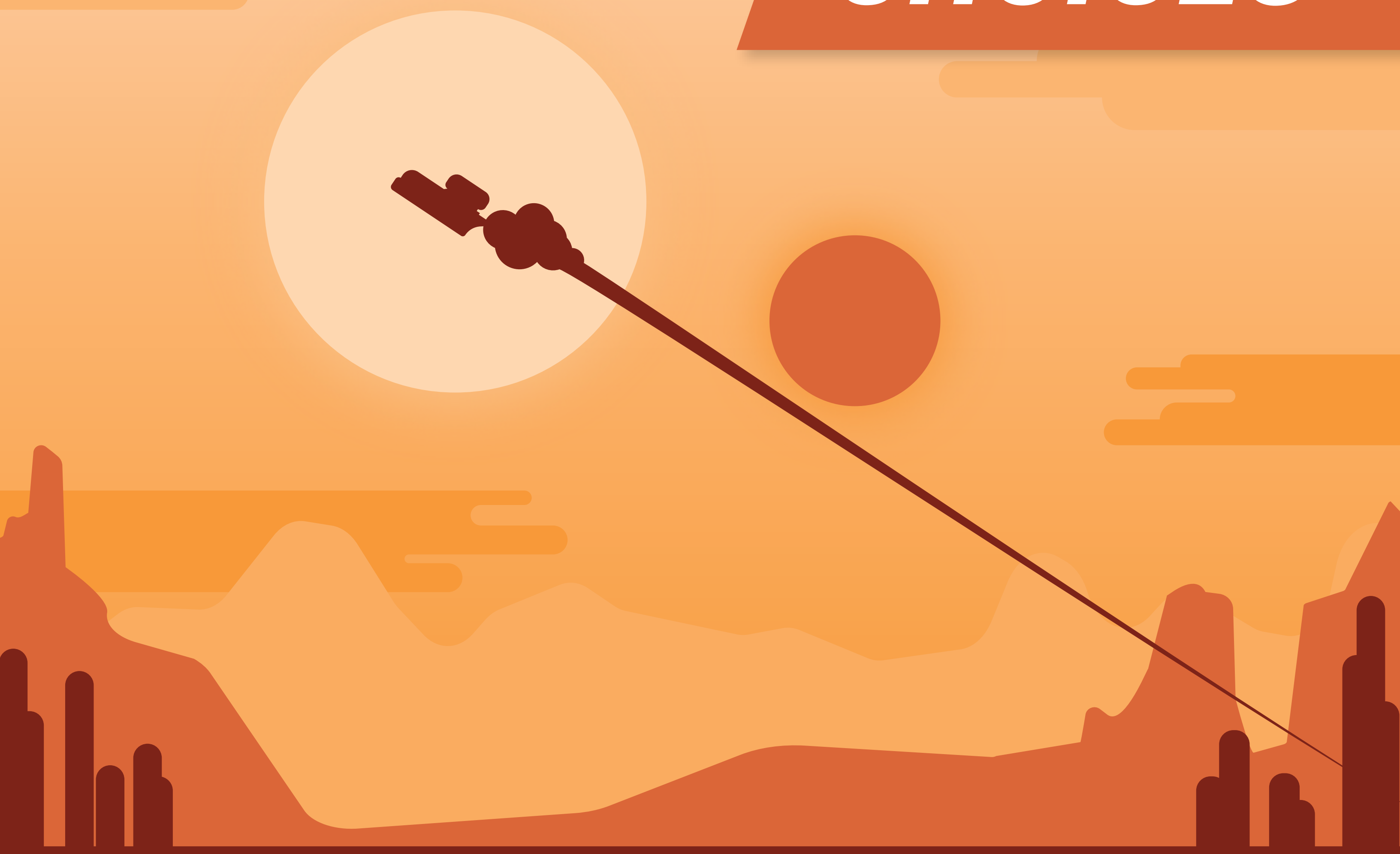
HOT TOPIC® INC.

HOT TOPIC | BOXLUNCH | HER UNIVERSE

A GALAXY OF CHOICES



2026 BENEFITS GUIDE

MISSION CONTROL

What's Inside

THIS IS THE WAY TO BETTER BENEFITS

Welcome to Your Benefits Galaxy.

At Hot Topic, we believe our employees are our most important asset—and we've built a stellar suite of benefits to support the physical, emotional, and financial wellbeing of you and your family.

Whether you're reviewing your current elections or exploring new options, this guide is your star map. It's designed to help you navigate your choices with confidence and clarity.

Keep in mind: This guide is a summary to help you understand your options. The official plan documents provide more in-depth information. If there's ever a difference between what's in this guide and what's in the plan documents, the plan documents are what we follow.

Get Guidance from Your Benefits Copilots

Need help navigating your benefits? Call in your copilots—**Benny** and **TouchCare**—to guide your journey.

Benny by Peopled

Available 24/7, Benny is an AI-powered chat that can help:

- Compare health plans side by side.
- Estimate your out-of-pocket costs based on how you typically use care.
- Get personalized recommendations based on your needs.
- Answer common benefits questions.

To access, scan the QR code or visit tinyurl.com/bennyht.
Log in with your Hot Topic email.

TouchCare

Prefer a human guide? TouchCare connects you with real people who can:

- Explain health and voluntary benefits.
- Schedule appointments and find in-network providers.
- Locate therapists or care centers.
- Review and negotiate medical bills.
- Compare costs for care and prescriptions.

