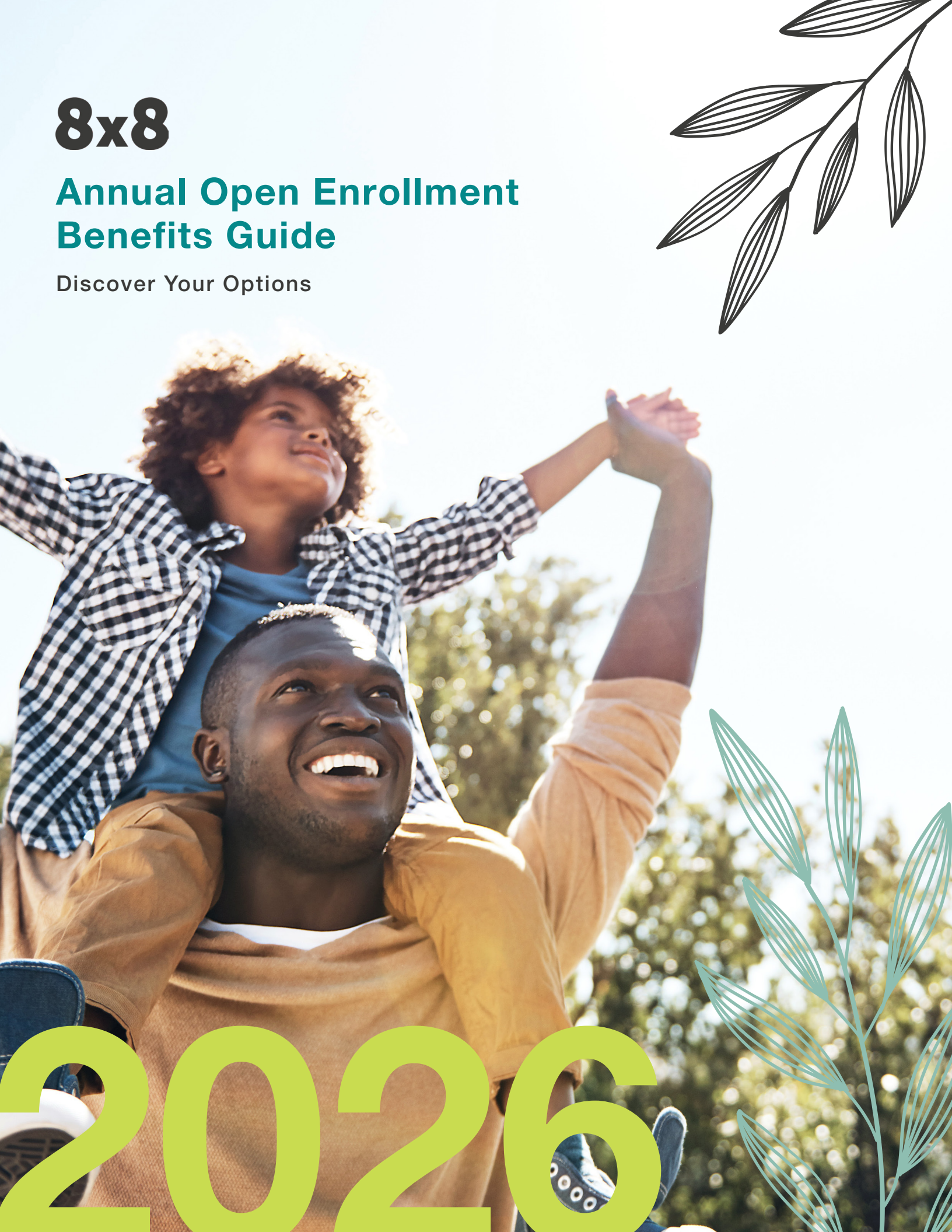




8x8

Annual Open Enrollment Benefits Guide

Discover Your Options

2026

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Use this guide as a tool to help you make the best benefits decisions for you and your family. The information inside this guide can help you review your health coverage options, discover tax savings opportunities, and learn about voluntary benefits offerings.

Please refer to plan documents for details, including important coverage exclusions and limitations. If there are any discrepancies between this benefits summary and plan documents, the plan documents will govern.

Welcome to Your Benefits

At 8x8, you are a vital part of our success. We have chosen benefits we believe will support your physical, emotional, social, and financial wellbeing.

Everyone's needs are different — that's why we give you options to choose the right plan for you. Take a look at the benefits offered throughout this guide to make the best decisions for you and your family.



8x8 Perks and Culture Highlights



Discount Marketplace

Enjoy exclusive savings through our employee discount marketplace. Get deals on everyday essentials, travel, entertainment, and more.



Paid Time Off

All employees are provided with ample time off, paid volunteer time, paid holidays, and Team8s Time Out days.



Learning & Development

Be part of a culture that invests in growth with training, workshops, and resources to support your success.



Innovation

Thrive in an environment where creativity and teamwork drive industry-first solutions.

Important Contacts

If you have any questions regarding your benefits or the material contained in this guide, please contact 8x8 People & Workplaces or the individual carriers listed below.

