







Overview

Citi invests in you with benefits that support your physical, emotional, and financial health. Annual Benefits Enrollment is your opportunity to invest in you by looking carefully at all the benefits Citi offers to ensure you're making choices that will help you and your family live well in 2024.

Annual Benefits Enrollment is Monday, October 9 through Friday, October 27. Take this time to:

- · Review the changes for 2024.
- · Ask yourself key questions about your needs for next year.
- · Enroll between October 9 and October 27.



Your Mental Health Is Just as Important as Your Physical Health

World Mental Health Day on October 10 coincides with the beginning of our Annual Benefits Enrollment, making it the perfect time to learn how Citi's benefits can help you and your family feel your best, both physically and emotionally! See the full spectrum of Citi's mental health support.

New and Notable for 2024

Most of our benefits will **stay the same next year** — with just a few changes and enhancements, which are explained below. Since you're already familiar with Citi's benefits, this is the perfect time to step back and make sure you're in the right plans for your needs. Have you just been allowing your benefits to carry over without giving them much thought? Taking a moment for careful review and consideration is a great way to invest in you for 2024!



Health Plan Costs

At Citi, we strive to control costs by working closely with our benefit partners to provide the right services at the best price. We also subsidize a majority of the cost for medical coverage. Although health care costs continue to rise — as reflected in the 2024 paycheck deductions — we made efforts to minimize the increase in your health care coverage costs relative to current market trends.

- Paycheck deductions for medical coverage through Aetna and Anthem will increase by 3% in 2024.*
- Paycheck deductions for dental coverage through MetLife will increase by 2%, while paycheck deductions for dental coverage through Cigna will not increase in 2024.
- Paycheck deductions for vision coverage will not increase in 2024.

Managing costs is a shared responsibility. You can do your part by choosing the right medical coverage for your needs and taking care of your health using the many wellness programs and resources Citi offers.

*Note: Your cost for medical coverage varies based on your pay band. We contribute more toward the cost of medical coverage for our lower-paid employees because we believe that all our employees should have access to affordable, quality health care. If you will be in a higher pay band due to increased pay, your 2024 paycheck deductions for medical coverage may increase more than 3% compared to 2023.

In addition, if you live in CA, CO, CT, GA, ME, or NH and enroll with Aetna for 2024, your medical plan costs may increase more than 3%. Learn more under "Changes to Preferred Medical Plan Partner" below.

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Changes to Preferred Medical Plan Partner

Citi is committed to offering you choice and flexibility in your benefit options. When enrolling in the Choice Plan, Innetwork Only Plan, or High Deductible Plan with HSA, you can choose to have your medical coverage with either Aetna or Anthem, based on your preference and needs. Because the cost of care varies by geography, it's common for one benefit partner to have more favorable pricing than the other in specific locations.

In 2024, if you're enrolled in the Choice Plan or High Deductible Plan with HSA and live in CA, CO, CT, GA, ME or NH, your paycheck deductions will be lower with Anthem due to stronger network discounts in those states.

If you live in one of the affected states, we encourage you to make informed decisions about which benefit partner you choose in order to best support your total well-being. Enrolling with Anthem will ensure you pay the lowest paycheck deductions for your coverage. Many of Aetna's network providers are also in the Anthem network, so you may be able to keep your same in-network doctors if you switch from Aetna to Anthem. Be sure to check that your doctor is in Anthem's network using Anthem's online search tool before enrolling. This is also a good time to make sure you're choosing the most cost-effective medical plan for your health care needs. Learn more about the key differences between each of citi's medical plans below. You can also ask ALEX for guidance in choosing a medical plan.

If you're currently enrolled with Aetna and are affected by these regional changes, you'll receive more information by mail in early October.



Free MinuteClinic and HealthHUB Visits

We know that convenient access to medical care is important to you. MinuteClinic and HealthHUB centers (available in select CVS pharmacies) are already popular choices for Citi medical plan members. These facilities offer immediate treatment for minor conditions like ear infections, rashes, minor burns and cold or flu symptoms.

To make it easier on you and your covered family members to get this care when you need it, the In-network Only Plan and Choice Plan will cover many services provided by a MinuteClinic or HealthHUB at no cost to you.* For High Deductible Plan with HSA members, you pay \$0 after meeting the plan deductible.*

Of course, nothing can replace the value of having a trusted relationship with a primary care doctor who knows you and your health history. But MinuteClinic and HealthHUB offer convenient options when you need minor medical attention right away, saving you time and money. You can use the online search tools to find a Minute Clinic or HealthHUB near you.