To get support, call **866-486-8242** or visit touchcare.com/ask. Representatives are available Monday – Friday, from 8am – 9pm ET (6am – 7pm MT, 5am – 6pm PT). You can also use the TouchCare app for help on the go.

ELIGIBILITY

Who's Cleared for Launch?

All full-time employees, part-time assistant store managers, and part-time distribution center associates are eligible for benefits.

For plans that offer dependent coverage, you can also enroll the following family members:

- Your legal spouse, including same-sex spouses.
- Domestic partners for whom you've completed a Domestic Partner Affidavit Form.
- Children under age 26, even if they don't live with you, are married, or work.
- Children 26 or older who have a disability and are primarily dependent on you for support.
- Children named in a Qualified Medical Child Support Order (QMCSO) as defined by federal law.

Dependent Proof of Relationship

To bring your crew aboard your benefits, you'll need to provide proof of relationship documents—like a marriage license, birth certificate, or the Domestic Partner Affidavit Form. If you don't provide the necessary documents, your dependent's benefits will be canceled.

You can upload documents to our self-service enrollment tool, UKG. If you need help, email our Benefits Team at benefits@hottopic.com.

Domestic Partner Contribution Rates

Health benefits are governed by federal tax rules, which recognize legal spouses and dependent children as qualified dependents. That means the amount that Hot Topic pays for their health coverage is excluded from your taxable income.

Domestic partners and their children, however, are not automatically considered qualified dependents. Unless your domestic partner meets the criteria outlined in Internal Revenue Code Section 152, the amount Hot Topic pays for their coverage is added to your taxable income. You'll also pay for their coverage using after-tax dollars.

Because of this difference in tax treatment, there are separate paycheck contribution rates for domestic partners and their children. See the Cost of Health Coverage section on page 9 for a full list of rates.

For questions about dependent eligibility or tax status, contact the Benefits Team at **benefits@hottopic.com** or 626-839-4681.

MISSION WINDOWS

When Can You Enroll?

You can enroll in or update your benefits:

- During annual Open Enrollment.
- As a new hire within **30 days** of your start date.
- Following a qualifying life event—like marriage, divorce, or welcoming a new child. You must inform the Benefits Team within 30 days of the event to change your benefits.

Moments that Change the Path: Qualifying Life Events

Qualifying life events for you and your dependents include:

- Marriage, divorce, legal separation, annulment, or death of a spouse.
- Birth, adoption, or death of a child.
- Court order requiring coverage for a child.
- You or your dependent starting or ending a job that affects eligibility or access to coverage.
- A change to your work hours or job role that affects your benefits eligibility—like switching from part-time to full-time or receiving a promotion.
- Child gaining or losing dependent status.
- Change in residence or worksite that affects access to in-network healthcare providers.
- Events covered under federal rules like HIPAA and CHIP, such as the loss of coverage elsewhere or becoming eligible or ineligible for Medicare or Medicaid.

Any benefits changes you make must be consistent with the qualifying life event. Changes will be effective the first of the month after the event. (There is a 30-day waiting period for benefits changes related to a promotion.)

PLOT YOUR COURSE

How to Enroll

Benefit Type	Enrollment Tool	When You Can Enroll	How to Access
Medical, Dental, Vision, Life, Disability, Flexible Spending Accounts, Supplemental Health (now with our new vendor Voya!)	UKG	Open Enrollment, New Hire, Qualifying Life Event	Log in to n32.ultipro.com. ■ If prompted, enter company code Ulti91748*. ■ Your user ID is an “H” followed by your six-digit employee number. (If your employee number is less than six digits, add “0” in front of it to make it six digits.) ■ Your default password is your birth month, birth day, and five-digit zip code (MMDDZZZZZ). If you need to reset your password, email helpdesk@hottopic.com with your employee number. Go to Menu > Myself > Benefits and click your enrollment event (e.g., Open Enrollment).
Pet Insurance, Student Loan Refinancing, Legal Insurance, Low-Cost Financing	Corestream	Anytime	Enroll at hottopic.corestream.com/login.

CALL IN REINFORCEMENTS

Enrollment Help

And don’t forget to use **Benny by Peopled** and **TouchCare**, our benefits assistants, for help understanding what’s available and choosing options that work best for you.

Don’t Forget to Designate Your Beneficiaries

You’ll need to designate a beneficiary or beneficiaries for your 401(k) retirement plan and life insurance. This ensures that your benefits go directly to the people of your choice if you pass away. If you don’t designate at least one beneficiary, your estate will go into probate—which could cost your surviving family members and friends time and money.

To designate 401(k) beneficiaries, log into your account on Fidelity’s website at myfidelitysite.com/hottopic.

To designate Basic and Supplemental Life Insurance beneficiaries, log into UKG at n32.ultipro.com.

To designate Life with Long-Term Care Insurance, log into your account on Chubb’s website at chubb.benselect.com/enroll/Login.aspx?Path=Hottopic.

KNOW THE CODE

Helpful Terms

We know—most people aren't fluent in benefits speak. To help you cut through the noise, below we've translated some common benefits terms to help you understand what's what.

MEDICAL/GENERAL TERMS

Coinsurance: This is the percentage you'll pay out-of-pocket for a covered service. For example, if you have a 30% coinsurance for diagnostic visits, that means you'll pay 30% of the bill and the plan will pay the remaining 70%.