Benefit	Vendor	Group Number	Phone Number	Contact Information
Medical	Personify Health	M15	(800) 442-7247	personifyhealth.com
Prescription	NCRx/CVS Caremark	Group Number: RX22UM Bin Number: 004336	(866) 818-6911	caremark.com
LiveHealth Online	Anthem	N/A	(888) 548-3432	livehealthonline.com
Primary Care Practice	One Medical	N/A	N/A	onemedical.com/mybenefit Enter member code: 8X8XOM
Dental Care	Cigna	3347020	(800) 244-6224	cigna.com
Vision Care	VSP	30106506	(800) 877-7195	vsp.com
Health Savings Account (HSA)	HealthEquity	20541	(866) 346-5800	Email: memberservices@healthequity.com Website: healthequity.com
Flexible Spending Accounts	HealthEquity	8x8	(877) 924-3967	healthequity.com/login
Commuter Benefits	HealthEquity	8x8	(877) 924-3967	healthequity.com/wageworks
Life, Short-Term Disability (STD), Long-Term Disability (LTD), Leave Management, Voluntary Supplemental Health Plans	Voya	723584	(888) 305-0602 – Disability/Leave of Absence (800) 955-7736 – Life (877) 236-7564 – Voluntary Supplemental Health	presents.voya.com/EBRC/8x8
Global Mental Health and Wellbeing Support	Modern Health	N/A	N/A	my.joinmodernhealth.com
Business Travel Assistance	AIG	9157677	(877) 244-6871 – Within the US (715) 346-0859 – Outside the US	aigassistancesp@travelguard.com aig.com/us/travelguardassistance
Travel Assistance	Voya	17372030	(800) 859-2821 – US Toll-free (202) 296-8355 – Worldwide Collect	ops@europassistance-usa.com travelsecurity.garda.com
ID Theft Support	Voya/ComPsych	8x8	(877) 433-2363	guidanceresources.com For first time registration, - Enter Web ID: My5848i - Enter Company Name: 8x8, (include a hard space after "8x8,") - Select the company from the list - Complete the registration process
401(k)	Fidelity	8x8	(800) 294-4015 (800) 557-1900 – General Inquiries, After-tax Roth In-Plan Conversions only	401k.com
Financial Advice	Sage View	8x8	Eric Weissman (650) 446-3790	eweissman@sageviewadvisory.com
Benefits Enrollment and Benefits Queries	BenefitSolver	8x8		Login to BenefitSolver (via Okta) or my8x8benefits.us and pose your query to Sofia. For additional assistance submit a ticket via My8 Internal Support .

Eligibility

Employee Eligibility

You are eligible to enroll in benefits if you are a regular, full-time or part-time employee working a minimum of 20 hours per week.

If you are a new hire, you have 30 days from your date of hire to enroll in benefits. Benefits begin on your date of hire.

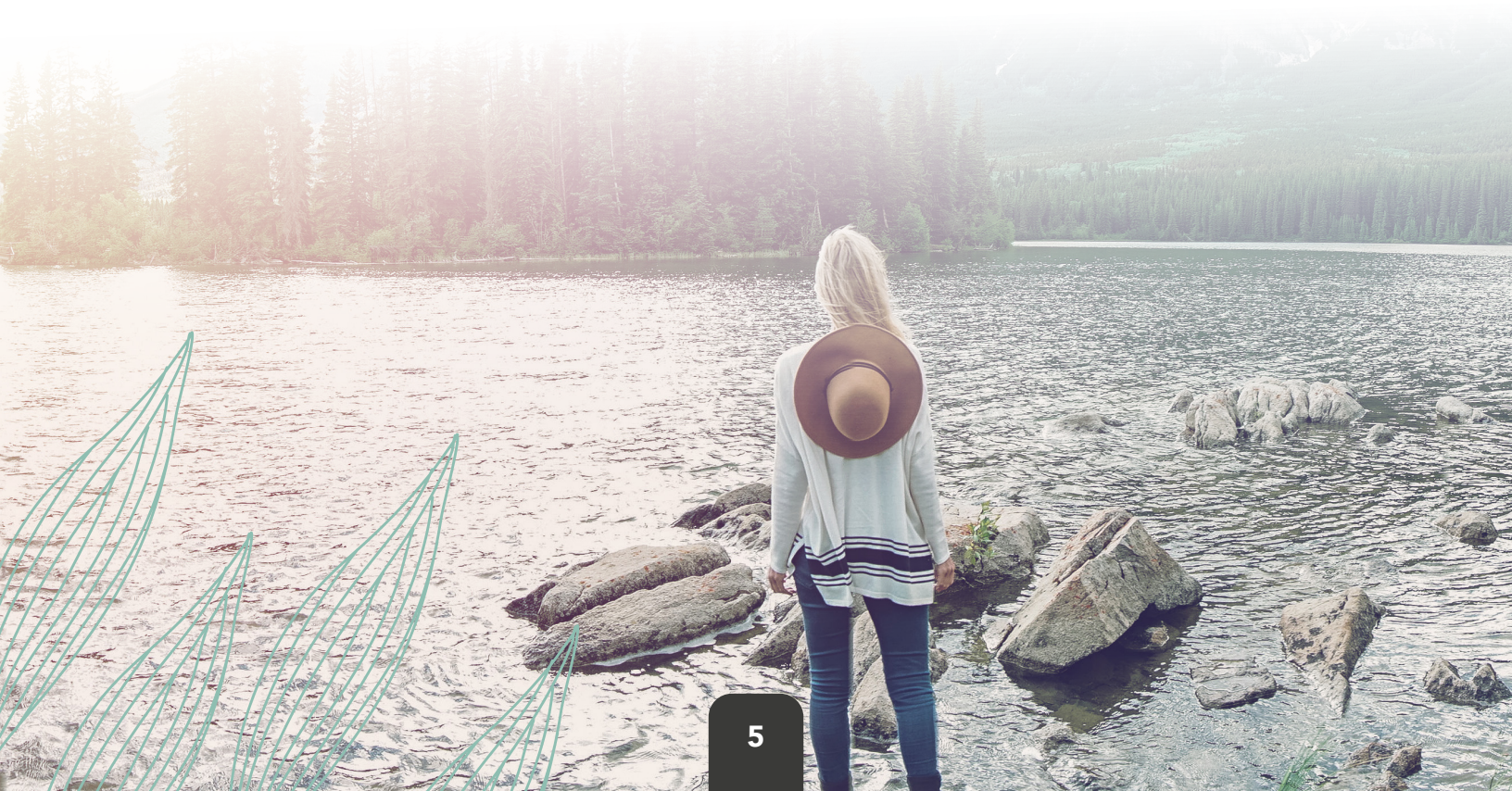
Dependent Eligibility

Your eligible dependents can also be enrolled in certain benefits.

