

oro™

Benefits Guide

January 1 - December 31, 2027

U.S. Employees



Welcome to your 2027 Oro Benefits Guide!

As we continue building Oro and shaping the future of mobility, one thing remains constant: our commitment to our people.

The work we're doing together is ambitious. We're creating a company designed to move faster, think differently, and unlock new possibilities in mobility. None of that happens without an exceptional team. That's why we're committed to providing benefits that support you and your family, help you thrive personally and professionally, and enable you to bring your best self to work every day.

As you review this guide and prepare for Open Enrollment, we want to provide clarity about what lies ahead. In 2027, Oro employees will continue to participate in the Hertz benefit plans, providing continuity, stability, and access to the comprehensive coverage and resources you know today. This approach allows us to remain focused on executing our strategy, growing our business, and investing in the future while ensuring uninterrupted support for our team.

Looking beyond 2027, we view benefits as an important part of the employee experience we are building at Oro. As our company evolves, we will continue listening, learning, and refining our programs to ensure they meet the needs of our workforce and reflect the culture and values we aspire to create. Our goal is not simply to maintain benefits, but to thoughtfully develop an offering that supports our people throughout every stage of their lives and careers.

We encourage you to take time to review your options carefully and select the benefits that best support your needs. Whether you're focused on your health, financial well-being, retirement planning, or supporting your family, these programs are here to help you succeed both at work and beyond.

You'll also continue to have access to resources available to all employees, including SupportLinc, our Employee Assistance Program, and Perks at Work, our employee discount marketplace. These programs reflect our belief that well-being extends beyond healthcare and includes the tools, support, and flexibility people need to navigate everyday life.

As healthcare costs continue to rise across the country, we remain committed to balancing affordability with long-term sustainability. While some premiums will increase modestly in 2027, our focus remains on delivering competitive, meaningful coverage that provides value for you and your family while preserving the strength of our programs for years to come.

Most importantly, we want every employee to feel empowered to play a role in Oro's future. The company we're building will be shaped by the talent, ideas, and dedication of our team. As we grow, your feedback, experiences, and perspectives will help inform how we continue to invest in our people and strengthen the employee experience.

Thank you for everything you do to serve our customers, support one another, and help shape the future of mobility. We are excited about the road ahead and grateful to be building it together.

Doria Holbrook
CEO, Oro Mobility





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Oro Hawaii Employees

Look for this icon throughout the guide to see benefits available only to employees in Hawaii.



Scan the QR code to access the guide in Spanish.

Escanea el código QR para acceder a la guía en español.

Medicare Part D Notice

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please contact the Total Rewards team for more details.

Depending on your employment classification, or if you are covered by a collective bargaining agreement, some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.





Enrollment

When to Enroll

How to Enroll

Who Can Enroll

Help Enrolling

Enrollment

When to Enroll

There are certain times you may enroll or modify your benefits:

- » **Open Enrollment:** Open Enrollment for 2027 benefits is **Sunday, November 1, 2026 – Sunday, November 15, 2026**. This is your opportunity to change your benefits, select new benefits, and update your contact information and beneficiaries.
- » **New Hire Enrollment:** If you've just been hired, you have **30 days** from your hire date to enroll in most benefits. Visit hertzbenefits.com/new-hires and use the coverage calculator to see when your benefits will begin. Some additional Hertz benefits, like car discounts, have different date requirements. Please read this guide to learn more.
- » **Status Change:** If your employment status changes, you can reach a Hertz Benefits Specialist by calling **800-654-3373** and selecting Option #3 - to confirm your eligibility.
- » **Qualifying Life Events:** Outside of New Hire Enrollment, status change or Open Enrollment, you can't change your benefits unless you experience a qualifying life event (QLE) like marriage, divorce, birth, adoption, death, loss of dependent status, or loss of coverage. If you have a QLE, you must make changes within **31 days** after the event date by logging on hertzbenefits.com.

How to Enroll

Ready to enroll? Let's go! Start at hertzbenefits.com. Click **Log In** at the top of the page and then **Enroll/Review Benefits**. Then select **Start Here** in the main banner.



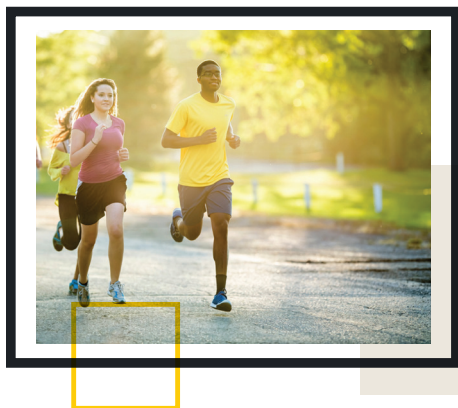
First time?

You'll need to register. Click **Register** under **First Time Here**. Enter the company key "Hertz", your employee ID number and your date of birth. Once you've registered, you can create your own username, password and security questions.

The enrollment system will walk you through each benefit category and allow you to review the costs and other options. When you've made your selections and double-checked your information, click **I Agree** to confirm your elections. You'll know you're done when you see a confirmation number.

Access your benefits information on the go with the MyChoice® benefits app!

Available on both the Apple App Store and Google Play, you can review your plan details, see and change your beneficiaries, upload documents, access your ID cards, and chat 24/7 for help.



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Eligibility

Who Can Enroll

You're eligible for benefits if you are regularly scheduled to work at least 30 hours per week and meet certain work hour requirements. If you're benefit-eligible, you may also add eligible dependents to certain plans. Eligible dependents include your spouse/domestic partner and/or children under age 26 — including natural and adopted or foster children, legal stepchildren, and children for whom you have legal custody or are required to provide coverage under a court order.*



Hertz Hawaii Eligibility

Oro employees in Hawaii who are regularly scheduled to work at least 20 hours per week become eligible for benefits on the first day of the month following four consecutive weeks of employment.

Dependent Verification

After you enroll new dependents, you will be asked to provide certain paperwork to verify their eligibility. It will include items such as a marriage license, proof of current financial responsibility, birth certificate, etc. It's important to know that forging information has consequences, including cancellation of dependent coverage and disciplinary action that could include termination.

Help Enrolling

Hertz Benefits Specialist

We understand enrolling isn't always simple, so you may have questions or need help. Hertz Benefits Specialists can answer your questions or even complete your enrollment with you at **800-654-3373**, Option 3. Hertz Benefits Specialists are available from 9:00 a.m. to 6:00 p.m. ET (8:00 a.m. to 5:00 p.m. CT), Monday through Friday. Press "3" to speak to a Hertz Benefits Specialist.

AskHR

If any of your personal information appears to be incorrect within the benefits system and for information on some benefits programs, such as Tuition Reimbursement and Car Discounts, please contact AskHR. AskHR is available to help from 9:00 a.m. to 6:00 p.m. ET (8:00 a.m. to 5:00 p.m. CT), Monday through Friday by calling **800-654-3373**.

Union Benefits

Questions regarding any Union benefits can be directed to unionbenefits@hertz.com. Employees may have a combination of Hertz and/or Union benefits eligibility.

*Please note, this is an overview of eligibility. For complete details refer to the summary plan description.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.



Health Benefits

Medical and pharmacy coverage

Medical and Pharmacy
Coverage for Hawaii Employees

Dental Coverage

Vision Coverage

Medical Coverage

Three Great Options

We offer three medical plans administered by UMR, so you can pick the best fit for you and your family! To find an in-network doctor, visit HealthyHertz.com and select **find a provider**. Type **UnitedHealthcare Choice Plus** into the search box.

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PPO Plan

This plan has a higher premium but a lower deductible, so the insurance starts paying sooner. If you prefer predictable medical expenses, this plan may be the right option for you. It can pair with a health care flexible spending account (HCFA).

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CDHP

This plan has a lower premium but a higher deductible, so you pay less out of each paycheck for coverage. This plan is generally the best value for the average person, with its lower per paycheck costs, the Hertz health savings account (HSA) contributions, as well as a reasonable deductible and out-of-pocket limits.

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Copay Plan

This plan is a low-cost, high-quality medical plan, with copays for office visits and prescriptions. It has the advantage of being the lowest cost option of the three plans, while providing the predictability of copays. It can pair with a health care flexible spending account (HCFA).



Hertz Hawaii Employees

See [page 9](#) for information on the medical and pharmacy plans available in Hawaii.

Breaking Down the Jargon

- » **Rate or Premium:** Like your 12-month gym membership, this is the base amount you pay every month for healthcare coverage, even if you don't use it.
- » **Deductible:** The amount you pay in medical expenses before the insurance company will cover any benefit costs for the year. There are two types of deductibles in the Hertz Plans:
 - ◆ **Embedded:** Each family member has an individual deductible, while the family also has a combined deductible. Each person gets their benefits as soon as they meet their individual deductible, no matter what the family total is.
 - ◆ **True Family:** This means that a family can meet the deductible by combining deductible expenses. There is no limit to the amount one member can pay towards the family deductible.
- » **Out-of-Pocket Maximum:** The most you would possibly pay for covered services in a year. Once you reach your out-of-pocket maximum, your plan covers all eligible expenses.
- » **Coinsurance:** The cost share between you and the insurance company. Coinsurance is always a percentage totaling 100%. For example, if the plan pays 80%, you are responsible for paying the remaining 20% of the cost.
- » **Copay:** A flat fee paid to your provider at the time of service, kind of the price to get in the door. You may spend more once you're there if your doctor recommends blood tests, etc. The copay covers the core services included in the office visit.
- » **In-Network:** Providers in the network have agreed to charge discounted rates for services when you use them, which means you save money automatically. If you go to an out-of-network provider, they can charge you more and the insurance may cover less of the costs.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Medical Coverage

