



Welcome to your 2026 Caterpillar Benefits

The 2026 Benefits Annual Enrollment period is Oct. 29 - Nov. 12, 2025. Use this brochure and *CatHealthEnrollment.bswift.com* to learn what's new, review your options and understand how to make your elections for next year.





What's New for 2026?

We're making a few small changes for next year. Check out *benefits.cat.com*, then click on Health Care and Retirees for details about your benefits.

Medical Plan Premiums	For 2026, you'll see small increases for all plan options. Even with these changes, our premiums remain lower than what most other companies offer.
Healthcare Bluebook	New name! Beginning Jan. 1, 2026, Healthcare Bluebook will be known as Valenz Bluebook . For security purposes, you'll need to enter the last four digits of your Social Security number to log in.
Health Savings Account	Annual contribution limits are increasing to \$4,400 for individual coverage or \$8,750 if you cover dependents. If you're age 55 or older, you can contribute an additional \$1,000.



How to Enroll

You can enroll, drop or change your coverage for health (medical, Rx, dental, vision), voluntary supplemental medical and group legal plans between **Oct. 29 - Nov. 12, 2025.** If you're eligible, you can elect or change your HSA contribution at any time.

Review and Refresh Your Beneficiary Designations

It's a good idea to review your beneficiary designations each year and ensure they reflect your current wishes.

For the HSA, visit *HealthEquity.com/caterpillar*

For the 401(k) and pension plans, visit *CatBenefitsCenter.com*

Go Paperless!

Sign up for electronic communications to receive your benefit communications by email. It's faster and you'll save a tree. To opt in, visit CatHealthEnrollment.bswift.com and follow the instructions online.

Looking for more plan details?

Check out the Summary Plan
Descriptions for each plan at
CatHealthEnrollment.bswift.com.

Choose from one of three ways to make your elections.



Online

CatHealthEnrollment.bswift.com

Follow the prompts to log in.



By Phone

1-833-735-2127



By Mobile Device

bswift benefits app

Download the bswift benefits app from your favorite app store.



TWO WAYS TO GET THE MOST FROM YOUR HEALTH CARE DOLLARS

Did you know that treatment options can vary widely depending on the provider and where you live? Caterpillar is committed to ensuring employees and their families are fully informed about their health condition before making major medical decisions. That's why we offer two ways to ensure you receive the most up-to-date treatment from high-quality, fair-priced providers. Here's how:

- Get peace of mind with an expert second opinion.

 If you're enrolled in one of Caterpillar's Blue Cross

 Blue Shield or UnitedHealthcare medical plan options, you and your covered dependents have free access to expert medical opinions through 2nd.MD. If you're feeling unsure about a new or existing diagnosis, or if you want to explore alternate treatment options, 2nd.MD's top board-certified specialists will connect with you by video or phone to:
 - -Confirm a new or existing diagnosis
 - -Discuss an ongoing condition
 - -Explore alternate treatment options

2nd.MD has an extensive network of top board-certified specialists treating a wide range of conditions. A 2nd.MD consultation is **required for bone**, **spine**, **joint or carpal tunnel syndrome conditions** that may require surgery. Once you make a request, 2nd.MD will handle collecting your medical records and scheduling a video or phone visit when it's convenient for you.

Visit www.2nd.md/caterpillar or download the 2nd.MD app to set up your online account or call 1-866-269-3534.

To get the best care

Caterpillar wants you and your covered family members to get the right care at the right time with the best results.



Find providers who rate well for your specific procedure. Some providers are better than others at certain procedures. The price they charge can vary by hundreds — or even thousands — of dollars. With Valenz Bluebook (formerly Healthcare Bluebook), it's easy to find medical providers and facilities that offer high value care — the highest quality care at a fair price.



When you search for and use a high-value/Fair Priced™ provider within a 12-month period, you can **receive a debit card worth \$25 – \$1,500**, depending on the procedure (subject to ordinary income tax).

Visit healthcarebluebook.com/cc/Caterpillar (access code: Caterpillar) to get started. For security purposes, you'll need to enter the last four digits of your Social Security number to log in.