Copay: A copay is a set dollar amount you'll pay a provider at the time of service.

Deductible: The amount you must pay out-of-pocket before your plan will begin to pay for services. Not all services are subject to a deductible. Usually, it's for specific services like out-of-network care or hospital visits. Our plan summary tables show which services have a deductible, and which services don't.

Explanation of Benefits (EOB): The statement you receive from the insurance carrier that explains how much the provider billed, how much the plan paid, and how much you owe. Generally, you should not pay a provider bill until you've received and reviewed your EOB (except for copays).

In-Network: Providers (doctors, hospitals, labs, etc.) who are part of your health plan's network and agree to charge negotiated rates. In-network services typically cost less than out-of-network services.

Out-of-Network: Providers (doctors, hospitals, labs, etc.) who are not part of your health plan's network. Out-of-network services typically cost you more than in-network services. With some plans, such as HMOs and EPOs, out-of-network services are not covered at all.

Out-of-Pocket Costs: Healthcare costs you pay using your own money at the time of service. These include things like coinsurance, copays, and deductibles.

Out-of-Pocket Maximum: The most you'll pay out-of-pocket for covered services in a year. Once you reach your out-of-pocket maximum, the plan covers 100% of eligible expenses.

Preventive Care: Preventive care includes routine health services—such as annual checkups, screenings, and immunizations—designed to help you stay healthy and detect potential health issues early. These services are typically covered at 100% when you use in-network providers, meaning there's no cost to you.

Prior Authorization: A requirement that your provider gets approval from your health plan before a specific service, procedure, or medication is covered. This helps ensure the treatment is medically necessary and covered under your plan.

KNOW THE CODE

Helpful Terms

PRESCRIPTION DRUG TERMS

Quantity Limits: A restriction on the amount of medication you can receive at one time or over a certain period. These limits are based on safety guidelines and standard dosing practices.

Specialty Pharmacy: Provides special drugs for complex conditions, like multiple sclerosis, cancer, and HIV/AIDS.

Step Therapy: A process where you may need to try one or more lower-cost, proven medications before your plan covers a more expensive or newer drug. It's designed to promote safe, effective, and affordable treatment options.

Tier 1: These medications offer the best value for your money. They're mostly generics that are just as effective as brand-name drugs but cost less, making them your most affordable option.

Tier 2: These drugs include a mix of generics and brand names. They may cost more than Tier 1 but still offer solid value. Choosing Tier 2 over Tier 3 can help you manage your out-of-pocket costs.

Tier 3: These are typically brand-name drugs and some generics that come with the highest price tag. Ask your doctor if a Tier 1 or Tier 2 option could work just as well for your needs.

DENTAL TERMS

Basic Services: Generally include coverage for fillings and oral surgery.

Endodontics: Commonly known as root canal therapy.

Implant: An artificial tooth root that is surgically placed into your jaw to hold a replacement tooth or bridge. Many dental plans do not cover implants.

Major Services: Generally include restorative work like crowns, bridges, dentures, inlays, and onlays.

Orthodontia: Some dental plans offer Orthodontia services for children (and sometimes adults too) to treat alignment of the teeth. Orthodontia services are typically limited to a lifetime maximum.

Periodontics: Diagnosis and treatment of gum disease.

Pre-Treatment Estimate: An estimate of how much the plan will pay for treatment. A pre-treatment estimate is not a guarantee of payment.

Still Confused? Consult Your Benefits Copilot

TouchCare connects you with real people who can:

- Explain health and voluntary benefits.
- Schedule appointments and find in-network providers.
- Locate therapists or care centers.
- Review and negotiate medical bills.
- Compare costs for care and prescriptions.

To get support, call 866-486-8242 or visit touchcare.com/ask. Representatives are available Monday – Friday, from 8am – 9pm ET (6am – 7pm MT, 5am – 6pm PT). You can also use the TouchCare app for help on the go.

YOUR COST OF COVERAGE

Your Bi-Weekly Medical, Dental, & Vision Rates (26 Pay Periods)

Hourly & Salary	Triple S Medical (per paycheck)	Delta Dental (per paycheck)		VSP Vision (per paycheck)		
Plan	Triple S	DPPO	DPPO Premium	Core	Buy-Up	Premium
Employee Only	$25.42	$5.77	$7.48	$0.00	$3.14	$4.20
Employee + 1	$110.45	$16.83	$20.27	$0.30	$4.29	$5.73
Employee + 2 or More	$126.51	$30.14	$35.79	$0.90	$7.70	$10.28

DOMESTIC PARTNER COST OF COVERAGE

Dental Rates for Your Domestic Partner (DP)

Hourly & Salary	After-Tax Deduction (per paycheck)		Amount Taxable as Income (per paycheck)	
Plan	DPPO	Premium DPPO	DPPO	Premium DPPO
DP Only	$2.42	$2.43	$11.06	$12.78
DP + Child(ren) of DP	$5.28	$5.29	$ 24.37	$28.31

Vision Rates for Your Domestic Partner (DP)

Hourly & Salary	After-Tax Deduction (per paycheck)			Amount Taxable as Income (per paycheck)		
Plan	Core	Buy-Up	Premium	Core	Buy-Up	Premium
DP Only*	$0.00	$0.00	$0.01	$0.30	$1.15	$1.53
DP + Child(ren) of DP*	$0.00	$0.00	$0.01	$0.90	$4.56	$6.08

*You may only enroll your DP and/or DP's child(ren) in the vision core plan if they are enrolled in a Hot Topic Inc. medical plan.