Medical Plans

DEDUCTIBLE & OOP MAX



	PPO Plan		CDHP		Copay Plan	
	In-Network	Out-of-Network	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
	Embedded Deductible		True Family Deductible		Embedded Deductible	
Hertz HSA Funding						
Individual	Not available		\$250 deposited in January and July		Not available	
Employee + 1	Not available		\$500 deposited in January and July		Not available	
Family	Not available		\$500 deposited in January and July		Not available	
Deductible						
Individual	\$1,000	\$3,000	\$2,400	\$4,800	\$4,500	\$9,000
Employee + 1	\$2,000	\$6,000	\$4,800 maximum	\$9,600 maximum	\$9,000	\$18,000
Family	\$4,000	\$12,000	\$4,800 maximum	\$9,600 maximum	\$9,000	\$18,000
Out-of-pocket Maximum						
Individual	\$4,000	N/A	\$4,000	\$8,000	\$6,550	\$13,100
Employee + 1	\$8,000	N/A	\$8,000	\$16,000	\$13,100	\$26,200
Family	\$12,000	N/A	\$8,000	\$16,000	\$13,100	\$26,200
Benefits						
PCP office visit	\$35 copay	50% after deductible	\$30 copay after deductible	50% after deductible	\$40 copay	50% after deductible
Specialist office visit	\$50 copay	50% after deductible	\$50 copay after deductible	50% after deductible	\$80 copay	50% after deductible
Emergency Room	\$250 copay and 80% after deductible		After deductible, \$250 copay and 80%		\$300 copay	
Other services	80% after deductible	50% after deductible	80% after deductible	50% after deductible	70% after deductible	50% after deductible



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Medical Coverage

Medical and Pharmacy Premiums

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
PPO PLAN				
Bi-Weekly Rates	\$194.27	\$452.66	\$369.17	\$658.76
Weekly Rates	\$97.14	\$226.33	\$184.58	\$329.38
CDHP				
Bi-Weekly Rates	\$104.78	\$243.87	\$199.09	\$354.72
Weekly Rates	\$52.39	\$121.94	\$99.55	\$177.36
COPAY PLAN				
Bi-Weekly Rates	\$52.70	\$134.46	\$109.32	\$195.58
Weekly Rates	\$26.35	\$67.23	\$54.66	\$97.79

Quantum Health Care Coordinators

If you enroll in a UMR medical plan, you will have access to Quantum Health and its many service offerings.



Your Dedicated Support Team

Healthcare can be a difficult and costly journey that no one should have to navigate alone. Quantum is with you every step of the way. Think of your Quantum Health Care Coordinators as your personal team of nurses, benefits experts and claims specialists who will do whatever it takes to help you with your unique healthcare needs. Each time you contact a Care Coordinator, you'll talk to a real person who understands your benefits and knows how to navigate the healthcare system.

From replacing ID cards to more complicated matters, like claim resolutions, no request is too big or small for your Care Coordinators. Empowered and resourceful, Care Coordinators do things like:

- » Get answers to claims, billing and benefits questions
- » Find in-network providers
- » Verify coverage and get prior approval if needed
- » Contact providers to coordinate your treatment
- » Review your care options
- » Replace ID cards

Claims Solutions

Quantum can break down even the most complex claim so you always know exactly what has been paid and what is due. If you believe a claim has been unfairly denied, Quantum will do the research and either resolve it on your behalf or explain why it was denied.

Benefits Experience

Figuring out what is or is not covered by your plan can be confusing. Your Care Coordinators know your benefits from top to bottom. When you have questions, call Quantum. You may have benefits you're not even aware of.

To contact your Care Coordinators, call **877-674-3045**, chat on the Quantum Health app, or visit HealthyHertz.com.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Minimum Essential Coverage

And Limited Benefit Indemnity Coverage

A Limited Benefit Indemnity plan provides you and your family basic medical and prescription drug benefits to help cover minor medical services. Benefits under this plan are limited therefore the plan should not be considered comprehensive major medical coverage like the PPO, CDHP and Copay Plans. Learn more about this plan to ensure you elect the best choice for you and your family. MEC is minimal essential coverage that provides Preventive Care services to help identify potential health risks for early diagnosis and treatment. **Out of network benefits are not covered. To locate in-network MEC providers, visit boongroup.com.**

Boon SmartMEC Plan (In-network only)	
Preventive Coverage	
Coverage satisfies the individual mandate as defined in the Affordable Care Act	Covered at 100% in-network; no copay, deductible, or coinsurance
Prescription Coverage	
Generic indemnity payment	\$20 per day
Preferred brand indemnity payment	\$40 per day
Calendar year maximum	2 generic prescriptions per month
Telemedicine	
Telemedicine program (provided by HealthiestYou)	Included, no copay
Limited Benefit Indemnity Coverage – Office Visits	
Doctor's office visit (includes urgent care visits)	\$80 per day (6 days per calendar year maximum)
Limited Benefit Indemnity Coverage – Outpatient X-Ray And Lab	
Outpatient diagnostic labs (blood work, glucose test, urinalysis and others)	\$15 per day (2 days per calendar year maximum)
Outpatient select diagnostic testing (includes x-rays, ultrasound, EEG and others)	\$75 per day (1 day per calendar year maximum)
Outpatient advanced studies (CT Scan, MRI, and others)	\$300 per day (1 day per calendar year maximum)
Emergency room	Not covered
Surgery benefits (inpatient/outpatient)	Inpatient: \$1,000 per day (1 day per calendar year maximum) Outpatient: \$500 per day (1 day per calendar year maximum) Outpatient minor: \$100 per day (1 day per calendar year maximum)
Hospital confinement (if less than 24 hours)	\$250 per day (31 days per confinement maximum)
Hospital confinement (if greater than 24 hours)	\$2,500 per day (1 day per confinement maximum)
Life and Accidental Death And Dismemberment*	
Employee Life and AD&D	\$10,000
Spouse Life and AD&D	\$5,000
Child Life	\$2,500

* Not COBRA Eligible

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Minimum Essential Coverage

Frequently Asked Questions

- » **How do I find an in-network provider?** To locate in-network physicians or hospitals call **1-866-831-0847** or visit boongroup.com.
- » **Who do I call if I need help with a claim?** You can reach a Boon member advocate at **1-866-831-0847**.
- » **What does Limited Indemnity benefit coverage mean?** A Limited Indemnity plan provides you and your family basic medical and prescription drug benefits to help cover minor medical services. Benefits under these plans are limited therefore the plan should not be considered comprehensive major medical coverage like the PPO, CDHP and Copay Plans.
- » **What is an indemnity prescription benefit?** Instead of paying out-of-pocket for co-pays, your indemnity prescription plan will pay a fixed dollar amount per day for a maximum number of days per year. In addition, your indemnity benefit is not limited to formulary restrictions.
- » **What if the cost of my prescription is greater than the per day benefit amount?** You will be responsible for any costs above the per day benefit amount at the pharmacy.
- » **Can I have an example of how the plan works?** Under the SmartMEC Plan, Boon will pay up to \$80 for a illness visit to the doctor. If the doctor bill is \$100, you will be responsible for the \$20 difference. If the doctor bill is \$70, Boon will send you a check for the \$10 difference. You may visit the doctor 6 days per calendar year for this benefit. Any visits over 6, you will be responsible for the full cost of the visit.

Premiums

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
SmartMEC Plan				
Bi-Weekly Rates	\$38.29	\$97.52	\$86.12	\$147.48
Weekly Rates	\$19.15	\$48.26	\$43.06	\$73.74



HealthiestYou By Teledoc

No one likes to leave home when they aren't feeling well. With telemedicine, you don't have to. If you enroll in a minimum essential coverage medical plan, you can speak with a doctor anytime, anywhere through HealthiestYou by Teledoc.

- » **How much does a consultation cost me?** A consultation with a telemedicine provider is free if you enroll in a minimum essential coverage medical plan.
- » **How do I communicate with the telemedicine provider?** You can connect with a provider by visiting healthiestyou.com or through the HealthiestYou app.

HealthiestYou is designed to complement, and not replace the care you receive from your primary physician. HealthiestYou physicians are an independent network of doctors who advise, diagnose, and prescribe at their own discretion. Physicians provide cross coverage and operate subject to state regulations. Physicians in the independent network do not prescribe DEA controlled substances, non-therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. HealthiestYou does not guarantee that a prescription will be written.

IMPORTANT: Minimum Essential Coverage is offered under a self-funded plan maintained by the plan sponsor. Limited Benefit Indemnity and RX Indemnity are issued by Boon. The plan will not pay benefits for any care provided prior to the coverage effective date or if the insured is confined in a hospital at the time the coverage is effective. Hospital does not include a nursing home, convalescent home or extended care facility. THE LIMITED BENEFIT INDEMNITY PLAN ALONE DOES NOT CONSTITUTE COMPREHENSIVE HEALTH INSURANCE COVERAGE (MAJOR MEDICAL COVERAGE) AND DOES NOT SATISFY THE REQUIREMENT OF MINIMUM ESSENTIAL COVERAGE UNDER THE AFFORDABLE CARE ACT.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Pharmacy Benefits

If you enroll in a Hertz medical plan, you'll automatically have prescription drug coverage through OptumRx. To save the most while filling prescriptions, use a pharmacy in the OptumRx network. You can search for an in-network pharmacy and look through the current Prescription List by going to optumrx.com.

	PPO Plan	CDHP	Copay Plan
	In-Network	In-Network	In-Network
	Embedded Deductible	True Family Deductible	Embedded Deductible
Retail pharmacy (30-day supply)			
Generic	80%, \$10 min/\$100 max	80% after deductible, \$15 min/\$100 max	\$10 copay
Brand name	75%, \$30 min/\$160 max	75% after deductible, \$40 min/\$160 max	\$60 copay
Non-preferred brand name	70%, \$75 min/\$225 max	70% after deductible, \$80 min/\$225 max	\$120 copay
Mail order pharmacy (90-day supply)			
Generic	80%, \$20 min/\$200 max	80% after deductible, \$30 min/\$200 max	\$20 copay
Brand name	75%, \$60 min/\$320 max	75% after deductible, \$80 min/\$320 max	\$120 copay
Non-preferred brand name	70%, \$150 min/\$450 max	70% after deductible, \$160 min/\$450 max	\$240 copay

Specialty Pharmacy Program

Certain medications must be filled through Optum Specialty Pharmacy. If you are prescribed a specialty medication, call **877-838-2907** to enroll in the program. The program also provides home delivery for certain medications and live video consultations with clinicians who can help you find affordable access to your medication.