Medical Plan Options

IN-NETWORK	TRADITIONAL PLANS			
	BCBS National	UHC Choice Plus (PPO)		
Annual deductible	Individual: \$600 Family: \$1,200	Individual: \$1,000 Family: \$2,000		
Annual out-of-pocket maximum ¹	Individual: \$2,500 Family: \$5,000 (excludes Rx drugs)	Individual: \$3,500 Family: \$7,000 (excludes Rx drugs)		
Medical coinsurance	You pay 20% after deductible			
Health Savings Account (HSA) Contribution	N/A	N/A		
Office visit	Primary: You pay a \$20 copay Specialist: You pay a \$40 copay	You pay 20% after deductible		
Hospital	You pay 20	0% after deductible		
Urgent care	Visit: You pay a \$20 copay Procedures: You pay 20% after deductible	You pay 20% after deductible		
Emergency care	You pay 20% after deductible plus a \$100 for \$125 fee (fee is waived if admitted)			
PHARMACY	BCBS National	UHC Choice Plus (PPO)		
	Walmart, Kroger, Walgreens and CPRxN² and their affiliates			
Caterpillar Pharmacy Network	Walmart, Kroger, Walgree	ens and CPRxN² and their affiliates		
		ens and CPRxN² and their affiliates		
Pharmacy Network				
Pharmacy Network Annual deductible	Do	es not apply		
Pharmacy Network	Do Tier 0	You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay		
Pharmacy Network Annual deductible Retail ³ up to a	Do Tier 0 Tier 1	You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay		
Pharmacy Network Annual deductible Retail ³ up to a	Do Tier 0 Tier 1 Tier 2	You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max)		
Pharmacy Network Annual deductible Retail ³ up to a	Do Tier 0 Tier 1 Tier 2 Tier 3 Tier 4	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max)		
Pharmacy Network Annual deductible Retail ³ up to a	Do Tier 0 Tier 1 Tier 2 Tier 3 Tier 4	You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max)		
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Pharmacy Network Annual deductible Retail ³ up to a 30-day supply	Do Tier 0 Tier 1 Tier 2 Tier 3 Tier 4 2026 MON (INCLUDES MEDICAL, PRESCRIPTI	You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max) ITHLY PREMIUMS ON DRUGS, DENTAL AND VISION BENEFITS) UHC Choice Plus (PPO)		
Pharmacy Network Annual deductible Retail ³ up to a 30-day supply	Tier 0 Tier 1 Tier 2 Tier 3 Tier 4 2026 MON (INCLUDES MEDICAL, PRESCRIPTI BCBS National \$270	You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max) ITHLY PREMIUMS ON DRUGS, DENTAL AND VISION BENEFITS) UHC Choice Plus (PPO) \$189		
Pharmacy Network Annual deductible Retail ³ up to a 30-day supply Individual only Spouse only	Tier 0 Tier 1 Tier 2 Tier 3 Tier 4 2026 MON (INCLUDES MEDICAL, PRESCRIPTI BCBS National \$270 \$405	You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max) ITHLY PREMIUMS ON DRUGS, DENTAL AND VISION BENEFITS) UHC Choice Plus (PPO) \$189 \$284		

Cell and gene therapy and digital therapeutics related to cell and gene therapy are not covered under any plan option,	
effective Oct. 1, 2025.	

²CPRxN is Community Pharmacy Prescription

Drug Network.