Eligible dependents include:

- Legal spouse or registered domestic partner.
- Children up to age 26, including natural children, stepchildren, legally adopted children, children for whom you are the legal guardian, foster children, and children for whom you are legally responsible to provide health coverage under a Qualified Medical Child Support Order (QMCSO).
- Disabled children over age 26 if unmarried, incapable of self-support, dependent on you for primary support, and the disability occurred before the age of 26.

You may be required to provide supporting documentation, such as a marriage certificate or birth certificate to verify dependent eligibility.



Enrollment

The choices you make at this time will remain in place through December 31, 2026.

If you do not sign up for benefits during your initial eligibility period, you will not be able to elect coverage until the next open enrollment period.

You can only sign up for benefits or change your benefits at the following times:

- Within 30 days of date of hire.
- During the annual benefits open enrollment period.
- Within 30 days of a qualifying life event.

Changing Your Benefits

If you experience a qualifying event, you can make mid-year changes to your benefit elections.

Changes must be made within 30 days of the event date.

Examples include, but are not limited to, the following:

- Marriage, divorce, or legal separation
- Birth or adoption of a child
- Change in eligibility or employment status
- Loss of other health coverage

Within 30 days of the qualifying event, make changes to your coverage on BenefitSolver through Okta. You will need to provide documentation of the event, such as a marriage license, divorce decree, or birth certificate. Benefit changes must be consistent with the qualifying event.



How to Enroll



Self-enroll in your benefits.

Review the available plan options and log into BenefitSolver at <https://8x8.okta.com>.



Have important documentation ready.

You may be asked questions regarding you and your dependents, including birth dates, Social Security numbers, and phone numbers.



Compare your options and choose the best plans for you and your family.

Once you have finalized your selections, print your benefit summary and keep it for your records.

Medical

Personify Health | personifyhealth.com | (800) 442-7247

8x8 offers comprehensive coverage to support your health throughout the year.

To better understand the options available to you, please review the following summary of the medical plans.

Overview of Benefits	Essential EPO Plan	Standard PPO with HSA	Premium PPO Plan
Network	Anthem	Anthem	Anthem
In- and Out-of-Network Benefits	In-network benefits only	In- and out-of-network benefits	In- and out-of-network benefits
Plan Description	You are encouraged to select a primary care physician (PCP) to oversee your care. Care from doctors or facilities must be within a specific network. All non-emergency care must be within the network for the plan to pay.	This plan has a higher annual deductible, however you can fund a health savings account to help you save money on your health care expenses and use it for future investments/savings opportunities. You will make the most of your benefits when staying in network and combining it with using the HSA.	You do not have to select a primary care physician (PCP) to oversee your care or give referrals. You will make the most of your benefits when using an in-network provider.
How You Pay for Care	You pay copays for physician services and prescription drugs. All other services — such as hospital care, imaging, outpatient procedures, or lab work — are subject to your plan deductible and coinsurance.	You pay the full discounted rate for all services, including office visits, hospital services, and prescription drugs until you meet your annual deductible.	You pay copays for physician services and prescription drugs. All other services — such as hospital care, imaging, outpatient procedures, or lab work — are subject to your plan deductible and coinsurance.
Pay for Health Care with Pre-Tax Dollars	You can fund a health care flexible spending account (FSA).	You can fund a health savings account and/or limited purpose flexible spending account.	You can fund a health care flexible spending account (FSA).
Coinsurance			
In Network	20%	10%	10%
Out of Network	N/A	40%	40%

Terms You Should Know



Copay

A fixed dollar amount you may pay for certain covered services. Typically, your copay is due at the time of service.



Deductible

The amount you must pay each year for certain covered health services before your insurance plan will begin to pay.



Coinsurance

After you meet your deductible, you may pay coinsurance, which is your share of the costs of a covered service.



Out-of-Pocket Maximum

Includes copays, deductibles, and coinsurance. Once you meet this amount, the plan pays 100% of covered services for the rest of the year.

Medical

Essential EPO Plan

The Essential EPO plan offers in-network benefits only, but provides you the freedom to choose any in-network provider. Services from out-of-network providers, except for emergencies, are not covered.

	Essential EPO Plan
	In-Network Only
Calendar Year Deductible	
Individual	\$1,500
Family	\$3,000
Calendar Year Out-of-Pocket Maximum (includes deductible)	
Individual	\$6,500
Family	\$13,000
Covered Services	
You Pay	
Preventive Care	Plan pays 100%
Primary Care Physician	\$40 copay
Specialist	\$50 copay
Virtual Care	\$40 copay
Diagnostic Lab/X-Ray	20% after ded.
Complex Diagnostic (MRI, CT, PET)	20% after ded.
Inpatient Hospital	20% after ded. plus \$100 copay per admission
Outpatient Surgery	20% coinsurance plus \$50 copay per visit
Urgent Care	\$40 copay
Emergency Room	20% after ded.
Prescription Drugs — Retail (up to 30-day supply)	
Generic	20% (\$15 min / \$15 max)
Brand Name	20% (\$30 min / \$60 max)
Non-Formulary	30% (\$45 min / \$90 max)
Specialty	30% up to \$200 max
Mail Order (up to 90-day supply)	2x retail copay



Formulary

A list of preferred drugs chosen by a panel of doctors and pharmacists. Both brand and generic medications are included on the formulary.



Preventive Medications

Certain preventive medications are covered 100% under the medical plan. Visit the CVS website for a list of covered medications.



Mail Order

Get up to a 90-day supply of your prescription delivered to your home address.

How much does this plan cost?

Essential EPO Plan	Biweekly Costs
Employee Only	\$78.46
Employee + Spouse/DP	\$221.54
Employee + Child(ren)	\$174.92
Employee + Family	\$310.62



Premium

The amount you pay for the medical plan in exchange for coverage.

Domestic Partner Coverage and Taxes

- If you cover a domestic partner and/or their children, you'll pay the employee portion on a pre-tax basis and the dependent portion on a post-tax basis.

- The value of your domestic partner's (and/or their children's) coverage will also be added to your income (imputed income) and taxed.