Rx Savings Solutions

Rx Savings Solutions (RxSS), a free and confidential service, connects to your Hertz medical plan to show you all the lower-cost options you have for your medications. RxSS doesn't replace your OptumRx prescription plan. It's a complementary program designed to help you and your family save money on your prescriptions.

To enroll, visit myrxss.com or download the Rx Savings Solutions mobile app to access your free account. Questions? Call **800-268-4476** Monday through Friday, 8 a.m. to 9 p.m. ET, or email support@rxss.com.

Maintenance Prescription Program

For medications you take on an ongoing basis, the Walgreens90 program makes refills more convenient by giving you access to a 90-day supply at Walgreens or through Optum Home Delivery. Fewer refills can mean less hassle, and you may save money, too.

Your plan allows a limited number of 30-day retail fills. After those are used, you'll need to fill a 90-day supply through Walgreens or Optum Home Delivery to avoid potentially paying the full cost of your medication.

Ready to make the switch? Visit optumrx.com to learn more or get started.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.



Medical and Pharmacy Coverage for Hawaii Employees

Two Great Options

We offer two medical and pharmacy plans through Kaiser Permanente so you can pick the best fit for you and your family! For additional information, visit my.kp.org or call **800-966-5955**. Your costs are based on a percentage of your salary. To review updates to the plan design and rates, please refer to the enrollment system and your Summary of Benefits.

Kaiser Permanente (KP) HMO

With this plan, you can only see in-network KP providers and pharmacies. This plan also has a higher out-of-pocket maximum.

Kaiser Permanente (KP) POS

With this plan, in-network KP providers and out-of-network providers and pharmacies are covered. However, you'll still save more money when you see a KP provider or pharmacy, and you'll have a deductible if you see an out-of-network provider.

Medical

	KP HMO	KP POS		
	In-Network	IN-NETWORK (PLAN PROVIDER)	IN-NETWORK (CONTRACTED PROVIDER)	OUT-OF-NETWORK
Deductible Employee Only/Family	\$0/\$0	\$0/\$0	\$0/\$0	\$100/\$300
Out-of-Pocket Maximum Employee Only/Family	\$2,500/\$7,500	\$2,000/\$6,000	\$2,000/\$6,000	\$2,000/\$6,000
Doctor's Office Visit	\$15 copay (adults 18+)	\$20 copay	20% of contracted rate	20% of allowable charge
Preventive Care	\$0 copay	\$0 copay	\$0 copay	\$0 copay
Emergency Room	20% of applicable charges	20% of applicable charges	20% of applicable charges	20% of applicable charges
Hospital Inpatient Services	20% of applicable charges, no deductible	20% of applicable charges, no deductible	20% of contracted rate	20% of allowable charge
Basic Laboratory and Imaging	\$15 copay per day	\$20 copay per day	20% of contracted rate	20% of allowable charge
Specialty Laboratory and Imaging (CAT scan, MRI, etc.)	20% of applicable charges, no deductible	20% of applicable charges, no deductible	20% of contracted rate	20% of allowable charge

Pharmacy

Benefit	KP HMO	KP POS		
	In-Network only	IN-NETWORK (PLAN PROVIDER)	IN-NETWORK (CONTRACTED PROVIDER)	Out-of-network
Retail pharmacy (30-day supply)				
Generic maintenance	\$3 copay	\$3 copay	20%, minimum \$10	Not Covered
Generic	\$10 copay	\$10 copay	20%, minimum \$10	Not Covered
Brand-name	\$45 copay	\$45 copay	20%, minimum \$45	Not Covered
Specialty	\$200 copay	\$200 copay	20%, minimum \$200	Not Covered
Mail order pharmacy (90 consecutive day supply)				
Generic maintenance	\$3 copay	\$3 copay	Not Covered	Not Covered
Generic	\$20 copay	\$20 copay	Not Covered	Not Covered
Brand-name	\$90 copay	\$90 copay	Not Covered	Not Covered
Specialty	N/A	N/A	Not Covered	Not Covered

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Dental Coverage

Hertz dental plans are offered through Cigna. Oro employees currently enrolled in the dental plans may view providers on the mycigna.com portal. Others, who may be enrolled in a spouse's plan or a new hire, should search for providers on the Cigna public website, cigna.com.

	Cigna Dental HMO	Plan B Full Dental PPO		Plan C Preventive Care Only
What You Pay	In-Network Only	In-Network	Out-of-Network ¹	In-Network or Out-of-Network ¹
Deductible	\$0	\$75	\$150	\$0
Diagnostic and Preventive Care (Exams, cleanings, and X-rays; Maximum 2 visits per plan year)	100%	100%	100%	100%
Basic Restorative Care (Fillings, extractions, and root canals)	To see your copay, check the Patient Charge Schedule on HertzBenefits.com	80%	70%	Not covered
Major Restorative Care (Crowns, bridges, and dentures)		50%	40%	
Orthodontia³		50%	40%	
Annual Maximum Benefit	No maximum	\$1,500	\$1,500	\$1,500

¹ If you use an out-of-network provider, you are responsible for any amount that exceeds the eligible expense as determined by Cigna Dental.

² The out-of-network deductible does not count toward satisfying the in-network deductible and the in-network deductible does not count toward satisfying the out-of-network deductible.

³ For the Hertz Dental Plan B, orthodontia is limited to dependent children up to age 19. The lifetime maximum benefit is \$1,500.

Dental Premiums

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Cigna Dental HMO				
Bi-Weekly Rates	\$3.49	\$7.50	\$6.97	\$11.51
Weekly Rates	\$1.74	\$3.75	\$3.49	\$5.76
Plan B — Full Dental PPO				
Bi-Weekly Rates	\$11.78	\$24.40	\$23.86	\$40.25
Weekly Rates	\$5.89	\$12.20	\$11.93	\$20.13
Plan C — Preventive Care Only				
Bi-Weekly Rates	\$2.90	\$5.99	\$5.76	\$9.84
Weekly Rates	\$1.45	\$3.00	\$2.88	\$4.92

Oral Health Integration Program

This program is for people with certain medical conditions that increase the risk of gum disease and cavities. Being under current treatment for the following medical conditions is required: heart disease, stroke, diabetes, maternity, chronic kidney disease, organ transplants, head and neck cancer radiation, rheumatoid arthritis, Sjögren's Syndrome, lupus, Parkinson's disease, amyotrophic lateral sclerosis (ALS), Huntington's disease, and opioid misuse and addiction. If you are eligible, the program will reimburse you for dental services that treat gum disease and tooth decay.

If you are eligible, you may be automatically enrolled in the program. To learn more about your eligibility and benefits, log in to mycigna.com, select **Review My Coverage**, then choose **Dental** from the drop-down menu. You may also contact customer service for assistance.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Dental Coverage for Hawaii Employees



Hertz Hawaii Dental Coverage

Hertz dental plans for Hawaii employees are offered through Hawaii Dental Service.

- » **Diagnostic and Preventive Care:** 100% covered, no deductible
- » **Basic Restorative Care:** 80% covered after deductible
- » **Major Restorative Care:** 50% after deductible
- » **Orthodontics:** 50% covered up to \$1,500 lifetime maximum for dependent children

To see what's covered and how to estimate the cost of care, visit hawaiidental-service.com or call **800-232-2533**.

Hawaii Dental Premiums

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Hawaii Dental Service				
Bi-Weekly Rates	\$10.32	\$21.69	\$19.62	\$33.04
Weekly Rates	\$5.16	\$10.84	\$9.81	\$16.52

Total Health Plus

Total Health Plus provides additional dental coverage for members with pregnancy, diabetes, cancer, oral cancer, stroke and heart problems, kidney failure, medical risk for cavities, organ transplants or Sjögren's Syndrome. If you are eligible, you may receive additional cleanings and in some cases fluoride treatments. Contact **808-529-9248** or visit hawaiidental-service.com for more information.



Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Vision Coverage

Hertz vision plan is offered through EyeMed for Mainland and Hawaii employees. To find an in-network provider, visit eyemed.com or call **866-939-3633**.

Vision Care Services	Your In-Network Cost
Exam with Dilation as Necessary (once every 12 months)	\$0 copay
Frames (once every 24 months) Any available frame at provider location	\$0 copay; \$140 allowance, 20% off balance over \$140
Standard Plastic Lenses (once every 12 months) <ul style="list-style-type: none"> • Single Vision • Bifocal • Trifocal or Lenticular • Standard Progressive Lens • Premium Progressive Lens 	\$10 copay \$10 copay \$10 copay \$75 See Premium Progressive price list
Contact Lens Fit and Follow-Up (once every 12 months after exam is completed) <ul style="list-style-type: none"> • Standard • Premium 	Up to \$55 10% off retail price
Contact Lenses (allowance includes materials only) <ul style="list-style-type: none"> • Conventional • Disposable • Medically Necessary 	\$0 copay; \$140 allowance plus 15% off balance over \$140 \$0 copay; \$140 allowance plus balance over \$140 \$0 copay; paid-in-full

Vision Premiums

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
EyeMed Vision				
Bi-Weekly Rates	\$3.14	\$5.58	\$5.53	\$7.44
Weekly Rates	\$1.57	\$2.79	\$2.76	\$3.72



Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.



Well-being Programs

Well-being Programs for
All Oro Employees

Well-being Programs for
Oro Employees Who Enroll
in a Medical Plan

Well-being Programs for
Hertz Hawaii Employees

Well-being Programs for All Oro Employees

These programs are **free** to all Oro employees, regardless of medical plan enrollment.