IN-NETWORK	CONSUMER DIRECTED HEALTH PLANS			
IIV-IVE I VVOIIK	UHC Consumer Choice (CDHP)	UHC Consumer Max (CDHP)		
Annual deductible	Individual only: \$1,750 If you enroll dependents: \$3,500	Individual only: \$3,000 If you enroll dependents: \$6,000		
Annual out-of-pocket maximum ¹	Individual only: \$3,500 If you enroll dependents: \$7,000 (includes Rx drugs)	Individual only: \$5,000 If you enroll dependents: \$10,000 (includes Rx drugs)		
Medical coinsurance	You pay 20% after deductible			
Health Savings Account (HSA)	Caterpillar contributes: Caterpillar contributes: Individual only: \$300 If you enroll dependents: \$600 Caterpillar contributes: Individual only: \$550 If you enroll dependents: \$1,100			
Contribution	See page	e 11 for eligibility rules.		
Office visit	You pay	20% after deductible		
Hospital	You pay	20% after deductible		
Urgent care	You pay	20% after deductible		
Emergency care	You pay	20% after deductible		
PHARMACY	UHC Consumer Choice (CDHP) UHC Consumer Max (CDHP)			
		,		
Caterpillar Pharmacy Network	Walmart, Kroger, Walg	reens and CPRxN² and their affiliates		
	You pay the full contracted price until the deductible, you pay the copay/c	, ,		
Pharmacy Network	You pay the full contracted price until the deductible, you pay the copay/c	reens and CPRxN² and their affiliates you meet the annual deductible. After you meet binsurance as shown in the table below.		
Pharmacy Network Annual deductible	You pay the full contracted price until the deductible, you pay the copay/c The deductible is waived for specifi	reens and CPRxN ² and their affiliates you meet the annual deductible. After you meet oinsurance as shown in the table below. c medications on the Preventive Drug List. ⁴		
Pharmacy Network	You pay the full contracted price until the deductible, you pay the copay/c The deductible is waived for specifi Tier 0	reens and CPRxN² and their affiliates you meet the annual deductible. After you meet binsurance as shown in the table below. c medications on the Preventive Drug List.⁴ You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay		
Pharmacy Network Annual deductible Retail ³ up to a	You pay the full contracted price until the deductible, you pay the copay/c The deductible is waived for specifi Tier 0	you meet the annual deductible. After you meet oinsurance as shown in the table below. c medications on the Preventive Drug List.4 You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay		
Pharmacy Network Annual deductible Retail ³ up to a	You pay the full contracted price until the deductible, you pay the copay/c The deductible is waived for specifi Tier 0 Tier 1	reens and CPRxN² and their affiliates you meet the annual deductible. After you meet oinsurance as shown in the table below. c medications on the Preventive Drug List.⁴ You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN²: You pay a \$10 copay You pay 20% (\$35 min / \$70 max)		
Pharmacy Network Annual deductible Retail ³ up to a	You pay the full contracted price until the deductible, you pay the copay/c The deductible is waived for specifi Tier 0 Tier 1 Tier 2 Tier 3 Tier 4	reens and CPRxN² and their affiliates you meet the annual deductible. After you meet binsurance as shown in the table below. c medications on the Preventive Drug List.⁴ You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN²: You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max)		
Pharmacy Network Annual deductible Retail ³ up to a	You pay the full contracted price until the deductible, you pay the copay/c The deductible is waived for specifi Tier 0 Tier 1 Tier 2 Tier 3 Tier 4	you meet the annual deductible. After you meet oinsurance as shown in the table below. It medications on the Preventive Drug List. You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN2: You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max)		
Pharmacy Network Annual deductible Retail ³ up to a	You pay the full contracted price until the deductible, you pay the copay/c The deductible is waived for specifi Tier 0 Tier 1 Tier 2 Tier 3 Tier 4 2026 M (INCLUDES MEDICAL, PRESCRII	reens and CPRxN² and their affiliates you meet the annual deductible. After you meet binsurance as shown in the table below. c medications on the Preventive Drug List.⁴ You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN²: You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max) ONTHLY PREMIUMS PTION DRUGS, DENTAL AND VISION BENEFITS)		
Pharmacy Network Annual deductible Retail ³ up to a 30-day supply	You pay the full contracted price until the deductible, you pay the copay/c The deductible is waived for specification. Tier 0 Tier 1 Tier 2 Tier 3 Tier 4 2026 M (INCLUDES MEDICAL, PRESCRIFULL CONSUMER Choice (CDHP)	you meet the annual deductible. After you meet consurance as shown in the table below. comedications on the Preventive Drug List. You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN2: You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max) ONTHLY PREMIUMS PTION DRUGS, DENTAL AND VISION BENEFITS) UHC Consumer Max (CDHP)		

\$252

\$441

Retiree + children

Retiree + family

\$144

\$252

Which Medical Plan Option is Right for You?

Use **Emma EnrollPro** – a simple enrollment tool on *CatHealthEnrollment.bswift.com* – to learn which plan might be the best fit for you. Consider these items to help you decide:

WOULD You rather	THEN CONSIDER			COMMENTS	
	BCBS National	UHC Choice Plus (PPO)	UHC Consumer Choice (CDHP)	UHC Consumer Max (CDHP)	
Pay lower premiums?			✓	✓	CDHPs have lower premiums.
Pay copays for physician office visits?	✓				Additional services, like X-rays and labs, are subject to the deductible.
Have a lower deductible?	✓	✓			BCBS National and UHC Choice Plus (PPO) have lower deductibles.
Have no deductible for prescription drugs?	✓	✓			In the CDHPs, you must first meet the deductibles.
Use any medical provider or hospital?		√	✓	√	BCBS National is the only plan that requires you to use in-network medical providers to receive benefits.
Have an HSA?			✓	√	CDHPs allow you and Caterpillar to contribute to an HSA, if you're eligible.
Have an HSA, but with a lower annual out-of-pocket maximum?			✓		UHC Consumer Choice (CDHP) has an HSA, but the annual out-of-pocket maximum is lower than in the UHC Consumer Max (CDHP).