If a MinuteClinic or HealthHUB isn't convenient or appropriate for your needs, other options available through your medical plan include:

- Telehealth through Teladoc (Aetna members) or LiveHealth Online (Anthem members) for virtual medical consultations 24/7, 365 days a year.
- Urgent care centers for the treatment for moderately serious injuries or illnesses that require in-person treatment.
 You can check for in-network centers through your medical plan's website or app.
- · Hospital emergency rooms for serious, life-threatening situations.

*Any associated lab tests will be covered at standard cost.



More Cost-Saving Opportunities for Generic Prescription Drugs

Through the new Caremark Cost Saver program, you will receive automatic access to discounted prices on generic prescription drugs through GoodRx. When you submit a prescription to be filled, your Caremark benefits and any available GoodRx discounts will be applied to ensure you pay the lowest available price. The amount you pay will automatically be applied to your plan's prescription deductible and out-of-pocket maximum. This program applies to generic medications only and will be part of the prescription drug coverage included with the In-network Only Plan, Choice Plan, and High Deductible Plan with HSA.



Enhanced Caregiver Support Through MetLife Legal Plans

MetLife Legal Plans has partnered with Family First to provide customized caregiving solutions. If you enroll in legal coverage through MetLife Legal Plans for 2024, you'll receive unlimited access to a confidential, multi-disciplinary team of highly trained experts (physicians, social workers and counselors) to support your unique caregiving situation and create a holistic care plan for your loved one.

Caregiving services include:

- · Reviewing your situation in detail to provide customized caregiving guidance and support.
- Providing expert information about a variety of caregiving options, including eldercare, care for cognitive issues/dementia, hospice, homecare, substance abuse/addiction treatment and more.
- · Developing a personalized care plan for your loved one.
- · Offering support for your own needs as a caregiver.

There is no additional cost for these expanded services through Family First. **Note:** All employees still have access to caregiving resources and support through Bright Horizons, whether you're enrolled in MetLife Legal Plans or not.

Through MetLife Legal Plans, you can also access attorneys who have experience with eldercare matters, such as:

- Medicare/Medicaid
- · Nursing home agreements
- · Estate planning documents

Learn more.



Increased Health Savings Account (HSA) Contribution Limits

The maximum HSA contributions allowed by the IRS will increase in 2024 to:

- \$4,150 for employee-only coverage
- \$8,300 for all other coverage levels

Keep in mind that Citi's contributions count toward these maximums, so the amount that you can contribute will be reduced by:

- Up to \$500 for employee-only coverage
- Up to \$1,000 for all other coverage levels

The additional "catch-up" contribution allowed for individuals who will be age 55 or older in 2024 remains at \$1,000.



Other Changes

- PrudentRx available with the High Deductible Plan with HSA. PrudentRx offers coupons for certain specialty
 medications, which lowers your cost to \$0. This program is already available with the Choice Plan and In-network
 Only Plan. In 2024, it will also be available with the High Deductible Plan with HSA after the plan's annual deductible
 has been met. PrudentRx will contact you if your medication is eligible, or you can call PrudentRx at 1 (800) 578-4403
 for more information. Note that if you don't use the PrudentRx program, you'll pay 30% coinsurance for eligible
 specialty medication.
- PrudentMed offers savings on select medically infused drugs using manufacturer coupons. This program is available
 to all eligible Aetna members in the Choice Plan and In-network Only Plan. If you are taking a medication that would
 be eligible for this savings program, you will receive more information about it.
- SelectHealth HMO will no longer be offered, effective January 1, 2024. If you're currently enrolled in this plan, you need to enroll in a different medical plan during Annual Benefits Enrollment. You may choose the In-network Only Plan, Choice Plan or High Deductible Plan with HSA through either Aetna or Anthem. Be sure to check the networks with both Aetna and Anthem before making your enrollment decision. The key considerations below can help you choose the right medical plan for your needs. If you don't take any action during Annual Benefits Enrollment, you will be enrolled in the Anthem Choice Plan at your same coverage level (employee only, employee + spouse, employee + child(ren), or family).
- The Live Well at Citi Program will be enhanced with new opportunities to earn rewards. Learn more.

