Anthem websites. You can also call your Citi Health Concierge for assistance. For the Aetna and Anthem directories, use these links and instructions:

- **In-network Only Plan (Aetna):***
  - Enter your home ZIP code in the **Provider Search** box, then click "Start Your Search."
  - Enter your ZIP code again under **Continue as a guest** to search for in-network doctors.
- **In-network Only Plan (Anthem):***
  - Select the blue button titled: **Network: National Blue High Performance Network (BlueHPN Non-Tiered)**.
  - Follow the prompts to conduct your search.
- **Choice Plan or High Deductible Plan with HSA (Aetna):**
  - Enter your location under **Continue as a guest** then click **Search**.
  - Select **Aetna Open Access Plans**, then **Aetna Choice POS II (Open Access)** and follow the prompts to conduct your search.
- **Choice Plan or High Deductible Plan with HSA (Anthem):**
  - Select the state in which you live.
  - Follow the prompts to conduct your search.

***Note:** The In-network Only Plan is not available in every location. If the In-network Only Plan is available to you, it will be offered as an option when you enroll. Keep mind, unlike the Choice Plan and High Deductible Plan with HSA, the In-network Only Plan uses a **smaller provider network** that is a subset of the broader network used by the other two plan options.

Checking the Aetna Dental HMO network:

Before enrolling in the Aetna Dental HMO, you should see if your dentist is in the plan's network, or look for a replacement dentist that is. Dental HMO members must select a primary care dentist in order to have services covered. Care from an out-of-network provider will not be covered except in limited circumstances.

To locate an in-network Aetna dentist:

- Go to the online directory of health care professionals.
- Under **Continue as a guest**, enter your ZIP code or city/state and click **Search**.
- Under **Select a Plan**, select **DMO®/DNO**, then click **Continue**.
- Enter your search criteria or under **Find what you need by category**, select **Dental Care**, then further refine your search.

Checking the MetLife PDP network:

While you can see any dentist you want with this plan, you will receive the highest benefits when you stay in the MetLife network.

To locate an in-network MetLife dentist:

- Go to the online Find a Dentist tool.
- Select **PDP** from the **Your Network** dropdown and enter your ZIP code, then click **Find**.
- Call 1 (888) 830-7380 for assistance.

2026 Medical and Dental Plan Comparisons

For more details about all of your Citi health coverage options, view the 2026 summaries of benefits and coverage (SBCs) on the Forms & Documents page.

2026 Medical Plan Comparison Chart

View this side-by-side comparison of your **2026 medical plan options**:

*Changed values highlighted with **bold** text*

Plan feature	High Deductible Plan with Health Savings Account (HSA)	In-network Only Plan	Choice Plan
HSA features			
HSA-eligible	Yes	No	No
Citi contribution to HSA	**Up to $300 individual** **Up to $600 all other coverage levels**	N/A	N/A
Annual deductible (Individual/family)*			
In-network	$1,800 / $3,600	**$400 / $800**	$500 / $1,000
Out-of-network	$2,800 / $5,600	N/A	$1,500 / $3,000
Annual out-of-pocket maximum (Individual/family)*			
In-network	$5,000 / $10,000**	$4,000 / $8,000	$3,000 / $6,000
Out-of-network	$7,500 / $15,000**	N/A	$6,000 / $12,000
Health care visits: Your costs			
Preventive care	In-network, covered 100%	In-network, covered 100%	In-network, covered 100%
Primary care (In-network)	20% after deductible	$25	20% after deductible
Primary care (Out-of-network	40% after deductible	N/A	40% after deductible
Specialist (In-network)	20% after deductible	$45	20% after deductible
Specialist (Out-of-network)	40% after deductible	N/A	40% after deductible
Emergency room visit (In- and out-of-network)	20% after deductible	$200 copay after deductible	20% after deductible

* In the Choice Plan and High Deductible Plan with HSA, in-network and out-of-network expenses will accumulate toward separate deductibles and out-of-pocket maximums; they do not cross-apply. This means you may pay more out of pocket for care before your plan begins to pay if you use out-of-network providers.