Employee Assistance Program

The Employee Assistance Program (EAP), SupportLinc by CuraLinc Healthcare, provides free, confidential support to you and your household. This includes up to five in-person or virtual sessions with a licensed counselor per concern. The EAP can help with stress, depression, anxiety, relationship issues, work-related pressures and substance abuse. They can also give suggestions for local child and elder-care, home repair, housing needs, education, pet care and more.



The EAP is available 24/7 at **888-881-5462** or supportlinc.com (group code: oro).

Employee Resource Groups

Hertz Employee Resource Groups (ERGs) offer the opportunity for diverse employee groups and their allies to come together and shape a culture of inclusion. ERGs are employee-led, voluntary groups currently available on the Estero and Oklahoma City campuses. The ERG network includes:



MULTICULTURAL
GROUP

Multicultural: Shape a more inclusive workplace by raising awareness of cultural nuances, celebrating cultural diversity throughout the organization and the communities we serve.



PRIDE
AND ALLIES

Pride and Allies: Promote enrichment and opportunity for the LGBTQ+ community, accelerate the company's competitive advantage, and to attract and retain a diverse workforce.



HERTZ VETERANS FIRST RESPONDERS
AND ALLIES

Veterans, First Responders and Allies: Build a culture that recognizes and celebrates the contributions of our veterans, active-duty reservists, first responders and their families while supporting their needs.



WELLNESS
GROUP

Wellness: Connect employees to celebrate and advocate for physical, emotional, financial, and mental health in and out of the workplace.



WOMEN
AND ALLIES

Women and Allies: Empower women to lead in their own way and to grow and thrive in both their careers and the community.



WORKING FAMILIES
AND ALLIES

Working Families: Educate, communicate and leverage resources so employees may successfully achieve work-family balance.



GENH
PROFESSIONALS & ALLIES

GENH Professionals & Allies: Cultivate a sense of community, enhance engagement, and foster personal and professional development among individuals who are in the early stages of their career, newer in their tenure with Hertz, or interested in allyship.

Perks at Work

Perks at Work is an employee discount marketplace that gives you discount pricing on everyday purchases including travel, electronics, dining, fitness, and more!



To access Perks at Work, visit perksatwork.com/oromobility and create your account using your email, then verify it with your company code.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Well-being Programs for Oro Employees Who Enroll in a Medical Plan

These programs are available to all Oro employees who enroll in a Hertz medical plan.

Teladoc

If you have a minor illness, going to the emergency room can be expensive, urgent care may be unnecessary, and you may not be able to see your primary care physician right away. Teladoc saves you time and money! Teladoc allows you and your enrolled dependents to speak with a doctor anytime, anywhere from teladochealth.com or **800-835-2362**. Teladoc is great for:

- » **Virtual Primary Care** — a high-quality and evidence-based virtual primary care solution delivered nationwide. It offers longitudinal primary care through a continuous relationship with a primary care provider and a care team. Members benefit from virtual access to 24/7 urgent care, preventive care and ongoing condition management in one experience that's both convenient and highly personalized.
- » **Minor conditions** such as fever, sore throat, congestion, nausea or vomiting, rash and more. Plus, Teladoc physicians can prescribe medications when appropriate.
- » **Behavioral Health concerns** including stress, anxiety, depression, addiction, abuse and grief counseling.
- » **Finding a doctor** using Teladoc's network of Best Doctors®. You can find in-network providers who are accepting patients and fit your preferences, including language, age, gender and specialized experience.
- » **Getting a second opinion** about medical conditions, treatment options or symptoms. Teladoc's expert physicians will provide you with a personalized response, after carefully collecting medical records, hospital and lab reports. Teladoc will also retest pathology on 100% of oncology, gastrointestinal and autoimmune disorder cases.
- » **Getting help with managing diabetes.** Get unlimited strips, a smart meter, personalized tips and expert coaching.

WIN

- » **WINFertility Solutions:** If you're experiencing infertility, please know you are not alone. Hertz wants to support you and your family during this time. Your Hertz medical plan comes with free access to WINFertility. This program connects you with a fertility nurse advocate who can provide support and encouragement through your experience and help answer your questions. WIN's nurse advocates have expertise in understanding complex information such as common causes, testing and treatment options, as well as medication guidance. WIN's nurse advocates can also help you navigate your benefits and select an in-network provider based on your unique goals, needs and preferences.
- » **WINMaternity Solutions:** Hertz's partnership with WIN extends beyond fertility to support healthy pregnancies and births. When you enroll in WINMaternity, you'll receive one-on-one support from a Nurse Care Advocate who specializes in prenatal health, nutrition, behavioral health, and postnatal care. When you enroll in the program, you'll receive a complimentary wellness box with prenatal vitamins and other baby essentials, and you'll also have the opportunity to earn up to \$100 in incentives through WINcentive by completing key program milestones.
- » **WINSurrogacy Solutions:** WINSurrogacy is a program designed to support you and your family through the surrogacy journey. With WIN Surrogacy, you'll have access to a dedicated WIN Specialty Services representative who will be by your side every step of the way — providing personalized guidance, education, and reassurance. The program makes it easier to understand your benefits and potential costs, connects you with trusted surrogacy agencies in the WIN network, and supports you with claims review and reimbursement authorization. You'll also benefit from one-on-one coaching and an online curriculum to help you confidently navigate each stage of the process. WIN Specialty Service representatives are available Monday - Friday, 9:00 AM - 5:30 PM EST.

To learn more or enroll, download the **WINFamily App**, call **855-596-6966** or visit managed.winfertility.com/hertz.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Well-being Programs for Oro Employees Who Enroll in a Medical Plan

These programs are available to all Oro employees who enroll in a Hertz medical plan.

SWORD Health

SWORD offers personalized digital physical therapy solutions to help you manage chronic pain, address women's pelvic health concerns and alleviate daily soreness, all at no cost to you. With Sword, you'll be matched with a dedicated Doctor of Physical Therapy who will create a customized program, and you'll receive a kit to guide your sessions. You can connect with your PT anytime for support and adjustments, completing your exercises conveniently from anywhere to experience relief.

- » For chronic pain, visit meet.swordhealth.com/thrive/hertz.
- » For women's pelvic health, visit meet.swordhealth.com/bloom/hertz.
- » For daily soreness, visit meet.swordhealth.com/move/hertz.

Hertz Wellness Reward

Hertz believes in the importance of regular health screenings and rewards employees who take steps to maintain good health. Employees who receive an annual preventive health screening and complete Quantum's annual health risk assessment will be eligible to receive a wellness reward. If you cover a spouse or domestic partner, they will also be required to complete these activities in order for you both to earn your rewards. Visit HealthyHertz.com to take your health assessment and track your progress. You must be enrolled in a Hertz medical plan to be eligible for the reward.*

*Your health plan is committed to helping you achieve your best health. Rewards for participating in the Hertz Wellness Reward are available to all employees. If you think you might be unable to meet a standard for a reward under this program, you might qualify for an opportunity to earn the same reward by different means. Contact Total Rewards and we will work with you (and, if you wish, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.

Carrum Health

When you need non-emergency surgery, cancer care or substance use support, understanding your options, finding a quality provider, setting up your appointment and coordinating post-care rehab can be a difficult process. Hertz is pleased to offer surgery support services through Carrum Health. Carrum Health works with highly-rated centers of excellence (COE) around the country to offer members best-in-class surgery support from the time you need to schedule your surgery to your rehab. Hertz is offering this service to all enrolled medical members.

Beginning in 2027, you are required to utilize Carrum if you are seeking bariatric, joint and spine surgery services. Using Carrum for all other eligible surgeries is voluntary. However, if you coordinate your surgery through Carrum, the out-of-pocket cost of your surgery will either be waived (if enrolled in the PPO or Copay Plan) or significantly reduced (if enrolled in the CDHP).

To get started, visit carrumhealth.com or call **888-855-7806**.



Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.



Well-being Programs for Oro Hawaii Employees

These programs are available to all Oro employees who enroll in a Hertz medical plan and live in Hawaii.

HealthWorks

You and your enrolled spouse/domestic partner can earn up to \$350 by completing these activities:*

- » Complete the online total health assessment to receive a \$200 Visa reward card.
- » Complete up to three healthy lifestyle programs to receive an additional \$50 Visa gift card for each completed program. The healthy lifestyle programs are free, interactive, and personalized to empower you to take charge of your own health and reshape your lifestyle.

For questions or to check on reward status, call **866-300-9867** or email rewardscustomerservice@kp.org.

Fit Rewards

The Fit Rewards program allows you to earn a free gym membership! Start by paying the annual \$200 program fee. Work out at a participating gym for at least 45 days (30 minutes per session) between Jan. 1 and Dec. 31. When you do, you'll get your \$200 back. Visit kp.org/fitrewards for more details.

Calm

Calm is the number one app for meditation and sleep. You can choose from hundreds of programs and activities, including:

- » Guided meditations
- » Sleep Stories
- » Mindful movement videos

Visit kp.org/selfcareapps to get started.

Headspace Care

Headspace Care (formerly called Ginger) offers 1-on-1 emotional support coaching and self-care activities to help with many common challenges.

- » Coaches are available by text 24/7
- » You can use Headspace Care's text-based coaching services at no cost, no referral needed

Visit kp.org/selfcareapps to get started.

* Your health plan is committed to helping you achieve your best health. Rewards for participating in the Hertz Wellness Reward are available to all employees. If you think you might be unable to meet a standard for a reward under this program, you might qualify for an opportunity to earn the same reward by different means. Contact Total Rewards and we will work with you (and, if you wish, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.



Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.