Medical

Standard PPO with HSA

The Standard PPO with HSA plan gives you the option to fund a health savings account (HSA) which allows you to save and pay for qualified health care expenses. 8x8 will also make a contribution to your HSA when you enroll. See page 15 for more information on the HSA.

	Standard PPO with HSA	
	In Network	Out of Network
Calendar Year Deductible		
Individual	\$2,000	\$2,000
Family	\$4,000	\$4,000
Calendar Year Out-of-Pocket Maximum (includes deductible)		
Individual	\$4,000	\$6,500
Family	\$8,000	\$13,000
Covered Services	You Pay	You Pay
Preventive Care	Plan pays 100%	40% after ded.
Primary Care Physician	10% after ded.	40% after ded.
Specialist	10% after ded.	40% after ded.
Virtual Care	10%, deductible waived	40% after ded.
Diagnostic Lab/X-Ray	10% after ded.	40% after ded.
Complex Diagnostic (MRI, CT, PET)	10% after ded.	40% after ded.
Inpatient Hospital	10% after ded.	40% after ded.
Outpatient Surgery	10% after ded.	40% after ded.
Urgent Care	10% after ded.	40% after ded.
Emergency Room	10% after ded.	40% after ded.
Prescription Drugs — Retail (up to 30-day supply)		
Generic	20% after ded. (\$15 min / \$15 max)	Not covered
Brand Name	20% after ded. (\$30 min / \$60 max)	Not covered
Non-Formulary	30% after ded. (\$45 min / \$90 max)	Not covered
Specialty	30% up to \$200 max, after ded.	Not covered
Mail Order (up to 90-day supply)	2x retail copay	Not covered

How much does this plan cost?

Standard PPO with HSA	Bi-weekly Costs
Employee Only	\$40.62
Employee + Spouse/DP	\$133.38
Employee + Child(ren)	\$109.38
Employee + Family	\$188.31

Domestic Partner Coverage and Taxes

- If you cover a domestic partner and/or their children, you'll pay the employee portion on a pre-tax basis and the dependent portion on a post-tax basis.

- The value of your domestic partner's (and/or their children's) coverage will also be added to your income (imputed income) and taxed.

Medical

Premium PPO Plan

The Premium PPO plan offers in- and out-of-network benefits, providing you the freedom to choose any provider.

	Premium PPO Plan	
	In Network	Out of Network
Calendar Year Deductible		
Individual	\$1,000	\$1,000
Family	\$2,500	\$2,500
Calendar Year Out-of-Pocket Maximum (includes deductible)		
Individual	\$4,000	\$4,500
Family	\$8,000	\$9,000
Covered Services	You Pay	You Pay
Preventive Care	Plan pays 100%	40% after ded.
Primary Care Physician	\$40 copay	40% after ded.
Specialist	\$40 copay	40% after ded.
Virtual Care	\$40 copay	Not covered
Diagnostic Lab/X-Ray	10% after ded.	40% after ded.
Complex Diagnostic (MRI, CT, PET)	10% after ded.	40% after ded.
Inpatient Hospital	10% after ded.	40% after ded.
Outpatient Surgery	10% after ded.	40% after ded.
Urgent Care	\$40 copay	40% after ded.
Emergency Room	10% after ded.	
Prescription Drugs — Retail (up to 30-day supply)		
Generic	20% (\$15 min / \$15 max)	Not covered
Brand Name	20% (\$30 min / \$60 max)	Not covered
Non-Formulary	30% (\$45 min / \$90 max)	Not covered
Specialty	30% up to \$200 max	Not covered
Mail Order (up to 90-day supply)	2x retail copay	Not covered

How much does this plan cost?

Premium PPO Plan	Bi-weekly Costs
Employee Only	\$126.46
Employee + Spouse/DP	\$333.23
Employee + Child(ren)	\$272.77
Employee + Family	\$469.85

Domestic Partner Coverage and Taxes

- If you cover a domestic partner and/or their children, you'll pay the employee portion on a pre-tax basis and the dependent portion on a post-tax basis.

- The value of your domestic partner's (and/or their children's) coverage will also be added to your income (imputed income) and taxed.

Preventive Care

Getting a regular preventive exam can help you stay healthy, catch issues early, and even save your life.

Best of all, in-network preventive care is covered at no cost to you when you enroll in a medical plan.



Identify health issues before they become a problem.

Catching issues early can mean care is more manageable, cost-efficient, and potentially more effective.



Improve your long-term health.

A preventive exam can help your doctor manage any chronic conditions and pinpoint ways to improve your overall wellbeing.



Keep your health on track.

Check with your doctor about specific exams, vaccinations, and screenings that are right for your age and gender.

Covered Preventive Services



Health Screenings

- Blood glucose and type 2 diabetes
- Cardiovascular or colorectal cancer
- Mammogram
- Cervical cancer and HPV
- Cholesterol and lipid disorders
- Colon, prostate, and lung cancer
- STI and STDs
- Hepatitis B and C



Routine Vaccines

- DTaP, Tdap, Td
- Haemophilus influenzae type b conjugate (Hib)
- Hepatitis A and B
- Human papillomavirus (HPV)
- Influenza vaccine
- Measles, mumps, and rubella (MMR)
- Meningococcal (meningitis) and pneumococcal (pneumonia)
- Poliovirus (IPV), Rotavirus (RV), Varicella (chickenpox), and shingles



Well Exams

(Baby, child, person, and woman)

- Height, weight, and head circumference
- Psychosocial and behavioral assessment
- BMI and blood pressure
- History and risk reduction

Some services are generally not considered preventive if you get them as part of a visit to diagnose, monitor, or treat an illness or injury. Please be aware that you will be responsible for the cost of any non-preventive care services you receive at your preventive care exam based on your plan design. Learn more about preventive care by visiting www.personifyhealth.com and selecting "Member Support."

Virtual Care

LiveHealth Online | www.livehealthonline.com | (888) 548-3432

Get cost-effective, convenient care when you don't feel well and are unable to see your primary care provider (PCP).