Key Considerations

Choosing the benefits that are best for your situation is important for your health and your wallet. As you consider your options for 2024, ask yourself these four questions:



1. Are you in the right medical plan?

We offer a range of options to meet different needs.

In-network Only Plan*	
	Charges \$25 for a primary care visit and \$45 for a specialist visit,
	keeping your out-of-pocket costs predictable.
•	Offers access to a narrow selection of network doctors, chosen for their consistent delivery of high-quality care at lower costs.

- Does not provide out-of-network coverage.
- Pairs with the Health Care Spending Account for tax-free health care expenses.

Take a look at Ariel's story to see one example of a situation where the In-network Only Plan may be the best option.

Choice Plan

- Provides both in-network and outof-network coverage (with a broader selection of in-network doctors than the In-network Only
- Costs more from your paycheck and less when you need care compared to the High Deductible Plan with HSA.
- Pairs with the Health Care Spending Account for tax-free health care expenses.

Take a look at Remy's story to see one example of a situation where the Choice Plan may be the best option.

High Deductible Plan with HSA

- Provides both in-network and outof-network coverage (with a broader selection of in-network doctors than the In-network Only Plan)
- Keeps your paycheck deductions as low as possible, but requires higher out-of-pocket costs when you need care.
- Pairs with the Health Savings Account (HSA), which offers company contributions from Citi and the opportunity to invest funds for retirement. An HSA also offers higher tax-free contribution limits than a Health Care Spending Account (HCSA), without the "use it or lose it rule." In addition, a Limited Purpose HCSA is available to HSA participants.

Take a look at Adriann's story and Robbie's story to see examples of situations where the High Deductible Plan with HSA may be the best option.

*Note: This plan is not available in every location. If the In-network Only Plan is available to you, it will be offered as an option when you enroll. To check if doctors you'd like to see are included, you can look through the online network directory. Rest assured, you're covered anywhere in an emergency.

Need Help Choosing?

- · Ask ALEX for guidance in choosing a medical plan this fun, interactive decision support tool is available now.
- Call your Citi Health Concierge for personal assistance (Aetna members: 1 (800) 545-5862 | Anthem members: 1 (855) 593-8123 | Everyone (Health Advocate): 1 (866) 449-9933).



2. Are you taking full advantage of your tax-saving opportunities?

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

- If you enroll in the High Deductible Plan with HSA: You can make tax-free contributions to a Health Savings Account (in addition to the contributions Citi makes). This money can be used for a wide range of eligible health care expenses — now or in the future. Any unused balance carries over year after year, helping you build tax-free savings for future health care costs, even in retirement. The HSA contribution limits will increase for 2024, as described in the "New and Notable for 2024" section above. You can also contribute tax-free money to a Limited Purpose Health Care Spending Account, to spend on dental, vision and preventive care expenses. The current contribution limit is \$3,050.
- If you enroll in the Choice Plan or In-network Only Plan: You can contribute tax-free money to a Health Care Spending Account to spend on eligible health care expenses each year. The current contribution limit is \$3,050.
- Regardless of your medical plan enrollment: You can contribute tax-free money to a Dependent Day Care Spending
 Account to spend on eligible expenses each year for dependent day care while you are at work. The current
 contribution limit is \$5,000 (or \$2,500 if you're married and filling separate tax returns).



3. Do you need extra financial protection from costs related to an accident, critical illness or hospital stay?

If you have a planned hospitalization or surgery in 2024, or you worry about the expenses you may face related to an unexpected accident, critical illness, or hospital stay, you may want to consider adding one or more supplemental health benefit options. Accident, critical illness, and hospital indemnity insurance each pay cash benefits directly to you, as a way to supplement your primary medical coverage. You can use this money however you wish.



4. Are you or a family member dealing with a health challenge?

If you enroll in any Citi medical plan, you can take advantage of additional no-cost programs designed to help you manage your health and enjoy greater well-being, such as:

- · SWORD for joint or back pain, or to help prevent injuries through a proactive exercise plan
- Transform Diabetes Care for diabetes management
- Chronic condition support for long-term conditions such as asthma or heart disease
- · Included Health for second opinions from leading medical experts at no additional cost to you
- · Citi Health Concierge and Health Advocate for assistance finding the right doctors, understanding claims, and more

These programs are free to you and your dependents (if applicable) when enrolled in a Citi medical plan and could help you lower your health care costs through better health management.