Required Domestic Partner Documentation

You must complete a DP Affidavit form to add your domestic partner to your health plan coverage. To access the form, scan the QR code or click here. Email your completed form to benefits@hottopic.com.

MEDICAL PLANS

Your Shield in the Field

Triple S Salud | https://salud.grupotriples.com **| 787-774-6060 | 800-981-3241**

Your medical plan is your shield in the field. Our Triple S plan covers in-network preventive care 100%, contributes to the cost of diagnostic care, and includes prescription drug coverage. It also covers in-network virtual medical visits 100%, with no out-of-pocket costs for plan members!

Below is a summary of our Kaiser medical plan and prescription drug coverage. For more details, check out the Summary Plan Description on our Benefits Website. Log in with code **HT1989**.

Plan Summary	
Medical (In-Network Coverage Only)	
Major Medical Coinsurance	20% (Required precertification for services outside of Puerto Rico)
Out of Pocket Maximum	$6,350 individual / $12,700 family
Physician Services Generalist / Specialist	$5 per visit / $15 per visit (including subspecialist)
Virtual Medical Visits1	Covered 100%
General Hospitalization	$50 / admission in preferred hospitals $100 / admission in non-preferred hospitals
Lab, X-ray, and Diagnostic	25%
Urgent Care	$15 / visit illness or accident
Emergency Room	$50 / visit illness or accident $25 / visit if recommended by Teleconsulta
Organ Transplant (maximum benefit per lifetime)	$2,000,000
Prescription Drug (In-Network Coverage Only)	
Retail Pharmacy (up to 30-day supply) Generic / Preferred Brand / Non-Preferred Brand / Specialty	$5 copay / $15 copay / you pay 20% up to $20 / you pay 20% up to $100
Mail Order (up to 100-day supply) Generic / Preferred Brand / Non-Preferred Brand / Specialty	$10 copay / $30 copay / you pay 15% min $40 / Not Covered

Hourly & Salary	**Triple S Medical (per paycheck)**
Plan	Triple S
Employee Only	$25.42
Employee + 1	$110.45
Employee + 2 or More	$126.51

VIRTUAL CARE

Triple-S offers multiple ways to access care from wherever you are—whether you need medical advice, a virtual visit, or help deciding where to go.

TeleConsulta Nurse Line

Available 24/7, TeleConsulta connects you with graduate nurses who can help you manage symptoms, recommend next steps, and determine whether you need in-person care. This service helps avoid unnecessary ER visits and provides peace of mind when you're unsure what to do.

To access the nurse line, call 1-800-255-4375 (also listed on your health plan card) or download the Mi Triple-S App.

TeleConsulta MD

When your regular doctor isn’t available, you can schedule virtual consultations with physicians, specialists, and psychologists. These visits simplify access to care, reduce wait times, and allow prescriptions to be sent directly to your preferred pharmacy.

Visit https://salud.grupotriples.com/en/teleconsulta, call 800-992-2498, or download the Mi Triple-S App to get started.

PRESCRIPTION DRUG COVERAGE

Triple-S offers multiple pharmacy programs to help you manage prescriptions easily and affordably.

Over-the-Counter (OTC) Drug Coverage

Triple-S includes OTC drug alternatives in most prescription plans. With a doctor's prescription, you can access covered OTC medications at $0 copay. Covered categories include gastrointestinal agents (e.g., omeprazole), antihistamines (e.g., cetirizine, loratadine), and nasal corticosteroids (e.g., fluticasone, budesonide).

Triple-S en Casa

This home delivery service brings your prescribed medications and eligible over-the-counter items directly to your door—at no additional cost. It's especially helpful for those with mobility challenges, busy schedules, or limited access to transportation. Caregivers can also register to manage and place orders on your behalf.

To get started, visit https://triplesencasa.com or call 888-525-4842.

Mail Order Program

If you take maintenance medications for chronic conditions, the mail order program allows you to receive up to a 90-day supply by mail. This reduces trips to the pharmacy and ensures you always have your medication on hand. You can order online, by phone, fax, or e-prescribe.

To get started, visit https://www.alliancerxwp.com/home-delivery or call 800-778-5427.

Specialty Drug Management

Triple-S partners with an exclusive pharmacy network to provide specialized medications for complex conditions like HIV, cancer, multiple sclerosis, and rheumatoid arthritis. You can choose to have these medications delivered to your home, provider's office, or another location.

Call 787-774-6060 for more information. Partner pharmacies include Walgreens, Alivia Specialty Pharmacy, Alivia Infusion Services, and CVS Caremark

90-Day Extended Supply Program

For maintenance medications treating conditions like diabetes, asthma, and thyroid disorders, Triple-S offers a 90-day extended supply option at participating pharmacies. This helps reduce refill frequency and out-of-pocket costs.

Step Therapy Program

Step therapy helps ensure safe and cost-effective treatment by starting with proven, lower-cost medications. If the first-step drug doesn't provide the expected benefit, your plan will cover a second-step drug. This approach is designed by doctors and pharmacists to balance effectiveness and affordability.

Traveling with Triple-S

If you're traveling outside Puerto Rico, Triple-S has you covered through the BlueCard Program. This benefit allows you to access care across the United States using your Triple-S card.