Financial Benefits

Pre-Tax Savings Accounts

Life and AD&D Insurance

Disability Insurance

Income Savings Plan 401(k)

Pension Plan

Pre-Tax Savings Accounts

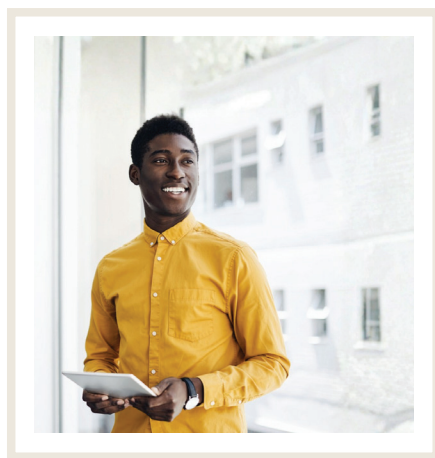
Health Savings Account

If you enroll in the CDHP, you will have access to a health savings account (HSA) to help you save for healthcare expenses. Optum Bank will set up your account and send you a debit card to access your funds. Contributions, earnings and withdrawals that are used for qualifying expenses are tax-free. **Please note: If you plan to enroll in the CDHP for 2027 and contribute to an HSA, you MUST spend down remaining dollars in your HCFSA before contributing to or using your HSA. Failure to comply could result in a tax penalty.**

Here's how the account works:

- » **Make contributions:** Hertz will contribute to your HSA. You can also contribute additional funds up to the annual IRS limits, plus an annual catch-up contribution for those over age 55.
- » **Use your funds:** You can use your funds to pay for eligible medical, dental and vision costs now or in the future. View a full list of eligible expenses at irs.gov/forms-pubs/about-publication-969. You can pay for eligible expenses out-of-pocket and reimburse yourself from your HSA savings later or you can pay with an HSA debit card.
- » **Save your funds:** You can also use your account as a savings account. The account is yours, even if you leave the company, and your funds will roll over each year accruing interest tax-free. When your account balance reaches \$1,000, you can invest your funds.

If you need help with your account, call Optum Customer Care at **866-234-8913** or visit optumbank.com.



Flexible Spending Accounts

Flexible spending accounts (FSAs) enable you to set aside some of your pay, on a pre-tax basis, into an account to pay for eligible health or dependent care expenses.

There are two types of FSAs:

- » The **health care FSA** covers copays, deductibles, coinsurance, prescriptions, dental care, eye exams and other eligible healthcare expenses.
- » The **dependent care FSA** covers childcare expense while you are at work for children under age 13 or other dependents who are incapable of self-care.

Here's how the FSAs work:

- » **Make contributions:** You set aside pre-tax money through payroll deductions up to IRS limits. You can't change your contribution during the year unless you experience a QLE.
 - ♦ **HCFSA limit:** \$3,400
 - ♦ **DCFSA limit:** \$7,500 individually, or up to \$3,750 if married and filing separately
- » **Use your funds:** You can pay for eligible expenses out-of-pocket and reimburse yourself from your FSA savings later or you can pay with a convenient FSA debit card. View a complete list of eligible expenses at irs.gov/forms-pubs/about-publication-969. Remember, you need to keep your receipts as proof your expenses were eligible for IRS purposes. You may be asked to submit them for verification. In general, eligible healthcare expenses are those relating to expenses incurred during the plan year (including the two-and-one-half month grace period). You incur an expense on the day the service is provided or the supply is received, not when you are billed or when you pay for it.

If you need help with your account(s) call Quantum at **877-674-3045**, chat on the Quantum Health app, or visit HealthyHertz.com.



A Note About Plan Limits

The HCFSA and DCFSA plan limits listed above may change if the IRS makes changes. For the most up-to-date information, visit irs.gov.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Life and AD&D Insurance

Life and AD&D insurance is provided through The Hartford. Your basic life insurance, provided by Hertz, gives you access to extra tools from The Hartford including will preparation, travel assistance, ID theft protection and more. Visit **Your Benefits** (policy number: 803546) or call **888-755-1503** to learn more.

Basic and Supplemental Life Insurance

Hertz provides basic life insurance equal to 1 times your annual base salary at no cost to you. If you'd like, you may also purchase supplemental life insurance up to 6 times your annual base salary. The total of your basic and supplemental life insurance is limited to \$3 million.

Dependent Life Insurance

You can also purchase coverage for your spouse/domestic partner and qualifying dependent children. Contributions are made on an after-tax basis, so the benefit is not taxable when it is received.

Spouse/domestic partner coverage acceptance is guaranteed up to \$50,000. Evidence of insurability (EOI) is required for coverage above \$50,000. Coverage for your child(ren) in amounts of \$5,000 to \$15,000 is available with no EOI required.



What is evidence of insurability?

Evidence of insurability (EOI) is when you provide proof of good health to the insurance company when applying for coverage.

- » If you're a new hire and enroll when first eligible, you can elect coverage up to the lesser of 5 times your annual base pay or \$300,000 without EOI.
- » If you're a current employee and enroll after you are first eligible or increase your Supplemental coverage by more than 1 times annual base pay, EOI is not required as long as the new amount doesn't exceed the guaranteed issue of \$300,000. EOI is always required for coverage above 5 times annual base pay.

Accidental Death and Dismemberment Insurance

You can purchase accidental death and dismemberment insurance (AD&D) for yourself up to 10 times your annual salary up to \$750,000. If you enroll, you may also cover your spouse/domestic partner and any eligible dependent children.



Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Disability Insurance

Disability insurance is provided through The Hartford. Please note, The Hartford will not pay benefits for a disability resulting from a pre-existing condition until you have been actively at work for 12 consecutive months after your coverage takes effect.

Short-Term Disability Insurance

Non-Exempt Hourly Employees

Short-term disability (STD) pays a portion of your salary in the event of a short-term illness, pregnancy, or injury. Hertz provides core STD to non-exempt employees at no cost. STD benefits are payable for up to 26 weeks (after a 7-day elimination period) for an approved disability leave (50% of base pay, weekly maximum of \$150). You may also purchase supplemental coverage.

- » **Supplemental STD Option One:** Covers 50% of your weekly base pay up to a \$500 weekly maximum.
- » **Supplemental STD Option Two:** Covers 60% of your weekly base pay up to a \$1,000 weekly maximum.

Exempt Salaried Employees

Salaried employees are eligible to receive a salary continuation benefit for approved disability leaves. Salary continuation benefits consist of full base pay for a specified period, and then partial (half) base pay for a specified period, depending upon your length of service with the company. Salary continuation benefits are integrated with state disability insurance benefits. Reference Policy #HR-16 for full policy information.



Important information if you live in CA, NY, HI, RI, or NJ!

- » California employees receive STD benefits through the state disability program instead of Hertz.
- » New York employees may purchase STD coverage to supplement the \$170 weekly maximum benefit provided by the state disability program.
- » Hawaii, Rhode Island, and New Jersey employees may purchase the 60% option to supplement your state disability program.

Long-Term Disability Insurance

If you suffer a disabling injury or illness, you may be unable to work for an extended period. For protection, Hertz offers optional long-term disability (LTD) insurance. LTD replaces a portion of your basic monthly earnings if you continue to be disabled and unable to work after exhausting STD or salary continuation benefits.

LTD coverage will begin after you have been disabled for 180 days on an approved period of STD. The benefit is a percentage of your base pay at the time you became disabled, depending on the option you elect and subject to benefit minimums and maximums. Your LTD benefit is reduced by benefits you receive or are eligible to receive from other sources, such as Social Security and workers' compensation. Benefits may continue for the maximum benefit period, as long as you remain disabled.



Hertz Benefits Specialist

A Hertz Benefits Specialist can help you with your benefits questions, including disability insurance! Call **800-654-3373**, Option 3. Hertz Benefits Specialists are available from 9:00 a.m. to 6:00 p.m. ET (8:00 a.m. to 5:00 p.m. CT), Monday through Friday. Press "3" to speak to a Hertz Benefits Specialist.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Income Savings Plan 401(k)

Hertz offers the income savings 401(k) plan through Fidelity Investments to help you save for retirement and plan for your future. If eligible, you can participate in the 401(k) beginning the first of the month after 30 days of employment. You can contribute up to 60% of your pay on a pre-tax and/or Roth after-tax basis.

For 2026, the 401(k) contribution limit is \$24,500. If you are age 50 or older by the end of the calendar year, you can contribute an additional \$8,000 as catch-up in 2026. If you are age 60 to 63 at the end of the calendar year, the contribution catch-up increases from an additional \$8,000 to \$11,250 in 2026.

For 2026, if you are age 50 or older and also earned \$150,000 or more in the prior calendar year while employed at The Hertz Corporation, all catch-up amounts will be contributed on a Roth after-tax basis. The IRS may adjust the contribution and catch-up limits in future years, indexed for inflation.

You must enroll at netbenefits.com to participate. For assistance, call **800-835-5095**.

Hertz Matching Contribution

Hertz will match your contributions dollar-for-dollar on the first 3% you contribute and 50 cents per dollar on the next 2% you contribute. This means your account is credited with a 4% matching contribution if you contribute 5% or more. As a safe harbor 401(k) plan your employee and employer contributions are immediately 100% vested.

WHY YOU SHOULD CONTRIBUTE TO THE 401(K) PLAN:



Meet Matt

Example	Contributions
Matt contributes 5% to his 401(k) account	\$5,000
Hertz matches the first 3% dollar-for-dollar	\$3,000
Hertz matches 50 cents for every dollar of the next 2%	\$1,000
In total, Hertz matches 4%	\$4,000

With all contributions combined, Matt has \$9,000 in his 401(k) account towards retirement, and he only put in \$5,000 of his own money.

Pension Plan

The Hertz Pension Plan is a defined benefit plan funded by Hertz. The plan was closed to new participants on Dec. 31, 2014. Employees who met the eligibility requirements of the plan prior to that date will continue as a member of the plan until their retirement or separation of service with Hertz. The plan will continue to provide interest credits for anyone who was in the plan at the time of the transition.

Members may access information on their accrued pension benefit at the Hertz Pension Center website at myplansconnect.com/hertz. For assistance, call **866-819-8399**.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.