Your Annual Benefits Enrollment Checklist

Annual Benefits Enrollment is your opportunity to update your benefits each year. Follow these steps to make the most of it:



Review Your Needs and Citi's Benefit Options

Ask yourself these questions to carefully consider your needs and understand the benefit options Citi offers. You might find benefits that provide a better match for your life right now.



Check the Medical Plan Networks

Plan networks change, so it's important for **all** employees to review the Aetna and Anthem network directories, even if you're planning to keep your current medical plan. If you find that your preferred doctors no longer belong to your plan's network, you have the option to switch networks or plans during Annual Benefits Enrollment.

The Choice Plan and High Deductible Plan with HSA allow you to see out-of-network doctors, but you'll pay less for innetwork services. To search within these plan networks:

- Aetna: Enter your home location, click the Search button, then under Aetna Open Access Plans, select Aetna Choice®
 POS II (Open Access) and follow the prompts to conduct your search, or call 1 (800) 545-5862.
- Anthem BlueCross BlueShield: Select the state in which you live and follow the prompts to conduct your search, or call 1 (855) 593-8123.

The In-network Only Plan has a smaller network of doctors and hospitals than the Choice Plan and High Deductible Plan with HSA, and out-of-network expenses are not covered, except in an emergency. This smaller network is not available in all locations, and the areas where it is offered may change from year to year.

- To check the Aetna's APCN+ network, use the customized doc finder tool or call 1 (800) 545-5862. To use the online tool:
 - $\circ~$ Enter your home ZIP code in the $\pmb{\text{Provider Search}}$ box, then click "Start Your Search."
- Enter your ZIP code again under Continue as a guest to search for in-network doctors.
- To check the Anthem network, use the Provider Directory Search tool or call 1 (855) 593-8123. To use the online tool:
 - Select the blue button titled: Network: National Blue High Performance Network (BlueHPN Non-Tiered).
 - Follow the prompts to conduct your search.



Ask for Help

You can use ALEX, the independent, fun and interactive benefits tool, to receive guidance with your benefit decisions.

You can also turn to Citi's Health Concierge for personalized assistance:

- Aetna members: 1 (800) 545-5862 | 8 a.m. to 11 p.m., ET, Monday Friday | 8 a.m. to 4:30 p.m., ET, Saturday
- Anthem members: 1 (855) 593-8123 | 8:30 a.m. to 8 p.m., ET, Monday Friday
- Those currently not enrolled in Citi coverage can call Health Advocate: 1 (866) 449-9933 | 8 a.m. to 10 p.m., ET, Monday – Friday



Take Your Health Assessment

You'll pay \$100 less in 2024 paycheck deductions for your health coverage if you take the Health Assessment between October 1 and November 12 — plus, you'll learn valuable information about your health status. Your spouse/partner (if applicable) who enrolls in a Citi health plan can earn a \$100 reduction, too.

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

To access the Health Assessment, you must register with Virgin Pulse, which can be done through My Total Compensation and Benefits using the Live Well Rewards & Health Assessment link. Once you register, you can even take the Health Assessment right from your smartphone with the Virgin Pulse app!

- · Download from the Apple Store
- Download from Google Play



Compare Costs

Starting October 9, visit Your Benefits Resources (YBR™), available through My Total Compensation and Benefits, to see your benefit costs for 2024.



Enroll in Your Benefits

Make your benefit elections online or by phone between Monday, October 9 and Friday, October 27.



Update Your Beneficiaries

When you're in the enrollment site updating your benefits, remember to update your life insurance and retirement plan beneficiaries, too, if necessary.

To update your beneficiary information for Group Universal Life (GUL) insurance, you must do so directly with MetLife. Visit My Total Compensation and Benefits and click on "Group Universal Life" under "Want to get to our best in class vendors fast?" to connect to the MetLife MyBenefits website.

For Spouses/Partners



Note to Citi Employees

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

As the spouse or partner of a Citi employee, you have the chance to think about your current benefits and help select the ones you want for 2024. Make sure to review this year's changes. This year's Annual Benefits Enrollment period is **October 9 – 27**.

Compare Your Options

If you have access to another employer plan other than Citi, consider which plan provides the most value. Compare Citi health plans to your employer's offerings, as well as the cost of enrolling separately in "employee only" coverage through your employer's plan with the cost of spouse/family coverage through Citi. Also, find out what's changing for 2024.