Covered services include emergency medical care, treatments not available in Puerto Rico, and coverage for full-time college students and temporary duty assignments (up to 3 months). You'll pay any applicable deductible or coinsurance based on your U.S. coverage.

To get started, call 1-800-810-BLUE (2583) or visit http://provider.bcbs.com to find participating providers and confirm coverage details.

WHERE TO DOCK FOR CARE

Whether you've got the sniffles or a sprain, our medical plans cover lots of ways to get care. With all these options, it can be confusing to figure out which to choose. This chart breaks down where to go and when, helping you avoid spending more money than necessary.

Care Location	What It Is	Best for...	Cost
Virtual Visit	With a virtual visit, you can meet with a provider using your phone, tablet, or computer.	■ Pink eye ■ Bronchitis ■ Cough/colds ■ Diarrhea ■ Fever ■ Seasonal flu ■ Sinus problems ■ Sore throats ■ Stomach aches ■ Bladder infections	No out-of-pocket costs for medical virtual visits under our plans!
Primary Care Physician (PCP)	Your primary care provider can provide preventive and routine care. They can access your medical records, manage your medications, and refer you to a specialist, if needed.	■ Checkups and preventive care ■ Minor skin conditions ■ Vaccines ■ General health management	$$
Urgent Care (UC)	Urgent care is best for when you need care quickly, but it's not an emergency.	■ Sprains or strains ■ Minor burns or infections ■ Minor broken bones ■ Cuts that need a few stitches	$$$
Emergency Room (ER)	The ER is for serious or life-threatening conditions that require immediate care.	■ Heavy bleeding ■ Large open wounds ■ Sudden weakness ■ Sudden trouble talking ■ Chest pain ■ Spinal injuries ■ Severe head injuries ■ Difficulty breathing	$$$$

Stay Mission-Ready with Preventive Care

Our medical plan covers in-network preventive care 100%. Making the most of this coverage is a great way to stay on top of your health. Think of it as a routine systems check—early detection leads to earlier treatment, which often results in better outcomes and lower out-of-pocket costs. Below we outline recommended preventive services based on your age.

Age	Covered Services	
Child	■ Well baby care ■ Annual physical ■ Immunizations	■ Medical/family history and physical exam ■ Blood pressure check ■ Vision screening
Adult	All Adults ■ Annual physical ■ Blood pressure check ■ Cholesterol screening ■ Depression screening ■ Diabetes screening ■ Hepatitis C screening ■ Immunizations ■ Flu shot ■ FDA-approved contraception ■ PrEP (HIV prevention medication)	Age Dependent ■ Pap test ■ Mammogram ■ Colonoscopy ■ Prostate cancer screening

Get Personalized Cancer Screening & Support with Color®

color

All benefits-eligible Hot Topic employees can use Color at no additional cost to them.

Risk Assessment & Screenings. Complete a personalized health questionnaire to understand your cancer risk. If eligible, you'll receive free at-home screening kits for:

- Colorectal cancer (stool test)
- Prostate cancer (blood test)
- Cervical cancer (urine test)
- Genetic testing (saliva test for hereditary risk)

For screenings that can't be done at home, Color will help schedule appointments—with no cost to you when using in-network providers. After you complete your screening, Color will send you a $10 Amazon gift card.

Support After Diagnosis. If you're diagnosed with cancer, Color provides:

- Guidance from oncologists and oncology nurses to help you understand treatment options and prepare questions for your care team.
- Help from care advocates to coordinate appointments, find in-network providers, and navigate financial concerns like transportation and lodging.
- Access to peer-led support groups for emotional support and community connection.

Note: This benefit is available only to employees who qualify for Hot Topic benefits. Family members are not eligible.

To get started, scan the QR code, visit color.com/hot-topic, or call **844-352-6567**.

DENTAL PLANS

Get Smile Ready for Launch

Delta Dental | deltadentalins.com | DHMO: 800-422-4234 | DPPO: 888-335-8227

Our dental plans through Delta Dental help keep your smile ready for launch. The table below summarizes coverage details. For more information, check out the Summary Plan Descriptions on our Benefits Website. Log in with code **HT1989**. **For how to enroll in our dental plan, see page 6.**

Dental Plan Summary

	DPPO		Premium DPPO	
	In-network	Out-of-network	In-network	Out-of-network
Calendar Year Deductible (individual / family)	$50/$150 waived for diagnostic & preventive)	$75/$225	$50/$150 waived for diagnostic & preventive)	$75/$225
Calendar Year Maximum	$1,500 per member	$1,500 per member	$2,000 per member	$2,000 per member
Diagnostic & Preventive	Plan pays 80%	Plan pays 80%	Plan pays 100%[3]	Plan pays 80%[3]
Basic Services				
Endontics	Plan pays 80%[2]	Plan pays 50%[2]	Plan pays 90%[2]	Plan pays 50%[2]
Periodontics	Plan pays 80%[2]	Plan pays 50%[2]	Plan pays 90%[2]	Plan pays 50%[2]
Major Services	Plan pays 50%[2]	Plan pays 50%[2]	Plan pays 50%[2]	Plan pays 50%[2]
Orthodontic Services				
Orthodontia	Plan pays 50%	Plan pays 50%	Plan pays 50%	Plan pays 50%
Lifetime Max	$1,500 per member	$1,500 per member	$2,000 per member	$2,000 per member
Children up to age 25	Covered	Covered	Covered	Covered
Adults	Covered	Covered	Covered	Covered

[1]Refer to the copay schedule for a full list of covered services and costs.
[2]After deductible.
[3]Diagnostic & Preventive waived from applying to Calendar Year Maximum.