Voluntary Benefits

Accident, Critical Illness and Hospital Indemnity Insurance

Identity Protection

Legal Plan

Voluntary Benefits

These voluntary benefits may be selected during enrollment and paid for with payroll deductions.

Accident, Critical Illness and Hospital Indemnity Insurance

Accident, critical illness and hospital indemnity through The Hartford provide an extra level of coverage, in addition to your medical plan, for you and your enrolled family members. To learn more, go to thehartford.com/benefits/hertz or call **866-547-4205**.

Understanding the Plans

- » **Accident Insurance:** Helps with the costs of an accidental injury that occurs on or off the job. Benefits help pay for things like doctor's office visits, physical therapy, emergency room and lodging for family.
- » **Hospital Indemnity:** Helps with the costs of a hospital stay including hospital confinement, hospital admission, intensive care and intermediate intensive care.*
- » **Critical Illness:** Helps with the costs of a major illness such as a heart attack, cancer or stroke. If you experience a covered critical illness, the plan pays a lump-sum benefit on initial diagnosis. You can select \$5,000, \$15,000 or \$30,000 as your benefit amount and can use the money any way you choose.

Wellness Benefit

Because annual health screenings are so important, the Accident Insurance and Critical Illness plans will give you \$100 when you receive certain diagnostic tests. Visit the voluntary benefits section on hertzbenefits.com to learn more about how to file a health screening claim.

Identity Protection

Enjoy peace of mind, financial reassurance, and time-saving expertise with a comprehensive identity protection plan from Allstate Identity Protection Pro+ Cyber. Learn more at allstateidentityprotection.com or call **800-789-2720**.

Legal Plan

MetLife Legal Plans give you and your eligible dependents access to a nationwide network of attorneys who can help with a variety of legal-related matters. You may sign up for this plan during enrollment. To learn more, visit legalplans.com/why-enroll or call **800-821-6400**.



Hertz Benefits Specialist

A Hertz benefits specialist can help you with your benefits questions, including voluntary benefits! Call **800-654-3373**, Option 3. Hertz Benefits Specialists are available from 9:00 a.m. to 6:00 p.m. ET (8:00 a.m. to 5:00 p.m. CT), Monday through Friday. Press "3" to speak to a Hertz Benefits Specialist.

* Important notice!

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. Please review the full notice on **page 32**.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.



Other Benefits

Parental Benefits

Discount Programs

Extra Savings Programs

Other Benefits

Parental Benefits

Paid Parental Leave

Hertz offers time off for new parents to recover from birth and to spend time with a new child.

Eligibility

You may be eligible for paid parental leave (PPL) if you're a full-time, regular employee with at least 6 continuous months of employment since your most recent date of hire. Eligible birth parents can take 8 weeks of PPL.

Eligible employees may take up to 4 weeks of paid parental leave for bonding. You are eligible if:

- » You are a birth parent
- » Your spouse/domestic partner gives birth to a child
- » You adopt a child or have a child placed for foster care who is age 17 or younger; adoption of a stepchild is excluded
- » You have a child placed with you by surrogacy

Please reference the Paid Parental Leave Policy #HR-32 for more details. To notify The Hartford of your need to take a leave of absence, call **888-301-5615** or file online at thehartford.com/mybenefits.

Adoption Assistance Program

Hertz offers financial support for adoptions. Eligible employees who adopt may receive up to a \$5,000 reimbursement per adoption, maximum two adoptions per lifetime. You're eligible for the adoption assistance program if you're a full-time regular employee with at least 12 continuous months of employment.

To receive reimbursement, pay for qualified adoption expenses and save your receipts. Then file a claim form within 90 days of the date the adoption is legal. Reference Policy #HR-33 for full policy information.

WINFertility

Hertz partners with WINFertility, a leading fertility benefits solution, to provide team members who enroll in a Hertz medical plan an inclusive family building benefit for every unique path to parenthood. The WINFertility benefit includes comprehensive treatment coverage leveraging the latest technologies and treatments, access to high-quality care through a premier network of fertility specialists, and personalized emotional support and guidance from dedicated nurse advocates.

To learn more and activate your benefit, contact WINFertility at **855-596-6966**.

Discount Programs

Perks at Work

Perks at Work is an employee discount marketplace that gives you discount pricing on a variety of everyday purchases like hotels, movie tickets, dining and more. To access Perks at Work, visit perksatwork.com and register with your Hertz email address or use company code **HERTZPERKS**, if you prefer to use a personal email address.



Car Discounts

Hertz offers employees and their spouses/domestic partners up to 40% off car rentals. Employees can include up to 10 Friends/Family members to enjoy up to 20% off as well. Plus, employees and their family members can save on car purchases! Reference Policy #HR-3 for full policy information.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Other Benefits

Extra Savings Programs

Alliant Credit Union

Alliant Credit Union returns profits to its members through higher savings rates, lower loan rates and fewer fees.

- » Enjoy 24/7 account access and member services
- » Savings accounts, checking accounts and credit cards
- » Exclusive, above-market rates on deposit accounts
- » Excellent rates on loans including auto loans and mortgages
- » Simple and convenient mobile banking

Visit myalliantcreditunion.com/Hertz to learn more.

Commuter Benefit Program

The Hertz Commuter Benefits Program is an IRS-approved benefit, administered through the Office of Compliant Administration (OCA), that allows employees to set aside money on a tax-free basis to pay for transportation and parking expenses incurred while getting to and from work. To learn more, visit <https://hertzbenefits.com/guide/other-benefits/discounts-savings/>.

Tuition Reimbursement

After six months of regular full-time employment with Hertz, you're eligible for tuition reimbursement for undergraduate and graduate programs. You can receive up to \$5,250 per year. If you voluntarily leave Hertz within one year of receiving reimbursement, you must repay any reimbursement received. Reference Policy #HR-8 to learn more. For more information, see Policy #HR-8. If you have questions, contact AskHR at **800-654-3373**, available 9:00 a.m. to 6:30 p.m. ET (8:00 a.m. to 5:30 p.m. CT).

Multiply Mortgage

Multiply Mortgage gives you access to preferred mortgage rates when purchasing or refinancing a home, with discounts of up to 1% below top retail lenders. You can also compare options online and work with a dedicated loan advisor throughout the process. Visit multiplymortgage.com/hertz to learn more and create an account using your work email address.

One Pass

One Pass Select® provides flexible access to gyms, boutique fitness studios, workout classes, and wellness tools through multiple membership options. Members can use more than one participating gym and change or cancel their membership at any time. Visit one-pass.com to learn more.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Hertz CorePlus Voluntary Benefits

Hertz CorePlus powered by Corestream offers you easy access to deals, discounts, and the following voluntary benefits in one convenient location. Visit Hertz.corestream.com for more details.

Auto & Home Insurance

With the Auto & Home Insurance program through Hertz Core Plus, you'll unlock exclusive employee savings and the power to shop smarter. Just complete one quick online form to instantly compare real-time, side-by-side quotes from top national carriers. Bundle your policies to maximize savings, and choose convenient payments through payroll deductions.

Pet Insurance

The **Nationwide Pet Health** option offers reimbursement on eligible vet bills, savings with any vet of your choice, discounted pet prescriptions, access to a 24/7 Vethelpline® and coverage for birds and exotic pets

The **Total Pet Plan** Option offers discounted pet care products and prescriptions, 25% savings on medical services at participating vets, access to a 24/7 telehealth chat, lost pet recovery service, and is eligible to pair with other Pet Health Insurance coverage.

Recoop Disaster Insurance

Many insurance policies don't cover all natural disasters. Recoop offers an extra layer of financial protection in the event of a natural disaster. Recoop offers up to \$25,000 in coverage, a quick and easy claim submission process, cash deposited in your account quickly, all with no deductible, underwriter or insurance adjuster required.

Kashable

Kashable offers financial flexibility through access to affordable personal loans at competitive rates. Repayment is simple and convenient through payroll deductions.

Purchasing Power

With Purchasing Power, you can get the products you need right away and spread out the cost through simple payroll deductions. From appliances and furniture to computers and even holiday gifts, you'll have access to thousands of brand-name products.



Contacts

Contacts



Enrollment

AskHR
800-654-3373

Hertz Benefits Specialist
800-654-3373, option 3
benefitsolver.com
(company key: Hertz)

Union Benefits
unionbenefits@hertz.com



Health Benefits

Cigna Dental
800-244-6224
mycigna.com

EyeMed Vision
866-939-3633
eyemed.com

OptumRx
855-871-6277
optumrx.com

Optum Specialty Pharmacy
877-838-2907

Rx Savings Solutions
855-871-6277
myrxss.com
support@rxss.com

Quantum Health
877-674-3045
HealthyHertz.com



Financial Benefits

Health Savings Accounts
866-234-8913
optumbank.com

Flexible Spending Accounts
877-674-3045
HealthyHertz.com

Life and AD&D
888-755-1503
thehartford.com

Disability Claims
AskHR
800-654-3373, option 2

Income Savings Plan 401(k)
Fidelity Investments
800-835-5095
netbenefits.com

Hertz Pension Center
866-819-8399
myplansconnect.com/hertz



Well-being Programs

Employee Assistance
Program
888-881-5462
supportlinc.com
(group code: oro)

Perks at Work
[perksatwork.com/
oromobility](https://perksatwork.com/oromobility)

Teladoc
800-835-2362
teladoc.com

SWORD Health
swordhealth.com

WINFertility Solutions
855-596-6966
[managed.winfertility.com/
hertz](https://managed.winfertility.com/hertz)

Carrum Health
888-855-7806
carrum.me/hertz



Voluntary Benefits

Accident, Critical Illness and
Hospital Indemnity Insurance
866-547-4205
thehartford.com

Identity Protection
800-789-2720
[allstateidentityprotection.
com](https://allstateidentityprotection.com)

Legal Plan
800-821-6400
legalplans.com/why-enroll

Hertz CorePlus
(239) 688-6066
[hertzsupport@corestream.
com](mailto:hertzsupport@corestream.com)



Hawaii Only Programs

Fit Rewards
kp.org/fitrewards

Hawaii Dental
800-232-2533
hawaiidental-service.com

Kaiser Permanente Medical
800-966-5955
kp.org

Kaiser Permanente Wellness
Coaches
808-432-2260

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resources Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.



