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**To:                    Teammates / Spouses**

**Re:                    Wellness Program – Open Enrollment 2026**

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**PLEASE READ THROUGH THIS INFORMATION CAREFULLY AND KEEP IT FOR FUTURE REFERENCE. YOU ARE RESPONSIBLE FOR COMPLETING ALL OF THE REQUIREMENTS PRIOR TO OBTAINING A PREFERRED RATE.**

**YOU MUST COMPLETE ALL STEPS OF THE PROGRAM BY APRIL 30, 2026!**

All Teammates who become eligible for health insurance pay the standard premium contribution rate upon enrollment.

Team Fishel allows eligible Teammates and their eligible spouses (those who are to be enrolled in the Team Fishel Health Plan) to complete a mid-year screening during Open Enrollment to try and qualify for a preferred rate. This individual screening is paid for by the Teammate. The cost of this screening is currently \$189.00\* and is **subject to change**.

Effective immediately, the following procedures shall apply to mid-year screening requests during Open Enrollment.

1. A Teammate must be eligible to enroll in Team Fishel's health insurance plan, and must be enrolling during Open Enrollment.
2. If a spouse wishes to participate in the program, the Teammate must have submitted a health insurance enrollment form indicating his/her intent to enroll the spouse as a dependent for health insurance purposes during Open Enrollment.
3. The Open Enrollment mid-year screening is only for those Teammates and spouses who did not participate in the annual screening clinic in 2025 or in a mid-year screening since then.
4. The request for a mid-year screening must be made in writing by the Teammate via completion of a Wellness Program Participation Agreement. No screening orders will be processed without a signed form.
5. The Teammate will be subject to the standard rate as of the effective date of coverage, April 1, 2026, until the completion of all program requirements (biometric screening, HRA completion and ROF call completion). If a Teammate (and/or spouse, if applicable) does not complete all requirements until after the Teammate's effective date of coverage, there will be no back credit of premium if it is determined that a Teammate is eligible for a preferred rate.
6. The payment for a mid-year screening will be initiated once the screening has been completed. All charges will be paid by payroll deductions in \$50 weekly increments until the balance is paid. If a Teammate wishes to make other arrangements regarding

payment, he/she must contact the Corporate Human Resources Department before signing the Wellness Program Participation Agreement.

6. Once the request is made and a mid-year screening is scheduled, the Teammate will be responsible for any cost associated with the screening. Please understand there is very little flexibility in rescheduling a screening once it is scheduled, without the Teammate incurring a cost. Once the screening request is made, the Teammate will receive communication from HealthCheck360 within 7 business days on how to schedule their screening appointment. Scheduling will take place through the HealthCheck360 portal or Teammates and spouses may call HealthCheck360 for assistance.
7. Once a Teammate (and/or spouse, if applicable) completes the biometric screening portion of the program, he/she must complete the Health Risk Assessment, which will be available 5-7 business days after the screening date. This survey MUST be completed online.
8. All first year participants in the wellness screening must also complete a Review of Findings call with a HealthCheck360 health coach in order to be eligible for a preferred rate. The Teammate (and/or spouse) is responsible for contacting HealthCheck360 at 1-866-511-0360 to complete this call. They will need to identify themselves as a Team Fishel Teammate, or a spouse of a Teammate, who needs to complete their Review of Findings call with a health coach. The HRA Survey needs to be complete before this call can take place.
9. Once all 3 components of the program have been completed, and the Teammate (and/or spouse) has met the requirements for the preferred rate, he/she will need to notify Brooke Pitzer at HealthCheck360 by emailing [Brooke.Pitzer@HealthCheck360.com](mailto:Brooke.Pitzer@HealthCheck360.com). After verification, HR will be notified by HealthCheck360 to change the Teammate's rate. No back credit of premium will be given if the requirements are met after the Teammate's effective date of coverage. Teammates who do not meet the highest incentive level have another opportunity to do so through a Reasonable Alternative. To learn more about your options, you can call HealthCheck360 at 1-866-511-0360.
10. In order to continue to qualify for the preferred rate after August, you must complete another screening at the annual screening clinic in August as a repeat participant.
11. Any screening requests made after March 31, 2026 will not be processed.

*\*Add 25% surcharge if located in California or Washington DC area.*