Delta Dental Resources

Delta Dental's website offers a variety of helpful tools and resources. With just a few clicks, you can find in-network dentists, print a member ID card, check plan details and eligibility, browse claim information and find claim forms, get answers to frequently asked questions, and more. Register your account today at deltadentalins.com.

Your Cost of Coverage per Paycheck

Hourly & Salary	Bi-weekly (26 Pay Periods)		Weekly (52 Pay Periods) Rhode Island and New York	
Plan	DPPO	Premium DPPO	DPPO	Premium DPPO
Employee Only	$5.77	$7.48	$2.89	$3.74
Employee + 1	$16.83	$20.26	$8.41	$10.13
Employee + 2 or more	$30.14	$35.79	$15.07	$17.90

SmileWay Wellness Benefit

If you've been diagnosed with diabetes, heart disease, rheumatoid arthritis, HIV/AIDS, or stroke, you have access to additional periodontal procedures and cleanings under the plan. To opt in, sign into your account at deltadentalins.com and click **Benefits > Optional Details > Opt In.**

VISION PLANS

See Across the Multiverse

VSP | vsp.com | **800-877-7195**

Our vision plans from VSP help you stay sharp and focused, whether you're scanning the multiverse or zeroing in on the details. The table below summarizes coverage details. For more information, check out the Summary Plan Descriptions on our Benefits Website. Log in with code **HT1989. For how to enroll in our vision plan, see page 6.**

Vision Plan Summary

	Vision Core		Vision Buy-Up		Vision Premium	
	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network
Eye Exam Benefit Frequency*	$10 copay 1x per calendar year	$45 allowance 1x per calendar year	$10 copay 1x per calendar year	$45 allowance 1x per calendar year	$10 copay 1x per calendar year	$45 allowance 1x per calendar year
Lenses Single Bifocal Trifocal Frequency	20% discount 20% discount 20% discount Unlimited	Not covered Not covered Not covered N/A	$25 copay $25 copay $25 copay 1x per calendar year	$30 allowance $50 allowance $65 allowance 1x per calendar year	$25 copay $25 copay $25 copay 1x per calendar year	$30 allowance $50 allowance $65 allowance 1x per calendar year
Frames Benefit Frequency	20% discount Unlimited	Not covered N/A	$150 allowance 24 months	$70 allowance 24 months	$180 allowance 1x per calendar year	$70 allowance 1x per calendar year
Contacts Medically Necessary Elective Frequency	15% discount 15% discount Unlimited	Not covered Not covered N/A	Covered in full $120 allowance 1x per calendar year	$210 allowance $105 allowance 1x per calendar year	Covered in full $180 allowance 1x per calendar year	$210 allowance $105 allowance 1x per calendar year

**VSP plans include one comprehensive eye exam per year. To schedule your appointment, visit www.vsp.com.*

Where To Get Contacts & Eyewear Online

Eyeconic is the only place where VSP members can shop online for in-network contacts and eyewear. Visit eyeconic.com to upload your prescription and choose from a wide range of brands.

Your Cost of Coverage per Paycheck

Hourly & Salary	Bi-weekly (26 Pay Periods)			Weekly (52 Pay Periods) Rhode Island and New York		
Plan	Core	Buy Up	Premium	Core	Buy Up	Premium
Employee Only	$0.00	$3.14	$4.20	$0.00	$1.57	$2.10
Employee + 1	$0.30	$4.29	$5.73	$0.15	$2.15	$2.87
Employee + 2 or more	$0.90	$7.70	$10.28	$0.45	$3.85	$5.14

Exclusive Eyeconic Savings

Members of our VSP vision plans get access to exclusive Eyeconic savings.

- **Glasses & Sunglasses:** 20% savings on a complete pair of prescription glasses and sunglasses, including lens enhancements, from any VSP Provider within 12 months from your last well vision exam.
- **Retinal Screening:** No more than a $39 copay on routine retinal screening as an enhancement to a well vision exam. Not applicable to the VSP Base Plan.
- **Laser Vision Correction:** Average 15% off the regular price, or 5% off the promotional price; discounts only available from contracted facilities.

To see even more savings, visit eyeconic.com.

LIFE, ACCIDENT, & DISABILITY INSURANCE

Your Financial Force Field

The Standard | standard.com | **800-628-8600**

Life, Accidental Death & Dismemberment (AD&D), and Disability insurance acts as your financial force field, protecting your family's financial well-being in the event of your death, injury, or serious illness.

Basic Life & AD&D Insurance

Benefits-eligible employees automatically receive $25,000 in Life and AD&D insurance. This benefit is 100% company-paid and gives your loved ones a cash payment if you pass away or suffer from a serious injury, like the loss of a limb, sight, speech, or hearing.

Supplemental Life Insurance

You have the option to buy additional life insurance coverage for yourself and your dependents.

Coverage Type	Benefit Amount	Cost Per Paycheck
Employee Supplemental Life	Increments of $10,000 up to $500,000 Guaranteed Issue: $200,000	Per $10,000 Coverage: Costs range between $0.23 and $12.71 depending on your age
Spouse/Domestic Partner Supplemental Life	Increments of $5,000 up to $250,000[1] Guaranteed Issue: $150,000	Per $5,000 Coverage: Costs range between $0.11 and $6.35 depending on the covered person's age
Child(ren) Supplemental Life	Increments of $2,000 up to $10,000[1,2]	Costs range between $0.40 and $2.00 depending on the coverage amount you elect

[1]Not to exceed 100% of employee amount.