Virtual care brings the doctor to you — including on nights, weekends, and holidays.



24/7/365 Convenience

Avoid Expensive Copays

No Emergency Room Waits

Board-Certified Doctors

**Results Sent Directly
to Your PCP**

Common Health Issues Virtual Care Can Treat

Doctors can diagnose many health issues like cold and flu symptoms, allergies, rash, skin problems, and much more! Prescriptions and follow-up care can be ordered, if necessary.

Pain Management

- Abdominal pain/cramps
- Animal/insect bites
- Backache
- Dizziness
- Headaches/migraines
- Rash (poison ivy/oak)
- Sprains/muscle strains

Common Illnesses

- Bronchitis
- Cold and flu symptoms
- Eye infection
- Laryngitis
- Respiratory infection
- Sore throat
- Strep

Ongoing Care

- Allergies
- Asthma
- Blood pressure issues
- Sinusitis

One Medical

One Medical is here for you when you're sick or injured. They can also help prevent health issues and assist with physical and mental health goals.



Who is One Medical

One Medical is a private, primary care group of medical providers. Benefits include:

- Access to 185+ clinics nationwide, including locations in the South Bay Area, San Francisco, Phoenix, Chicago, Boston, Austin, and many other cities
- Same day or next-day appointments are available in their clinics to talk to providers on any health topic — from prevention to mental health to chronic conditions
- Pediatric care is available for eligible dependents
- Care is available online 24/7 with video chats, including care for urgent issues
- Online appointment booking and prescription renewals via the app or web

When You Should Consider Telemedicine Using One Medical

- Avoid germs in the ER, urgent care clinic or doctor's office.
- See a board-certified, licensed, telehealth-trained doctor on your schedule with on-demand virtual visits 24/7, including nights, weekends and holidays.
- Get treated for more than 80 common conditions including colds, flu, allergies and more.
- Get a prescription or short-term refill of any existing prescription sent to a pharmacy nearby, in less time than your usual doctor visit.
- Avoid costly copays and deductibles of the ER and urgent care clinic.

Register Now

Setting up your secure account only takes minutes. Visit onemedical.com/mybenefit or download the One Medical app for an easier way to visit with a doctor. When prompted, enter the code "8X8XOM" to active your membership.

Know Where to Go for Care

Where you go for medical services can make a big difference in how much you pay and how long you wait to see a health care provider.



Find a Network Provider

Finding an in-network provider near you is easy. Visit www.anthem.com/find-care or call (800) 676-2583. You can also download the Anthem mobile app for on-the-go access.

Maximize Your HSA Benefits With the Triple-Tax Advantage



Spend

Spend pre-tax HSA funds to pay for eligible expenses such as annual deductibles, dental and vision exams, prescriptions, or other health care costs for yourself or your eligible dependents.



Save

Save and roll funds over year-to-year to boost your long-term savings. Even if you switch medical plans, leave the company, or retire, you own the account and the money is yours to keep.



Invest

Invest and grow HSA funds tax-free, including interest and earnings, to use for future health care costs. After age 65, spend HSA dollars on any expense penalty-free.

Health Savings Account

HealthEquity | www.healthequity.com | (866) 346-5800

If you enroll in the high deductible health plan (HDHP) such as 8x8's Standard PPO with HSA, you may be eligible to open a health savings account (HSA).

How an HSA Works

Contributions

You can only contribute up to the IRS maximum contribution:

- **Individual:** \$4,400
- **All other coverage levels:** \$8,750
- **Age 55+:** \$1,000

8x8 contributes annually to your HSA to help you save:

- **Individual:** \$750
- **All other coverage levels:** \$1,500

You must be enrolled in the HSA beginning January 1, 2026, to receive 8x8's contributions.

Things You Should Know

Expenses and Penalties

- An HSA is a savings account that you can use to pay for eligible health care expenses with pre-tax dollars or invest for the future.
- If you use your funds for ineligible expenses, you will be subject to penalties and taxes.
- After age 65, you can spend HSA funds on any expense penalty-free.

Eligibility

You are eligible to fund an HSA if:

- You are enrolled in the Standard PPO with HSA and have no other health coverage.
- You (or your covered spouse) do not fund a health care flexible spending account.
- You are not enrolled in Medicare, TRICARE, or TRICARE for Life.
- You are not claimed as a dependent on someone else's tax return.

Refer to **IRS Publication 969** for eligibility details.

Flexible Spending Accounts

HealthEquity | <https://www.healthequity.com/fsa> | (866) 346-5800

Keep more of your paycheck by using pre-tax FSA dollars to pay for eligible expenses.

Health Care FSA (Not Allowed if You Fund an HSA)

Pay for eligible out-of-pocket medical, dental, vision, and prescription drug expenses with pre-tax dollars. For a full list of health care expenses, see **IRS Publication 502**.

- **Annual contribution limit:** \$3,400¹
- **Eligible expenses:** Copays, coinsurance, deductibles, prescription expenses

Limited Purpose Health Care FSA (Allowed if You Fund an HSA)

If you fund a health savings account, you can also fund a limited purpose health care FSA.

- **Annual contribution limit:** \$3,400¹
- **Eligible expenses:** Dental and vision expenses, as well as medical expenses once the annual deductible under the Standard PPO with HSA plan has been met

Dependent Care FSA

Pay for eligible day care expenses with pre-tax dollars. For a full list of dependent care expenses, see **IRS Publication 503**.

- **Annual contribution limit:** \$7,500¹ if married and filing a joint return or if filing a single or head of household return (\$3,750¹ if married and filing separate tax returns)
- **Eligible expenses:** Day care, after-school care, babysitting (work-related), nanny
- **Eligible dependents:** A spouse, or children under 13 years of age, a child over 13, or an elderly parent residing in your home who is physically or mentally unable to care for him or herself

Commuter FSA

Use pre-tax dollars to pay for expenses related to commuting to and from work.

- **Monthly contribution limit:** \$340
- **Eligible expenses:** Mass transit passes, tokens, fare card, vouchers, parking passes, vanpooling

How Does an FSA Work?