Health Savings Account (HSA)

(For UHC Consumer Choice or UHC Consumer Max CDHP participants)

	HSA ¹
Who is eligible to contribute?	There are certain legal requirements to be eligible to open and contribute to an HSA. For details, see <i>IRS Publication 969</i> or <i>HealthEquity.com/caterpillar</i> . If you enroll in an HSA using the online enrollment process, you'll be prompted to confirm your eligibility and provide authorization.
	Got a Caterpillar HRA? If you or your spouse have a Caterpillar Health Reimbursement Arrangement (HRA), you're not eligible to contribute to an HSA or receive a company contribution.
	\$4,400 for individual coverage \$8,750 for retiree + spouse, child(ren) or family coverage
2026	During the year you turn age 55 and up to age 65, you can contribute an additional \$1,000.
contribution limit	If your spouse has their own HSA, your combined contribution totals are subject to the family contribution limit.
	You can contribute post-tax funds into your account – up to the annual contribution limit – and then deduct those contributions on your annual tax return.
Caterpillar health care plan option the HSA can pair with	UHC Consumer Choice (CDHP) or UHC Consumer Max (CDHP)
Eligible expenses ²	Out-of-pocket medical, prescription drug, dental, vision and hearing expenses for you and your dependents
How much money	Consumer Choice CDHP: \$300 individual coverage / \$600 retiree + spouse, child(ren) or family coverage
does Caterpillar contribute in January 2026?	Consumer Max CDHP: \$550 individual coverage / \$1,100 retiree + spouse, child(ren) or family coverage Certain restrictions may apply. See <i>IRS Publication 969</i> for details.
What happens to unused funds at year-end?	You can carry over unused funds from year to year. And the account is yours to keep if you change plans. Once your balance reaches \$1,000, you have the option to invest in mutual funds.
Who administers the account?	HealthEquity

For more information on HSAs, see *HealthEquity.com/caterpillar*.

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¹ Your HSA is an account with HealthEquity. It's not administered by Caterpillar, is not an employer-sponsored plan and is not an ERISA plan. Contributions may be subject to state taxes in some states. Check with your state department of revenue.

² Eligible expenses are determined by the Internal Revenue Service. For a complete listing of eligible expenses, visit irs.gov to view IRS Publication 502 (Health Care).

Dental Benefits (Included with your medical plan premium)

CIGNA DENTAL BENEFITS			
Annual deductible (does not apply to preventive services)	\$50 for individual \$100 for family		
Annual maximum (amount the plan will pay per person per year)	\$2,000 per person		
Preventive care (two cleanings per 12-month period, annual exams and X-rays)	Covered at 100%, not subject to deductible; annual maximum applies		
Basic services (fillings, root canals, periodontics and oral surgery)	You pay 20% after deductible		
Major services (crowns, bridges, partials and dentures, or implants)	You pay 50% after deductible		
Orthodontia (for dependents age 21 and younger)	Plan pays 50% up to \$1,500 lifetime maximum per person		

Vision Benefits (Included with your medical plan premium)

Below is a summary of benefits when using VSP providers.

VSP - FOR GLASSES			
Eye exams Once per calendar year	You pay a \$20 copay		
Lenses Once per calendar year	You pay a \$20 copay for standard lenses (single vision, lined bifocal/trifocal)		
Frames Every other calendar year	You pay a \$20 copay; receive up to \$200 allowance for one pair of frames		
VSP - FOR CONTACT LENSES			
Contact lens exam Once per calendar year	You pay up to a \$60 copay		
Contact lenses (in lieu of lenses and frames)	Receive up to \$140 allowance per calendar year		
Medically necessary contact lenses (limited to members whose vision can't be corrected through glasses)	You pay a \$20 copay per calendar year in lieu of lenses and frames		

Hearing Aid Benefits (Included with your medical plan premium)

Hearing aids	You're eligible for new hearing aids every 60 months through EPIC Hearing Healthcare.
Getting started	Call EPIC at 1-866-956-5400 to register and speak with a counselor who will assess your needs and coordinate a referral to a provider near you. Use an EPIC Hearing Healthcare network provider to receive the maximum coverage.