Legal Notices

Legal Notices

Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available. If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at askebsa.dol.gov or call **1-866-444-EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2026. Contact your State for more information on eligibility.

ALABAMA – Medicaid
<http://myalhipp.com/>
1-855-692-5447

ALASKA – Medicaid
The AK Health Insurance Premium Payment Program: <http://myakhipp.com/>
1-866-251-4861
CustomerService@MyAKHIPP.com
Medicaid Eligibility: <https://health.alaska.gov/dpa/Pages/default.aspx>

ARKANSAS – Medicaid
<http://myarhipp.com/>
1-855-MyARHIPP (855-692-7447)

CALIFORNIA – Medicaid
Health Insurance Premium Payment (HIPP) Program: <http://dhcs.ca.gov/hipp>
916-445-8322
Fax: 916-440-5676
hipp@dhcs.ca.gov

COLORADO – Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+)
Health First Colorado: <https://www.healthfirstcolorado.com/>
1-800-221-3943/State Relay 711
CHP+: <https://hcpf.colorado.gov/child-health-plan-plus>
1-800-359-1991/State Relay 711
Health Insurance Buy-In Program (HIBI): <https://www.mycohibi.com/>
1-855-692-6442

FLORIDA – Medicaid
<https://www.flmedicaidtprecovery.com/flmedicaidtprecovery.com/hipp/index.html>
1-877-357-3268

GEORGIA – Medicaid
HIPP: <https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp>
678-564-1162, Press 1
CHIPRA: <https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra>
678-564-1162, Press 2

ILLINOIS – Medicaid
Illinois Medicaid Premium Assistance Information
<https://abe.illinois.gov>
217-524-8268
hfs.boc.hipp@illinois.gov

INDIANA – Medicaid
Health Insurance Premium Payment Program. All other Medicaid: <https://www.in.gov/medicaid>
<http://www.in.gov/fssa/dfr/>
Family and Social Services Administration: 800-403-0864
Member Services: 800-457-4584

IOWA – Medicaid and CHIP (Hawki)
Medicaid: <https://hhs.iowa.gov/programs/welcome-iowa-medicaid>
1-800-338-8366
Hawki: <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link/hawki>
1-800-257-8563
HIPP: <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/fee-service/hipp>
1-888-346-9562

KANSAS – Medicaid
<https://www.kancare.ks.gov/>
1-800-792-4884
HIPP Phone: 1-800-967-4660

KENTUCKY – Medicaid
Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP): <https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx>
1-855-459-6328
KIHIPPPROGRAM@ky.gov
KCHIP: <https://kynect.ky.gov>
1-877-524-4718
Medicaid: <https://chfs.ky.gov/agencies/dms>

LOUISIANA – Medicaid
Medicaid: <https://www.ldh.la.gov/healthy-louisiana>
1-888-342-6207
healthy.la.gov
LaHIPP: <https://www.ldh.la.gov/lahipp>
1-877-697-6703
La.HIPP@la.gov
Fax: 1-888-716-9787
100 Crescent Centre Parkway, Suite 1000 Tucker, GA 30084

MAINE – Medicaid
https://www.mymaineconnection.gov/benefits/?language=en_US
1-800-442-6003 (TTY: Maine relay 711)
Private Health Insurance Premium: <https://www.maine.gov/dhhs/ofi/applications-forms>
1-800-977-6740 (TTY: Maine relay 711)

MASSACHUSETTS – Medicaid and CHIP
<https://www.mass.gov/masshealth/pa>
1-800-862-4840 (TTY: 711)
masspremassistance@accenture.com

MINNESOTA – Medicaid
<https://mn.gov/dhs/health-care-coverage/>
1-800-657-3672

MISSOURI – Medicaid
<http://www.dss.mo.gov/mhd/participants/pages/hipp.htm>
573-751-2005

MONTANA – Medicaid
<http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP>
1-800-694-3084
HHSHIPPProgram@mt.gov

NEBRASKA – Medicaid
<http://www.ACCESSNebraska.ne.gov>
1-855-632-7633
Lincoln: 402-473-7000
Omaha: 402-595-1178

NEVADA – Medicaid
<http://dhcfp.nv.gov>
1-800-992-0900

NEW HAMPSHIRE – Medicaid
<https://www.dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program>
603-271-5218
Toll free number for the HIPP program: 1-800-852-3345, ext. 15218
DHHS.ThirdPartyLiabi@dhhs.nh.gov

NEW JERSEY – Medicaid and CHIP
Medicaid: <https://www.nj.gov/humanservices/dmahs/clients/medicaid/>
1-800-356-1561
CHIP Premium Assistance: 609-631-2392
CHIP: <http://www.njfamilycare.org/index.html>
1-800-701-0710 (TTY: 711)

NEW YORK – Medicaid
https://www.health.ny.gov/health_care/medicaid/
1-800-541-2831

NORTH CAROLINA – Medicaid
<https://medicaid.ncdhhs.gov/>
919-855-4100

NORTH DAKOTA – Medicaid and CHIP
<https://www.hhs.nd.gov/healthcare>
1-844-854-4825

OKLAHOMA – Medicaid and CHIP
<http://www.insureoklahoma.org>
1-888-365-3742

OREGON – Medicaid and CHIP
<http://healthcare.oregon.gov/Pages/index.aspx>
1-800-699-9075

PENNSYLVANIA – Medicaid and CHIP
<https://www.pa.gov/en/services/dhs/apply-for-medicaid-health-insurance-premium-payment-program-hipp.html>
1-800-692-7462
CHIP: <https://www.dhs.pa.gov/CHIP/Pages/CHIP.aspx>
1-800-986-KIDS (5437)

RHODE ISLAND – Medicaid and CHIP
<http://www.eohhs.ri.gov/>
1-855-697-4347 or 401-462-0311 (Direct Rite Share Line)

SOUTH CAROLINA – Medicaid
<https://www.scdhhs.gov>
1-888-549-0820

SOUTH DAKOTA – Medicaid
<http://dss.sd.gov>
1-888-828-0059

TEXAS – Medicaid
<https://www.hhs.texas.gov/services/financial/health-insurance-premium-payment-hipp-program>
1-800-440-0493

UTAH – Medicaid and CHIP
Utah's Premium Partnership for Health Insurance (UPP): <https://medicaid.utah.gov/upp/>
upp@utah.gov
1-888-222-2542
Adult Expansion: <https://medicaid.utah.gov/expansion/>
Utah Medicaid Buyout Program: <https://medicaid.utah.gov/buyout-program/>
CHIP: <https://chip.utah.gov/>

VERMONT – Medicaid
<https://dvha.vermont.gov/members/medicaid/hipp-program>
1-800-250-8427

VIRGINIA – Medicaid and CHIP
<https://coverva.dmas.virginia.gov/learn/premium-assistance/famis-select>
<https://coverva.dmas.virginia.gov/learn/premium-assistance/health-insurance-premium-payment-hipp-programs>
1-800-432-5924

WASHINGTON – Medicaid
<https://www.hca.wa.gov/>
1-800-562-3022

WEST VIRGINIA – Medicaid and CHIP
<https://dhhr.wv.gov/bms/>
<http://mywvhpp.com/>
304-558-1700
CHIP Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447)

WISCONSIN – Medicaid and CHIP
<https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm>
1-800-362-3002

WYOMING – Medicaid
<https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/>
1-800-251-1269

To see if any other states have added a premium assistance program since July 31, 2026, or for more information on special enrollment rights, contact either:

U.S. Department of Labor Employee Benefits Security Administration
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323, Menu Option 4, Ext. 61565

OMB Control Number 1210-0137 (expires 5/31/2029)

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.



Legal Notices

Women's Health and Cancer Rights Act

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this Plan. For further details on WHCRA benefits, please refer to the Plan's Summary Plan Description.

Newborns' and Mothers' Health Protection Act

Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under Federal law, require that a provider obtain authorization from the plan or the insurance issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours). If you would like more information on maternity benefits, call your plan administrator.

HIPAA Notice of Special Enrollment Rights

If you decline enrollment in your employer's health plan for you or your dependents (including your spouse) because of other health insurance or group health plan coverage, you or your dependents may be able to enroll in your employer's health plan without waiting for the next Open Enrollment period if you:

- Lose other health insurance or group health plan coverage. You must request enrollment within 30 days after the loss of other coverage.
- Gain a new dependent as a result of marriage, birth, adoption, or placement for adoption. You must request health plan enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.
- Lose Medicaid or Children's Health Insurance Program (CHIP) coverage because you are no longer eligible. You must request medical plan enrollment within 60 days after the loss of such coverage.

If you request a change due to a special enrollment event within the 30-day timeframe, coverage will be effective the date of birth, adoption or placement for adoption. For all other events, coverage will be effective the first of the month following your request for enrollment. In addition, you may enroll in your employer's health plan if you become eligible for a state premium assistance program under Medicaid or CHIP. You must request enrollment within 60 days after you gain eligibility for medical plan coverage. If you request this change, coverage will be effective the first of the month following your request for enrollment. Specific restrictions may apply, depending on federal and state law.

Note: If your dependent becomes eligible for a special enrollment rights, you may add the dependent to your current coverage or change to another health plan.

HIPAA: Notice of Privacy Practices

We are required by applicable federal and state law to maintain the privacy of your protected health information. We are also required to give you this notice about our privacy practices, our legal duties and your rights concerning your medical information. This notice is available to you by contacting Total Rewards.

COBRA Continuation Coverage

You and/or your dependents may have the right to continue coverage after you lose eligibility under the terms of our health plan. Upon enrollment, you and your dependents receive a COBRA Initial Notice that outlines the circumstances under which continued coverage is available and your obligations to notify the plan when you or your dependents experience a qualifying event. Please review this notice carefully to make sure you understand your rights and obligations.