Contribute

Decide how much to contribute to your FSA on an annual basis up to the allowable limits. This amount will be evenly divided by the number of pay periods and deducted from your paycheck on a pre-tax basis.



Pay

Use your FSA debit card to pay for eligible expenses at time of service or submit a claim for reimbursement online. Keep all receipts in case you are required to verify the eligibility of a purchase.



Use It or Lose It

You have until December 31, 2026, to use your health care FSA funds. You may carry over up to \$680 in health care FSA to the next plan year.

Dependent care FSA dollars do not carry over. You can submit claims incurred through December 31, 2026, until March 31, 2027. Any remaining dependent care FSA funds will be forfeited.

Supplemental Medical Benefits

Voya | www.voya.com | (877) 236-7564

When an unexpected accident, illness, or hospitalization happens, make sure you're covered with supplemental medical benefits.

Accident Insurance

Accident insurance can help with expenses incurred due to an injury, ongoing living expenses, and more. Claims payments are made in flat amounts based on services incurred during an accident.

Covered service examples include:

- Ambulance rides
- Emergency room treatment
- MRI, CT scans, or other necessary X-rays

Receive a **\$50 per year wellness benefit** when you complete an eligible health screening (ex. annual well woman, well man exam).

How much does this plan cost?

Level of Coverage	Bi-weekly Costs
Employee Only	\$4.61
Employee + Spouse/DP	\$9.22
Employee + Child(ren)	\$9.91
Employee + Family	\$14.52

How Accident Insurance Works

While Rosie is playing field hockey, she hits her head and is knocked unconscious. She's taken to the ER.

Her accident insurance benefit will help cover:

- **Ambulance ride:** \$550
- **Emergency room treatment:** \$325
- **X-ray:** \$90
- **Treatment for concussion:** \$350

Rosie's accident insurance coverage paid out flat amounts for covered expenses for a total of:

\$1,315

Critical Illness Insurance

If you are diagnosed with a critical illness, you may need additional financial support to help offset treatment costs and cover day-to-day expenses. To be eligible for coverage, the critical illness must be first diagnosed after your initial enrollment date.

This plan pays a lump sum benefit that you can use as you see fit — to pay your mortgage, seek experimental treatment, or handle unexpected expenses.

- **Employee benefit:** \$10,000, \$20,000, or \$30,000;
Guarantee issue: \$30,000
- **Spouse benefit:** 100% of employee's benefit;
Guarantee issue: \$30,000
- **Dependent children benefit:** 50% of employee's benefit election; Guarantee issue: All amounts

Receive a **\$100 per year wellness benefit** when you complete an eligible health screening (ex. annual well woman, well man exam).

How much does this plan cost?

The cost will vary based on your age and the coverage you choose. You can view the complete rate schedule in the Critical Illness Brochure located in Benefitsolver's Reference Center.

How Critical Illness Insurance Works

Manny suffers a heart attack while mowing the lawn. Thankfully, he had enrolled in critical illness insurance coverage.

Manny receives a lump sum payment so he can pay for:

- Medical expenses incurred during and after his heart attack.
- Groceries and his mortgage while he takes time off work to recover.

Manny's critical illness coverage gives him peace of mind with a total payout of:

\$30,000

Supplemental Medical Benefits

Hospital Indemnity Insurance

This plan provides a lump-sum benefit due to a hospitalization.

Benefits include:

- **Hospital admission:** \$1,100 for admission
- **Hospital confinement:** \$150 per day
- **Critical care unit:** \$300 per day
- **Baby delivery covered** with a 30-day waiting period.

Receive a \$50 per year wellness benefit when you complete an eligible health screening (ex. annual well woman, well man exam).

How much does this plan cost?

Level of Coverage	Bi-weekly Costs
Employee Only	\$6.92
Employee + Spouse/DP	\$15.22
Employee + Child(ren)	\$13.84
Employee + Family	\$22.14

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.



Dental

Cigna | www.cigna.com | (800) 244-6224

Your dental coverage provides essential services to support your oral health.

	DPPO Network	
	In Network	Out of Network
Calendar Year Deductible		
Individual/Family	\$50/\$150	\$75/\$225
Calendar Year Plan Maximum		
Per Individual	\$1,500	
Covered Services	You Pay	
Preventive Care (Oral Exams, X-rays, Cleanings, Fluoride, Space Maintainers, Sealants)	Plan pays 100%	Plan pays 100%
Basic Services (Oral Surgery, Fillings, Endodontic Treatment, Periodontic Treatment, Repairs of Dentures and Crowns)	10% after ded.	25% after ded.
Major Services (Crowns, Jackets, Dentures, Bridge Implants)	40% after ded.	50% after ded.
Orthodontia Services (Adults and Children)	50%	
Orthodontia Lifetime Plan Maximum (Per Individual)	\$1,500	



Reasonable and Customary (R&C)

The amount a health plan determines is the normal or acceptable cost range for a specific service or procedure.

How much does this plan cost?

	Bi-weekly Costs
Employee Only	\$2.71
Employee + Spouse/DP	\$16.13
Employee + Child(ren)	\$22.72
Employee + Family	\$38.17

Domestic Partner Coverage and Taxes

- If you cover a domestic partner and/or their children, you'll pay the employee portion on a pre-tax basis and the dependent portion on a post-tax basis.
- The value of your domestic partner's (and/or their children's) coverage will also be added to your income (imputed income) and taxed.

Vision

VSP | www.vsp.com | (800) 877-7195

Vision care is essential to your overall health — completing a regular eye exam can help your eye doctor detect more than 200 major diseases.

In- and out-of-network benefits provide you the freedom to choose any provider. To maximize your vision benefits, be sure use in-network services and supplies.