**For in-network services under family coverage, each of your covered family members has an individual out-of-pocket maximum of $6,850. After an individual reaches that amount, the Plan will cover 100% of that individual's in-network expenses for the rest of the year. Once the $10,000 family in-network out-of-pocket maximum is met, the Plan will cover 100% of the family's in-network expenses for the rest of the year. For out-of-network care under family coverage, the $15,000 family out-of-pocket maximum can be satisfied as a family or by an individual within the family.

2026 Dental Plan Comparison Chart

View this side-by-side comparison of your **2026 dental plan options**:

*Changed values highlighted with **bold** text*

Plan feature	MetLife PDP	Aetna Dental HMO
Annual deductible		
Individual	$50	None
Family	$150	None
Preventive and diagnostic services	100% paid; no deductible to meet (Includes annual check-ups, x-rays and cleanings)	Most services are paid at 100% when you use your network dentist
Basic services (such as fillings, root canals, periodontal services, and oral surgery)	20% after deductible	Copay when you use your network dentist*
Major restorative services (such as crowns, inlays/onlays, bridges and dentures)	50% after deductible	Copay when you use your network dentist*
Orthodontia	50% after deductible	Copay when you use your network dentist*
Lifetime orthodontia limit for children and adults	**$2,000 per person**	Coverage limited to 24 months of treatment
Annual maximum	**$2,000 per person**	None

* See Patient Charge Schedule.

Need Help Deciding? Call Your Citi Health Concierge

- **Aetna members:** 1 (800) 545-5862 | Monday – Friday 8 a.m. to 11 p.m. ET; Saturday 8 a.m. to 4:30 p.m. ET
- **Anthem members:** 1 (855) 593-8123 | Monday – Friday 8:30 a.m. to 8 p.m. ET
- **All plans or not currently enrolled (Health Advocate):** 1 (866) 449-9933 | Monday – Friday 8 a.m. to 9 p.m. ET

Are You Taking Full Advantage of Your Tax-saving Opportunities?

Citi offers several tax-advantaged accounts that save you money.

- **If you enroll in the High Deductible Plan with HSA**: You can make tax-free contributions to a Health Savings Account (in addition to the contributions Citi makes). This money can be used for a wide range of eligible health care expenses — now or in the future. Any unused balance carries over year after year, helping you build tax-free savings for future health care costs, even in retirement. The IRS annual contribution limits for the HSA will increase for 2026, as described in the "**New and Notable for 2026**" section above. You can also contribute tax-free money to a Limited Purpose Health Care Spending Account to spend on dental, vision and preventive care expenses. The projected contribution limit for 2026 is $3,400. (Note: Your HSA and LPSA contribution elections from 2025 will not roll over to 2026; you must make a selection when enrolling in your 2026 benefits.)
- **If you enroll in the Choice Plan or In-network Only Plan**: You can contribute tax-free money to a Health Care Spending Account (HCSA) to spend on eligible health care expenses each year. The projected contribution limit for 2026 is $3,400. (Note: Your HCSA contribution election from 2025 will not roll over to 2026; you must make a selection when enrolling in your 2026 benefits.)
- **Regardless of your medical plan enrollment:** You can contribute tax-free money to a Dependent Day Care Spending Account to spend on eligible expenses each year for **dependent day care** while you are at work. (**Important!** This account is **not** for health care expenses.) The contribution limit for 2026 is $7,500 (or $3,750 if you're married and filing separate tax returns). (Note: Your DCSA contribution election from 2025 will not roll over to 2026; you must make a selection when enrolling in your 2026 benefits.)
- Through Citi's Transportation Reimbursement Incentive Program, you can also make tax-free contributions to a transit or parking account, which can help you save money on your commute to work. You can enroll at any time during the year.

For Spouses/Partners

Note to Citi Employees

The information in this section is intended for your spouse/partner. Please ask your spouse/partner to review this material, so you can both evaluate which coverage — Citi coverage or other employer-sponsored coverage — provides the most value to you and your family.

As the spouse or partner of a Citi employee, you have the chance to think about your current benefits and help select the ones you want for the 2026 plan year. Make sure to review this year's changes. This year's Annual Benefits Enrollment period is **October 6 – 24**.