Other Benefits, Programs and Resources

	VENDOR
	Voluntary supplemental medical plans through Voya can help protect you from significant or unexpected out-of-pocket expenses and can complement your Caterpillar medical coverage. You pay the full cost for this coverage.
Voluntary Supplemental Medical Plans	Options include: ✓ Accident Insurance ✓ Hospital Indemnity Insurance ✓ Critical Illness Insurance
	Visit YourChoiceVoluntaryBenefits.com for details and enroll through CatHealthEnrollment.bswift.com.
Group Legal Insurance Plan	Through ARAG, you can receive access to a nationwide network of attorneys for a variety of issues such as will and estate planning, real estate, traffic tickets, landlord disputes, family law matters, bankruptcy and more. Visit YourChoiceVoluntaryBenefits.com for details and enroll through CatHealthEnrollment.bswift.com.
Identity Protection	Let Allstate Identity Protection Pro Plus protect your identity while you focus on your life. If Allstate detects suspicious activity, they will alert you. A privacy advocate will do the legwork to address the issue and restore your name. Visit YourChoiceVoluntaryBenefits.com for details, and make changes through CatHealthEnrollment.bswift.com.

If the content of this communication or any representations made by any person regarding the plans conflict with or are inconsistent with the provisions of the plan documents, the provisions of the plan documents are controlling. To the fullest extent permitted by law, Caterpillar Inc. reserves the right to amend, modify, suspend, replace or terminate any of its plans, policies or programs, in whole or in part, at any time and for any reason, by appropriate company action.



Have questions?

- For eligibility and enrollment questions or questions about voluntary benefits, call the Caterpillar Health Enrollment Center at 1-833-735-2127.
- For questions about a specific benefit or coverage situation, call the vendor directly. You can find vendor contact information on page 15.



Contacts

Please refer to the contact information below, *benefits.cat.com* or the Summary Plan Descriptions on *CatHealthEnrollment.bswift.com* (scroll down and click on the Resource Library link, then look under Summary Plan Descriptions) for further information about your benefits.

BENEFIT	VENDOR	WEBSITE	PHONE NUMBER
Health Care and Voluntary Benefits Assistance	Caterpillar Health Enrollment Center	CatHealthEnrollment.bswift.com	1-833-735-2127
	Blue Cross Blue Shield of IL	bcbsil.com/caterpillar	1-844-228-2227
Medical	BCBS Caterpillar NetWork	MyBlueElementIL.com	1-888-228-1120
	UnitedHealthcare (UHC)	myuhc.com	1-866-228-4215
Second Opinion Service	2nd.MD (free second opinion service)	2nd.md/caterpillar or download the 2nd.MD mobile app	1-866-269-3534
Medical-	MDLive (BCBS members)	MDLIVE.com/bcbsil or download MDLive's mobile app	1-888-676-4204
Virtual Visits	UHC virtual care partners (UHC members)	myuhc.com/virtualvisits or download the UHC mobile app	N/A
Prescription Drugs	Prime Therapeutics (formerly Magellan Rx)	web.primetherapeutics.com/ member/login	1-877-228-7909
	Prime Therapeutics Pharmacy - Specialty Medications (formerly Magellan Rx)	PrimeTherapeutics.com/ specialtypharmacy/patient	1-866-554-2673
	Walgreens Mail Service - Mail Order (Home Delivery)	WalgreensMailService.com	1-866-840-1222 (TTY 1-800-925-0178)
Dental	Cigna Dental	myCigna.com	1-800-244-6224
Vision	VSP	VSP.com	1-800-877-7195 (TTY: 711)
Health Savings Account	HealthEquity	HealthEquity.com/caterpillar	1-844-311-9732
Other Benefits	Caterpillar Health Enrollment Center - Accident, Hospital Indemnity and Critical Illness Insurance - Group Legal - ID Protection	Visit YourChoiceVoluntaryBenefits.com for details and enroll through CatHealthEnrollment.bswift.com	1-833-735-2127

CATERPILLAR®



Enroll by Nov. 12

Benefits annual enrollme

Benefits annual enrollment for 2026 is here! Make your elections by the deadline.

HR COMMUNICATIONS AB-4400
100 NE. ADAMS STREET
PEORIA, IL 61629
RRST LAST
ADDRESS
CITY, STATE, ZIP