[2]Birth to age 26, regardless of student or marital status.

Note: New hires can enroll themselves, their spouse, and their children up to the Guaranteed Issue without needing to answer health questions, as long as they enroll within 31 days of their eligibility date. During Open Enrollment, The Standard will allow an increase of $10,000 for employees and $5,000 for spouses, without needing to answer health questions, as long as the election does not exceed the Guaranteed Issue.

LIFE, ACCIDENT, & DISABILITY INSURANCE

Disability Insurance

Disability insurance protects your income if you're unable to work due to a non-work-related illness or injury. We provide two types: Short-Term Disability and Core Long-Term Disability.

- **Core Long-Term Disability (LTD):** Pays 40% of your covered earnings, up to $5,000 per month. Benefits begin after 90 days of disability and last until your disability ends, or when you reach normal retirement age. **Note:** If you can't work due to a preexisting condition, there is a 12-month waiting period before benefits are paid.

- **Short-Term Disability (STD):** Pays 60% of your covered earnings, up to $2,308 per week. Benefits begin after seven days of disability, and last up to 90 days from when your disability began.

Short-Term Disability (STD): Pays 60% of your covered earnings, up to $2,308 per week. Benefits begin after seven days of disability, and last up to 90 days from when your disability began. Full-time employees working 32 hours or more per week are eligible for disability. STD and core LTD benefits are 100% company paid. Disability payments are taxable and may be reduced if you also receive income from non-company programs, like State Disability Insurance or Social Security.

LTD Buy-Up Insurance

You can buy more LTD coverage to increase your benefit to 60% of your covered earnings, up to $7,500 per month. This employee-paid option costs $0.13 per $100 of coverage. To estimate your per-paycheck cost, calculate: (Your Hourly Rate × 2080) × (0.0013 ÷ 26). **Note:** This formula doesn't apply if you earn more than $150,000 annually—contact the Benefits Team for your per-paycheck cost.

Beneficiary Designation

When enrolling in UKG, don't forget to designate a beneficiary. This helps ensure your money goes to a person of your choice if you pass away. Without a beneficiary, your estate can go into probate, which can cost your surviving family members and friends time and money.

COMMUTER BENEFIT PLAN

Blast Off Without Breaking the Bank

GoNavia | naviabenefits.com | 800-669-3539 | Company Code: HTO

Whether you're navigating hyperspace or just the daily commute, there's a smart way to save. The GoNavia commuter program allows you to pay work-related parking and transit expenses using pre-tax dollars. This lowers your taxable income, which saves you money on your taxes.

You can set aside up to $325 per month. Start, pause, and restart contributions at any time as your commuting needs change.

Eligible Expenses

Eligible expenses include transit options like:

- Subways, streetcars, and commuter trains
- Buses
- Ferries
- Parking lots and garages
- Vanpool
- Rideshare, including UberPOOL and Lyft Shared Rides

Ineligible expenses include individual taxi or driving services and non-work-related travel.

How to Enroll

Visit naviabenefits.com/participants and register your account with company code **HTO**. Once registered, you can set your monthly contribution amount.

Your contribution will be deducted from your paychecks pre-tax and loaded onto a Navia debit card, which you can use to buy your work-related parking and transit. No need to submit receipts—your card can recognize that you're paying for commuting.

Unused Funds

If you don't use your full balance within the month, your funds will automatically roll over month-to-month as long as you're an active, benefits-eligible employee.

VOLUNTARY BENEFITS

Reinforcements for Every Orbit

No matter where your orbit takes you, we offer a variety of voluntary benefits to help you navigate whatever comes your way.

Supplemental Health Plans (Voya)

We offer three supplemental health plans through Voya. These plans provide financial protection by paying you cash benefits if you have an unexpected health event.

- **Accident Insurance** provides cash payments if you experience an injury, like fractures, dislocations, broken teeth, concussions, and more. It also covers services like ambulance rides, ER visits, surgery, and medical testing.
- **Critical Illness Insurance** pays a lump-sum benefit if you're diagnosed with a covered condition, like cancer, heart attack, or stroke.
- **Hospital Indemnity Insurance** pays a fixed daily benefit if you're admitted to the hospital due to illness, injury, or pregnancy.

You can enroll in these plans only during Open Enrollment, as a new hire, or following a qualifying life event. Both you and your dependent family members are eligible to participate.

To learn more about these benefits, their cost, and the coverage amounts available, visit our Benefits Website at hottopicboxlunchperks.com. Log in with code **HT1989**.

VOLUNTARY BENEFITS

Pet Insurance (Nationwide)

Our discounted pet insurance through Nationwide can help keep your furry, feathery, and scaly friends well!

- Covers accidents, illnesses, surgeries, X-rays, MRIs, prescriptions, therapeutic diets, and more.
- Use any vet, anywhere—no pre-approvals needed.
- Get cash back on eligible vet bills after meeting a $250 annual deductible.
- Choose your reimbursement level: 50% or 70%.
- Coverage excludes pre-existing conditions, boarding, and grooming.

Legal Insurance (LegalEASE)

Our voluntary legal plan through LegalEASE offers access to a network of attorneys who can offer consultations and services at discounted rates. Access support for a range of everyday matters, like will and estate planning, family law, real estate transactions, auto and traffic issues, and more.