VSP Vision Plan		
	In Network	Out of Network
Exam (Once every 12 months)		
Eye Exam	\$0 copay	Reimbursement up to \$45
Lenses (Once every 12 months)		
Single Lenses	\$25 copay	Reimbursement up to \$30
Bifocals	\$25 copay	Reimbursement up to \$50
Trifocals	\$25 copay	Reimbursement up to \$65
Frames (Once every 24 months)		
Standard Plastic Frames	\$170 Featured Frame Brands allowance \$150 frame allowance 20% savings on the amount over allowance	Reimbursement up to \$70
Contact Lenses — in lieu of frames & lenses (Once every 12 months)		
Elective	\$150 allowance + \$60 for fitting	Reimbursement up to \$105



Where you go to get glasses matters. When you visit Costco, Walmart or Sam's Club, you'll save more on frames and lenses.

How much does this plan cost?

VSP Vision Plan	Bi-weekly Costs
Employee Only	\$1.51
Employee + Spouse/DP	\$3.78
Employee + Child(ren)	\$3.79
Employee + Family	\$6.79

Domestic Partner Coverage and Taxes

- If you cover a domestic partner and/or their children, you'll pay the employee portion on a pre-tax basis and the dependent portion on a post-tax basis.

- The value of your domestic partner's (and/or their children's) coverage will also be added to your income (imputed income) and taxed.

Life and AD&D Insurance

Voya | <https://presents.voya.com/EBRC/8x8> | (800) 955-7736

Life and accidental death and dismemberment (AD&D) insurance protects you and your family in the event of an accident or death.

Basic Life and AD&D Insurance

8x8 provides basic life and AD&D insurance to all eligible employees at no cost.

- For both basic life and AD&D insurance, you are covered in an amount equal to 2 times your salary up to \$1,000,000.
- AD&D insurance pays specific benefit amounts for a covered accidental bodily injury that causes dismemberment. If death occurs from an accident, 100% of both the life and AD&D benefits would be payable to your beneficiary.
- Benefits are paid to the beneficiary you designate. **Please keep your beneficiary information up to date.**



Guaranteed Issue

If you do not purchase voluntary life insurance when first eligible, or if you request an amount exceeding the guaranteed issue limits listed, you will be subject to medical underwriting and approval before your coverage begins.

Voluntary Life Insurance

To better financially protect your dependents, you may want to purchase voluntary life coverage.

- You must purchase coverage for yourself in order to purchase coverage for your spouse and/or your children.
- Your cost is based on the amount you elect and your age. Payments are made through after-tax payroll deductions.
- To determine how much coverage you may need, consider costs such as funeral expenses, legal expenses, and living expenses for family members.

Coverage	Available benefit
Employee	- Increments of \$10,000 up to 5 times your salary to a maximum of \$500,000 - Guaranteed issue amount: \$150,000
Spouse	- Increments of \$10,000 up to \$500,000 — not to exceed 100% of employee coverage - Guaranteed issue amount: \$50,000
Dependent Child(ren)	A flat \$10,000 benefit for children up to age 26

Things You Should Know

- Imputed Income:** The value of your company-provided life insurance premiums over \$50,000 is considered taxable. Contact your tax professional for more information.
- Age Reduction:** Benefit amounts reduce as you age.
- Portability:** If you leave the company, you can convert your policy to an individual policy and continue your coverage.

Disability Insurance

Voya | STD Claims: (866) 228-8742 | Customer Service: (888) 305-0602

Disability insurance replaces a portion of your income when you experience a qualifying disability and are unable to work.

Important: Disability benefits are reduced by other income you receive, such as Social Security, state disability benefits, pension benefits, and Workers' Compensation.

Short-Term Disability

Short-term disability (STD) insurance provides you with a portion of your weekly income for a non-work-related injury or illness.

You automatically receive coverage at no cost to you.

Coverage	STD Benefit
Weekly Benefit	100% of your weekly earnings (first 12 weeks)
	66.67% of weekly earnings (after 12 weeks)
Weekly Benefit Maximum	No maximum (first 12 weeks) \$2,800 (after 12 weeks)
Waiting Period	7 days
Benefit Duration	25 weeks

Long-Term Disability

If your STD benefits end, and you are still injured, ill, or unable to work, LTD insurance can help meet your financial needs.

Coverage	LTD Benefit
Monthly Benefit	66.67% of monthly earnings
Monthly Benefit Maximum	\$12,000 per month
Elimination Period	180 days
Benefit Duration	Social Security Normal Retirement Age



Elimination or Waiting Period

The amount of time you must wait before you are eligible to receive benefit payments.



Qualifying Disability

A sickness or injury that causes you to be unable to perform any other work for which you are or could be qualified by education, training, or experience.



Benefit Duration

The maximum amount of time you may receive proceeds for a continuous disability.

Retirement Plan

Fidelity | [401k.com](https://www.fidelity.com/401k) | (800) 294-4015

Saving for your future is a vital part of your financial planning.

The 401(k) retirement plan makes it easy for you to save money on a tax-deferred basis.

When you enroll in the plan, your personal account will be funded by:

- Your contributions (pre-tax and/or Roth).
- Employer matching contributions.
- Investment earnings on all contributions.

Eligibility

Full-time employees age 18 or older are eligible to participate in the plan on the day they are hired.

Investing in the Plan

Investments can be changed at any time. To learn more about your investment options, visit **Fidelity** or speak with a financial planner.



Your Contributions

You may contribute up to 100% of your eligible salary on a pre-tax basis and/or Roth after-tax basis, up to the annual IRS limit (for 2026, \$24,500).

Things you should know about your 401(k) plan:

- If you are age 50 or older, you are eligible to contribute an additional catch-up contribution up to the IRS limits (for 2026, \$8,000).
- Your contributions are made through convenient payroll deductions.
- You can change or stop your contributions at any time.
- Starting January 1, 2026, employees who earned more than \$145,000 in FICA wages in 2025 will have to make their catch-up contributions to their retirement plans using a Roth account. This means the contributions will be taxed upfront, rather than upon withdrawal.

8x8 Contributions

8x8 adds to your savings by matching your contributions dollar-for-dollar on the first \$1,500 of pay you contribute. After the first \$1,500, 8x8 will match 50 cents on each dollar up to a total annual company matching contribution of \$3,000.