Compare Your Options

If you have access to another employer plan other than Citi, consider which plan provides the most value. Compare Citi health plans to your employer's offerings, as well as the cost of enrolling separately in "employee only" coverage through your employer's plan with the cost of spouse/family coverage through Citi. Also, find out what's changing with Citi benefits for 2026.

If your employer's annual enrollment period occurs **after October 24, 2025**, use the information available to you to make the best decision for your family's needs. When you become eligible to enroll in benefits with your employer, you can compare your options and change your Citi coverage at that time.

If you enroll under your employer's plan, contact the **Citi Benefits Center** via ConnectOne at **1 (800) 881-3938**, (9 a.m. to 6 p.m. ET, Monday through Friday, excluding holidays) within 31 days after you enroll. You'll be able to drop your Citi coverage to avoid paying for more coverage than you need. For more details on changing coverage, review the Benefits Handbook. If you have children, compare your options to determine the best way to cover them, whether through Citi benefits or your employer.

Take the Health Assessment Between October 1 and November 14, 2025

If you're enrolled in a Citi medical plan, you can take the Health Assessment through Personify Health to earn an additional $100 discount on Citi medical coverage costs. To get started, register on the Personify Health website or through the Personify Health app:

- Download from the Apple Store
- Download from Google Play

Use sponsor name "Citi" when registering on the app.

Ready to Enroll

Take action between **Monday, October 6** and **Friday, October 24** to have the Citi benefits coverage you want in 2026. Your enrollment deadline is 8 p.m. ET on October 24, if you enroll through a Citi Benefits Center representative, or 11:59 p.m. ET on October 24 if you enroll online.

You have two ways to make your benefits elections:

Online

Make your elections and verify and/or add covered family members by visiting Your Benefits Resources (YBR™), available through My Total Compensation and Benefits. As you enroll, you'll be supported with built-in decision tools within Your Benefits Resources (YBR™) that will help guide you to the benefits that best match your needs.

By Phone

If you prefer, you may enroll by phone. Call the **Citi Benefits Center** via ConnectOne at **1 (800) 881-3938**, 9 a.m. to 6 p.m. ET, Monday through Friday, excluding holidays. From the "benefits" menu, select the "health and insurance benefits as well as TRIP and spending accounts" option. If you're outside the United States or Puerto Rico, call **1 (469) 220-9600**.

Note: All family members must be listed as a covered dependent under each individual plan. When enrolling by phone, you must ask a Citi Benefits Center representative to "cover" each dependent.

Review Your Confirmation

After you enroll, you will receive a confirmation statement by email, with a hard copy sent by mail in December. Be sure to carefully review these and contact the **Citi Benefits Center** via ConnectOne at **1 (800) 881-3938** as soon as possible if you notice any errors.

This confirmation statement (as well as any new health plan ID cards) will be mailed to your home address, as reflected in Citi records. **Make sure your address is up-to-date** in Workday, which you can access via Citi For You.

Reminder: Take Your Health Assessment by November 14, 2025

You'll pay **$100 less** in 2026 paycheck deductions for your medical coverage if you take the Health Assessment between **October 1, 2025 and November 14, 2025** — plus, you'll learn valuable information about your medical status. Your spouse/partner who enrolls in a Citi medical plan can earn a $100 reduction, too.

Employees who don't enroll in a Citi medical plan can still take the Health Assessment to learn more about their health status and earn $100 in Live Well Rewards that can be redeemed for gift cards on the Personify Health platform.

To access the Health Assessment, you and your spouse/partner, as applicable, must register with Personify Health. Employees may register through My Total Compensation and Benefits using the **Live Well Rewards/Health Assessment** link. Your spouse/partner may sign up for an account on the Personify Health website or through the Personify Health app:

- Download from the Apple Store
- Download from Google Play

Use sponsor name "Citi" when registering on the app.

Once you register, you can even take the Health Assessment right from your smartphone with the Personify Health app!

What Happens If You Don't Enroll?