If your employer's annual enrollment period occurs **after October 27, 2023**, use the information available to you to make the best decision for your family's needs. When you become eligible to enroll in benefits with your employer, you can compare your options and change your Citi coverage at that time.

If you enroll under your employer's plan, contact the **Citi Benefits Center** via ConnectOne at **1 (800) 881-3938**, (8:00 a.m. to 8:00 p.m. ET, Monday through Friday, excluding holidays) within 31 days after you enroll. You'll be able to drop your Citi coverage to avoid paying for more coverage than you need. For more details on changing coverage, review the **Benefits Handbook**. If you have children, compare your options to determine the best way to cover them, whether through Citi Benefits or your employer.

Ready to Enroll

Mark the dates on your calendar and be ready to take action between Monday, October 9 and Friday, October 27.

You have two ways to make your benefits elections:



Online

Make your elections and verify and/or add covered family members by visiting Your Benefits Resources (YBR**), available through My Total Compensation and Benefits.



By Phone

If you prefer, you may also enroll by phone. Call the **Citi Benefits Center** via ConnectOne at **1 (800) 881-3938**, 8:00 a.m. to 8:00 p.m. ET, Monday through Friday, excluding holidays. From the "benefits" menu, select the "health and insurance benefits as well as TRIP and spending accounts" option. If you're outside the United States or Puerto Rico, call **1 (469) 220-9600**.

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

What Happens If You Don't Enroll?

Here's what will happen if you don't take any action before Annual Benefits Enrollment ends on October 27:



You'll Be Automatically Enrolled in Your Current Coverage

You'll be automatically enrolled in the same benefits at the same coverage levels as you have now, with a couple exceptions. Some benefits require re-enrollment in order to continue coverage. Learn more about these situations below. Please note that your Vacation Purchase Program days do **not** carry over.

Note: If you're currently enrolled in an Aetna medical plan in CA, CO, CT, GA, ME or NH and allow that same coverage to continue, you will pay a higher paycheck deduction for coverage compared to Anthem's costs in those states in 2024. You must take action during Annual Benefits Enrollment and switch to Anthem in order to get the lower-cost medical coverage in your area.



You'll Pay a Tobacco Penalty

If you're currently enrolled in a Citi medical plan and don't take action during Annual Benefits Enrollment, you'll pay the tobacco penalty for the 2024 plan year, regardless of whether you use tobacco products. This applies to your medical plan enrolled spouse/partner (if applicable), as well.

If you don't use tobacco, complete the Tobacco Free Attestation by the Annual Benefits Enrollment deadline (October 27) by visiting Your Benefits Resources (YBR"), available through My Total Compensation and Benefits. You'll see the attestation right before you go to enroll in a medical plan.



You Won't Be Able to Contribute to a Health Care Spending Account (HCSA), Limited Purpose Health Care Spending Account (LPSA) or Dependent Day Care Sending Account (DCSA) for 2024

To contribute before-tax dollars to a spending account, you must actively enroll in these accounts each year. If you don't enroll during Annual Benefits Enrollment, you may be eligible to enroll during the plan year only if you experience a qualified change in status.



Your Health Savings Account (HSA) Contributions Won't Begin on January 1, 2024

Any 2023 plan year HSA contribution elections will **not** carry over into 2024.

You **must** make your 2024 plan year HSA contribution election by the Annual Benefits Enrollment deadline for your contributions to take effect on January 1, and to receive the entire Citi contribution for the 2024 plan year. However, you can enroll in or change your contribution to the HSA at any time during the 2024 plan year.

To qualify for Citi's entire contribution (up to \$500 for employee only coverage or up to \$1,000 for all other coverage categories), those enrolling in the High Deductible Plan with HSA for the first time must accept the terms and conditions of the HSA by December 31, 2023.

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



You'll Miss the Chance to Enroll in New Benefits for 2024

In order to change the benefits you have now or enroll in new benefits that you're not already enrolled in, you **must take action October 9 – 27, 2023.** You cannot enroll in benefits outside of Annual Benefits Enrollment — this includes benefits like MetLife Legal Plans and the Vacation Purchase Program. Only the Transportation Reimbursement Incentive Program (TRIP) allows enrollment at any time during the year, and certain benefits, such as medical, dental, vision, life insurance and spending or savings accounts, allow enrollment due to a qualifying life event.