Vesting

Your contributions are always 100% vested.



Beneficiary Designation

The retirement plan requires you to name at least one beneficiary. You must provide a name and Social Security number for each beneficiary. Make sure to keep their information up to date.



Employee Assistance Program

Employee Assistance Program

Voya/ComPsych

guidanceresources.com | (877) 433-2363

The employee assistance program (EAP) through Voya/ComPsych provides 24/7 confidential support to guide you and your family members through any issue—from the mundane to the more serious.

Experience representatives can help you in every area of life:

- Confidential emotional support
- Family resources
- Legal assistance
- Financial solutions
- ID theft repair
- Access your EAP 24/7 by calling (877) 433-2363 or visiting guidanceresources.com. For first time registration to the site,
 - Enter Web ID: My5848i
 - Enter Company Name: 8x8, (include a hard space after “8x8,”)
 - Select the company from the list
 - Complete the registration process

Other EAP Services You Should Know

You can use your EAP for:

- Finding a reputable pet sitter.
- Hiring an in-home health aide.
- Accessing pre-screened contractors and plumbers.
- Vetting summer or day camps for your kids.
- Locating emergency shelters or relocation services.
- Reviewing debt consolidation, mortgages, or budgeting with a financial counselor.

Empathy Services

Voya/Empathy

join.empathy.com/voya | (251) 299-8482

Empathy, in partnership with Voya, provides compassionate support to help families manage loss and plan ahead.

- Bereavement Support: Personalized care plans, grief resources, obituary creator, and more.
- Funeral Planning: Guides, checklists, concierge support, and price comparison tools.
- Will Preparation: Access to digital will, healthcare directive, and Power of Attorney.

Travel Assistance Services

Voya Travel Assistance

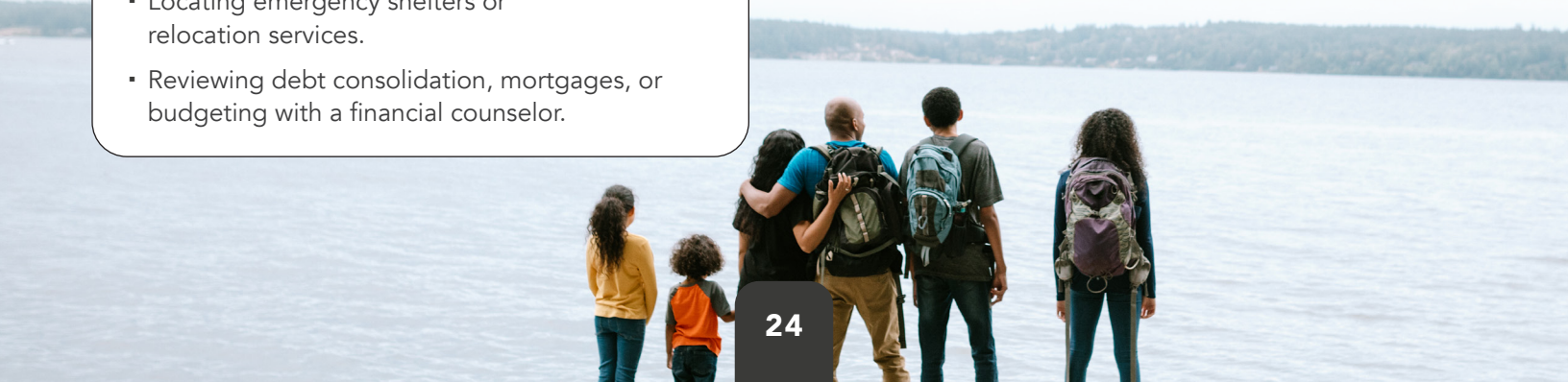
travelsecurity.garda.com | (800) 859-2821

Voya Travel Assistance provides support when traveling 100+ miles from home or abroad (up to 180 days):

- Pre-trip planning and travel support
- Emergency services including recovery of lost or stolen luggage or personal items
- Urgent medical assistance while away from home

Suicide Prevention & Crisis Support

If you or someone you know is struggling, dial **988** for the Suicide & Crisis Lifeline — free, confidential support available 24/7. You can also access confidential counseling and resources through our EAP.



Global Mental Health and Wellbeing Support

We're rolling out comprehensive mental health benefits for you and your dependents through Modern Health.

- **1:1 sessions with care professionals:** 6 sessions with mental health, career, and financial coaches. 6 sessions with therapists.
- **Unlimited live and on-demand group sessions:** Unlimited access to live community sessions to collectively listen, share and learn with others.
- **Meditations and programs:** Self-paced digital resources on topics like stress, burnout, resilience, sleep, parenting, and more.
- **Unlimited text with providers:** Communicate with care providers at your convenience, as often as you'd like.

To get started, download the Modern Health mobile app on your mobile device or visit my.joinmodernhealth.com

What Can Modern Health Help You With?

Stress & Anxiety:

I'm feeling stressed and burned out, and find it hard to focus on simple tasks.

Relationships:

I love my significant other, but I can't get through to them.

Work Performance:

I need someone to talk to about interpersonal challenges at work.

Healthy Lifestyles:

It's rare for me to get a restful night of sleep.

Mindfulness & Meditation:

I can't focus in the moment, and find my thoughts spiriting out of control.

Life Challenges:

My aunt just passed way and I don't know who to talk to about it.

Inclusion & Belonging:

I need support dealing with microaggressions at work.

Financial Wellbeing:

My partner was recently laid off and I'm concerned about supporting my family.

With the introduction of Modern Health, Cleo and Curalinc will be sunset on January 1, 2026. U.S. employees will continue to have access to the ComPsych Guidance Resources, through Voya, which provides an additional 3 therapy sessions, plus work/life services support previously received through Curalinc.



This summary of benefits is not intended to be a complete description of the terms and 8x8 insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan. In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although 8x8 maintains its benefit plans on an ongoing basis, 8x8 reserves the right to terminate or amend each plan, in its entirety or in any part at any time.

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