Here's what will happen if you don't take any action before Annual Benefits Enrollment ends on **October 24**:

You'll Be Automatically Enrolled in Your Current Coverage

You'll be automatically enrolled in the same benefits at the same coverage levels as you have now, **with a few exceptions**:

- If you're currently enrolled in the Cigna Dental HMO and the Aetna Dental HMO is available for you, you will be defaulted into the new Aetna Dental HMO. If the Aetna Dental HMO is not available for you, you will be defaulted into the MetLife Dental Plan.
- If you're currently contributing to a Spending Account (HCSA/LPSA or DCSA), your contributions will not automatically continue if you don't make an election for 2026.
- Please note that your Vacation Purchase Program elections from 2025 do not carry over to 2026.

You'll Pay a Tobacco Penalty

If you're currently enrolled in a Citi medical plan and don't make any elections or take any action during Annual Benefits Enrollment, you'll pay the tobacco penalty for the 2026 plan year, regardless of whether or not you use tobacco products. This applies to your spouse/partner as well, if they are covered by a Citi medical plan.

If you don't use tobacco and want to avoid the tobacco penalty, complete the Tobacco Free Attestation by the Annual Benefits Enrollment deadline (October 24, 2025) by visiting Your Benefits Resources (YBR™), available through My Total Compensation and Benefits. You'll see the attestation right before you go to enroll in a medical plan.

Citi is committed to helping you achieve your best health. If you do use tobacco products and want to avoid the tobacco penalty or receive a refund on paid penalties, complete the Live Well Tobacco Cessation Program by December 31, 2025.

Contact Personify Health at 1 (855) 814-5595 to learn more.

Your Health Savings Account (HSA) Contributions Won't Begin on January 1, 2026

Any 2025 plan year HSA contribution elections will **not** carry over into 2026.

You **must** make your 2026 plan year HSA contribution election by the Annual Benefits Enrollment deadline for your contributions to take effect on January 1. However, you can enroll in or change your contribution to the HSA at any time during the 2026 plan year.

To qualify for Citi's entire contribution (up to $300 for employee only coverage or up to $600 for all other coverage categories), everyone who enrolls in the High Deductible Plan with HSA for 2026 must accept the terms and conditions of the HSA by December 31, 2025.

Note: Delays in establishing your HSA and accepting the terms and conditions may limit Citi's contribution to your HSA.

You'll Miss the Chance to Enroll in New Benefits for 2026

In order to change the benefits you have now or enroll in new benefits that you're not already enrolled in, you **must take action between October 6 and 24, 2025**. You cannot enroll in benefits or add new dependents to your benefits outside of Annual Benefits Enrollment, unless you have a qualifying life event — this includes benefits like MetLife Legal Plans and the Vacation Purchase Program. Certain benefits like the Transportation Reimbursement Incentive Program (TRIP), Long-Term Disability (LTD) and Group Universal Life (GUL) can be elected at any time, but there are evidence of insurability (EOI) and other rules that may apply.

Making Benefits Changes Outside of Annual Benefits Enrollment

As a reminder, in addition to Annual Benefits Enrollment, you may become eligible to change your benefit elections during the year if you experience a life event, special enrollment right, or coverage event that gives rise to a qualified change in status. Review the Making Benefits Changes page for more information.

Update Your Beneficiaries

Annual Benefits Enrollment is a great time to review and update your beneficiaries for life and/or AD&D insurance, the Citi Retirement Savings Plan and Health Savings Account (HSA), if applicable.

Reminders

Review the reminders below to see how you can get the most value from your Citi benefits now and throughout the year — no need to wait for 2026.

Use Your Medical Plan's Free Perks

Your Citi medical coverage helps you spend less and live well. Simply by being a member of an Aetna or Anthem plan, you get the following **at no cost to you**:

- **In-network preventive care**, giving you access to routine check-ups, vaccinations, health screenings and cancer screenings at no cost each calendar year.
- **Convenient medical care** at MinuteClinic and HealthHUB centers (available in select CVS pharmacies), giving you a no-cost* treatment option for minor conditions like ear infections, rashes, minor burns and cold or flu symptoms.
- **No-cost virtual physical therapy** for at-home treatment of muscle, back or joint pain.
- **Specialized support** for chronic or serious health conditions, like diabetes, cancer, heart disease, asthma and more.
- **Fertility support** and personalized guidance throughout your journey to parenthood. (Treatment costs apply based on your medical plan's design.)
- **Personalized support from your Citi Health Concierge**, who can help you find a doctor, estimate costs, connect with needed resources, understand claims, and much more.