Important Notice About Fixed Indemnity Plans: Hospital Indemnity Plans

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](https://www.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](https://www.naic.org)) under "Insurance Departments."
- If you have this policy through your job, or a family member's job, contact the employer.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Legal Notices

Important Notice About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. Hertz has determined that the prescription drug coverage offered by UMR/OptumRx and Kaiser plans is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15 to December 7.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your Hertz coverage will not be affected. See below for more information about what happens to your current coverage if you join a Medicare drug plan.

Since the existing prescription drug coverage under UMR/OptumRx and Kaiser plans is creditable (e.g. as good as Medicare coverage), you can retain your existing prescription drug coverage and choose not to enroll in a Part D plan; or you can enroll in a Part D plan as a supplement to, or in lieu of, your existing prescription drug coverage.

If you do decide to join a Medicare drug plan and drop your Hertz prescription drug coverage, be aware that you and your dependents may not be able to get this coverage back.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Hertz and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least one percent of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go 19 months without creditable coverage, your premium may consistently be at least 19 percent higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

For More Information About This Notice Or Your Current Prescription Drug Coverage:

Contact the person listed below for further information. NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Hertz changes. You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage:

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare Prescription Drug Coverage:

- Visit medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call **1-800-MEDICARE (1-800-633-4227)**. TTY users should call **1-877-486-2048**.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at socialsecurity.gov, or call them at **1-800-772-1213 (TTY 1-800-325-0778)**.

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date: September 2026

Name of Entity/Sender: Hertz

Contact Position/Office: Hertz Benefits Department

Phone: AskHR, **800-654-3373**

CMS Form 10182-CC Updated April 1, 2011 According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0990. The time required to complete this information collection is estimated to average 8 hours per response initially, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Legal Notices

Illinois Consumer Coverage Disclosure Act

The Consumer Coverage Disclosure Act requires employers to notify Illinois employees which of the Essential Health Benefits listed below are and are not covered by their employer-provided group health insurance coverage. Refer to the [Access to Care and Treatment Benchmark Plan \(https://www2.illinois.gov/sites/Insurance/Producers/Documents/Illinois_BMP.pdf\)](https://www2.illinois.gov/sites/Insurance/Producers/Documents/Illinois_BMP.pdf) and the [Pediatric Dental Plan \(https://www2.illinois.gov/sites/Insurance/Producers/Documents/ILAllKids_Dental_Plan.pdf\)](https://www2.illinois.gov/sites/Insurance/Producers/Documents/ILAllKids_Dental_Plan.pdf) to reference the pages listed below.

Employer Name: The Hertz Corporation
Employer State of Situs: Florida
Name of Issuer: The Hertz Corporation
Plan Marketing Name: Hertz Custom Benefit Program
Plan Year: 2027

Ten (10) Essential Health Benefit (EHB) Categories:

- Ambulatory patient services (outpatient care you get without being admitted to a hospital)
- Emergency services
- Hospitalization (like surgery and overnight stays)
- Laboratory services
- Mental health and substance use disorder (MH/SUD) services, including behavioral health treatment (this includes counseling and psychotherapy)
- Pediatric services, including oral and vision care (but adult dental and vision coverage aren't essential health benefits)
- Pregnancy, maternity, and newborn care (both before and after birth)
- Prescription drugs
- Preventive and wellness services and chronic disease management
- Rehabilitative and habilitative services and devices (services and devices to help people with injuries, disabilities, or chronic conditions gain or recover mental and physical skills)

Illinois Essential Health Benefit (EHB) Listing (P.A. 102-0630)

Item	EHB Benefit	EHB Category	Benchmark Page Number Reference	Employer Plan Covered Benefit?
1	Accidental Injury — Dental	Ambulatory	Pages 10 and 17	Yes
2	Allergy Injections and Testing	Ambulatory	Page 11	Yes
3	Bone anchored hearing aids	Ambulatory	Pages 17 and 35	Yes
4	Durable Medical Equipment	Ambulatory	Page 13	Yes
5	Hospice	Ambulatory	Page 28	Yes
6	Infertility (Fertility) Treatment	Ambulatory	Pages 23 – 24	Yes
7	Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	Ambulatory	Page 21	Yes
8	Outpatient Surgery Physician/Surgical Services (Ambulatory Patient Services)	Ambulatory	Pages 15 – 16	Yes
9	Private-Duty Nursing	Ambulatory	Pages 17 and 34	Yes
10	Prosthetics/Orthotics	Ambulatory	Page 13	Yes
11	Sterilization (vasectomy men)	Ambulatory	Page 10	Yes
12	Temporomandibular Joint Disorder (TMJ)	Ambulatory	Pages 13 and 24	No
13	Emergency Room Services (Includes MH/SUD Emergency)	Emergency services	Page 7	Yes
14	Emergency Transportation/ Ambulance	Emergency services	Pages 4 and 17	Yes
15	Bariatric Surgery (Obesity)	Hospitalization	Page 21	Yes
16	Breast Reconstruction After Mastectomy	Hospitalization	Pages 24 – 25	Yes
17	Reconstructive Surgery	Hospitalization	Pages 25 – 26, 35	Yes
18	Inpatient Hospital Services (e.g., Hospital Stay)	Hospitalization	Page 15	Yes
19	Skilled Nursing Facility	Hospitalization	Page 21	Yes
20	Transplants — Human Organ Transplants (Including transportation and lodging)	Hospitalization	Pages 18 and 31	Yes
21	Diagnostic Services	Laboratory services	Pages 6 and 12	Yes
22	Intranasal opioid reversal agent associated with opioid prescriptions	MH/SUD	Page 32	No
23	Mental (Behavioral) Health Treatment (Including Inpatient Treatment)	MH/SUD	Pages 8 – 9, 21	Yes
24	Opioid Medically Assisted Treatment (MAT)	MH/SUD	Page 21	Yes

Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.

Legal Notices

Illinois Essential Health Benefit (EHB) Listing (P.A. 102-0630)				
Item	EHB Benefit	EHB Category	Benchmark Page Number Reference	Employer Plan Covered Benefit?
25	Substance Use Disorders (Including Inpatient Treatment)	MH/SUD	Pages 9 and 21	Yes
26	Tele-Psychiatry	MH/SUD	Page 11	Yes
27	Topical Anti-Inflammatory acute and chronic pain medication	MH/SUD	Page 32	Yes
28	Pediatric Dental Care	Pediatric Oral and Vision Care	See AllKids Pediatric Dental Document	No
29	Pediatric Vision Coverage	Pediatric Oral and Vision Care	Pages 26 – 27	No
30	Maternity Service	Pregnancy, Maternity, and Newborn Care	Pages 8 and 22	Yes
31	Outpatient Prescription Drugs	Prescription drugs	Pages 29 – 34	Yes
32	Colorectal Cancer Examination and Screening	Preventive and Wellness Services	Pages 12 and 16	Yes
33	Contraceptive/Birth Control Services	Preventive and Wellness Services	Pages 13 and 16	Yes
34	Diabetes Self-Management Training and Education	Preventive and Wellness Services	Pages 11 and 35	Yes
35	Diabetic Supplies for Treatment of Diabetes	Preventive and Wellness Services	Pages 31 – 32	Yes
36	Mammography — Screening	Preventive and Wellness Services	Pages 12, 15, and 24	Yes
37	Osteoporosis — Bone Mass Measurement	Preventive and Wellness Services	Pages 12 and 16	Yes
38	Pap Tests/Prostate-Specific Antigen Tests/Ovarian Cancer Surveillance Test	Preventive and Wellness Services	Page 16	Yes
39	Preventive Care Services	Preventive and Wellness Services	Page 18	Yes
40	Sterilization (women)	Preventive and Wellness Services	Pages 10 and 19	Yes
41	Chiropractic and Osteopathic Manipulation	Rehabilitative and Habilitative Services and Devices	Pages 12 – 13	Yes
42	Habilitative and Rehabilitative Services	Rehabilitative and Habilitative Services and Devices	Pages 8, 9, 11, 12, 22, and 35	Yes

Special Note: Under Pub. Act 102-0104, eff. July 22, 2021, any EHBs listed above that are clinically appropriate and medically necessary to deliver via telehealth services must be covered in the same manner as when those EHBs are delivered in person.

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Legal Notices

Illinois Consumer Coverage Disclosure Act

The Consumer Coverage Disclosure Act requires employers to notify Illinois employees which of the Essential Health Benefits listed below are and are not covered by their employer-provided group health insurance coverage. Refer to the [Access to Care and Treatment Benchmark Plan \(https://www2.illinois.gov/sites/Insurance/Producers/Documents/Illinois_BMP.pdf\)](https://www2.illinois.gov/sites/Insurance/Producers/Documents/Illinois_BMP.pdf) and the [Pediatric Dental Plan \(https://www2.illinois.gov/sites/Insurance/Producers/Documents/ILAllKids_Dental_Plan.pdf\)](https://www2.illinois.gov/sites/Insurance/Producers/Documents/ILAllKids_Dental_Plan.pdf) to reference the pages listed below.

Employer Name: The Hertz Corporation

Employer State of Situs: Florida

Name of Issuer: The Hertz Corporation

Plan Marketing Name: Boon Minimum Essential Coverage (Smart MEC) Plan

Plan Year: 2027

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The logo features the word "oro" in a bold, lowercase, sans-serif font. A small "TM" trademark symbol is positioned to the upper right of the letter "o". The text is centered within a large white diamond shape. This diamond is outlined by a thick dark blue line. To the right of the main diamond, there is a smaller, tilted diamond shape, also outlined in dark blue. A yellow line, consisting of two parallel segments, runs diagonally across the upper right portion of the image, passing behind the dark blue diamond outlines. The entire composition is set against a light beige background with a subtle, repeating geometric pattern of interlocking squares and diamonds.

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