Watch this video to learn more.

*If you're covered by the In-network Only Plan or Choice Plan, many MinuteClinic and HealthHUB services are free. For High Deductible Plan with HSA members, you pay $0 **after** meeting the plan deductible. For all plans, any associated covered lab tests will be reimbursed at standard cost, subject to plan approval.

Earn Financial Rewards for Healthy Actions

The Live Well at Citi Program offers a variety of free resources and activities to help you and your family enjoy a healthy life — and you'll be rewarded for your efforts!

You can earn Live Well Rewards each year between October 1 and September 30. Spouses/partners enrolled in a Citi medical plan can also earn Live Well Rewards, too. Altogether, your annual Live Well rewards could add up to more than $400 in value! Learn more.

Take Care of Your Mental Health

To make it easier for you to find the right care for your family's mental health, our Aetna or Anthem medical plans offer expanded options for in-network mental health providers. Search online by logging into your Aetna or Anthem account or call your Citi Health Concierge for assistance. You have access to psychiatrists, psychologists, therapists and professionals who specialize in specific conditions, such as an eating disorders and depression.

Make Smart Health Care Choices

Review our Health Care 101 guide to learn about the value of preventive care, how to find the best medical care option for your needs and more helpful tips.

Get an Expert Second Opinion Through 2nd.MD

As a reminder, you now have access to 2nd.MD (which replaced Included Health) for free expert review of diagnoses and treatment plans to help you make confident health care decisions. Learn more.

Keep Fit with Help from Citi

Citi recently introduced more options for free or low-cost fitness support. From free digital subscriptions to discounted gym memberships and on-site fitness centers at certain Citi locations, you can choose to pursue your fitness goals your way. Learn more.

Submit Your Supplemental Health Claims for 2025

If you're enrolled in the Accident, Critical Illness, and/or Hospital Indemnity Insurance plan, remember that you must file your own claims for benefits — your doctor or health care provider will not do it for you. Submitting a claim for cash benefits from your supplemental health plan is easy using the member portal or the My Aetna Supplemental mobile app.

Review your plan details for applicable claims filing deadlines. We recommend filing claims within the same year that you receive an eligible diagnosis and/or eligible health care services.

Federally Required Compliance Notice About Hospital Indemnity Insurance

IMPORTANT: This is a fixed indemnity policy, NOT health insurance. This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- Visit HealthCare.gov or call **1-800-318-2596** (TTY:**1-855-889-4325**) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.

Your Privacy Matters

Citi Benefits are designed to provide for your privacy and to comply with all federal and state privacy laws, including the Health Insurance Portability and Accountability Act of 1996, as amended (HIPAA), as applicable.

Any Protected Health Information ("PHI") and/or electronic PHI, as defined under the HIPAA privacy and security rules, related to the applicable Citi Benefits program is maintained by third-party vendors, providers and isn't maintained on Citi data systems. All information provided through Citi Benefits is available for review by you, your doctors, and other health care professionals. Safeguards have been implemented to prevent your PHI or electronic PHI from being seen by or shared with other people. No Citi employee should see your PHI or electronic PHI. Citi will receive aggregate reports to review the performance of Citi Benefits.

By enrolling in Citi Benefits, you consent to the terms and conditions of the applicable plan or program, and they may be amended from time to time.

For purposes of this guide, "Citi" refers to Citigroup Inc. and its subsidiaries and their affiliates. This guide briefly summarizes certain key features of Citi benefits for eligible employees and their dependents, and is treated as a Summary of Material Modifications under the Employee Retirement Income Security Act of 1974, as amended.

If there's any conflict between this guide, or any written or oral communication by a person representing the plans or programs, and the plan or program documents (including any related insurance contracts), the terms of the plan or program documents (including any related insurance contracts) as interpreted in the sole discretion of the plan or program administrator or will be followed in determining your rights and benefits under the plans or programs.

This guide is neither a contract of employment nor a guarantee of continued employment for any definite period of time. Your employment is always on an at-will basis. Citi may change or discontinue at any time, and for any reason in its sole discretion, any or all of the benefits coverage described in this guide.

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