Student Loan Refinancing (GradFin)

GradFin connects you with a Student Loan Consultant to help you find the best repayment strategy—whether you're seeking a new loan, refinancing, or loan forgiveness.

GradFin offers:

- One-on-one consultations to help you understand your student loans.
- Guidance on all available repayment, forgiveness, and refinancing options.
- Personalized analysis of your federal and/or private loans.
- Expert recommendations on which loans to refinance and how to pay off the rest efficiently.

Low-Cost Financing (Kashable)

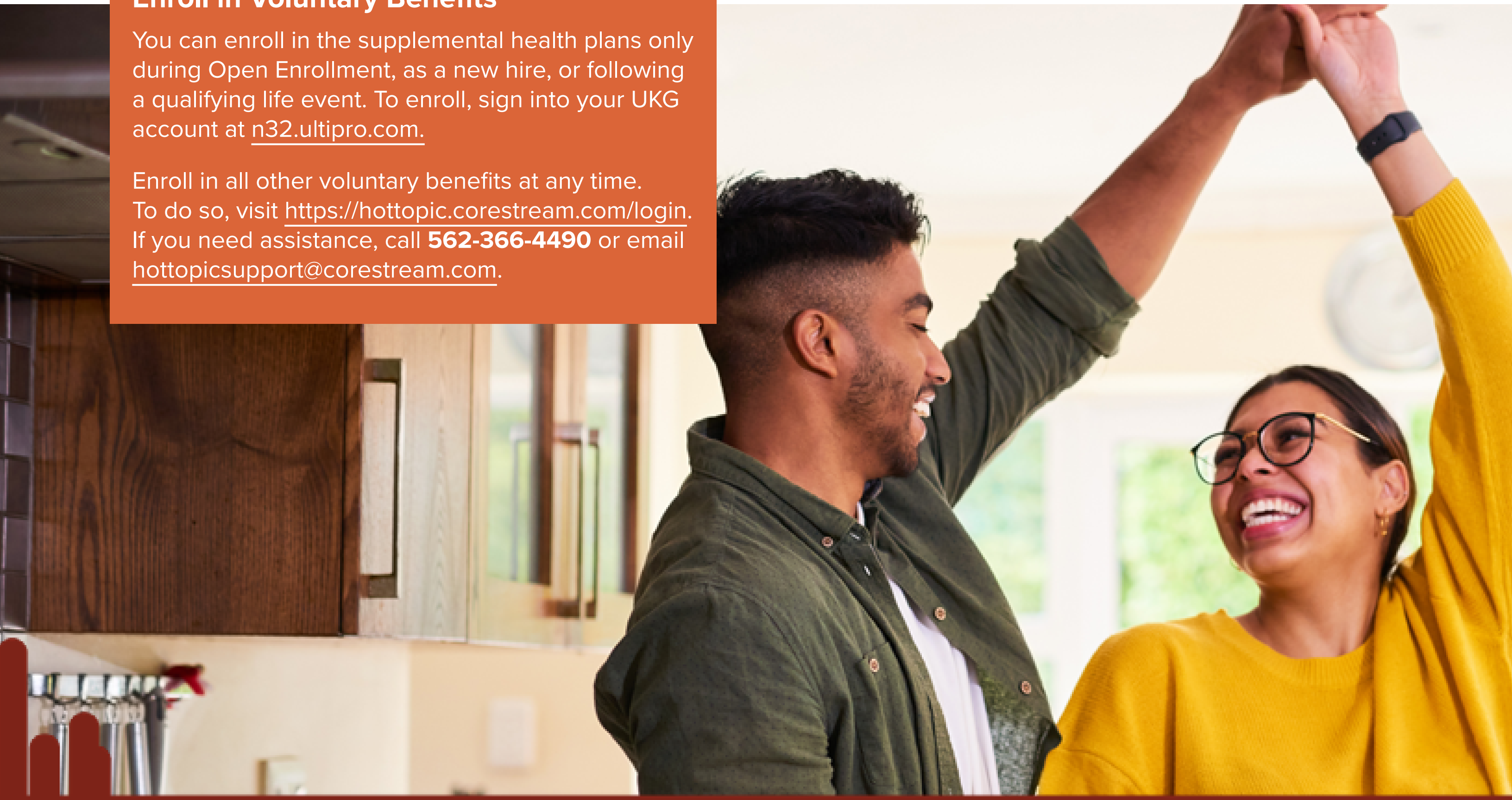
Kashable offers low-cost financing options for:

- Paying down expensive debt
- Medical bills
- Family expenses
- Auto repairs

Enroll in Voluntary Benefits

You can enroll in the supplemental health plans only during Open Enrollment, as a new hire, or following a qualifying life event. To enroll, sign into your UKG account at n32.ultipro.com.

Enroll in all other voluntary benefits at any time. To do so, visit https://hottopic.corestream.com/login. If you need assistance, call **562-366-4490** or email hottopicsupport@corestream.com.



PAID TIME OFF

Recharge at Your Base Station

We offer multiple types of paid time off to help you rest, recharge, and rise again.

Holidays

Hot Topic observes seven paid holidays in the U.S. each year:New Year's Day

- New Year's Day
- Memorial Day
- Independence Day
- Martin Luther King Jr. Day
- Labor Day
- Thanksgiving Day
- Christmas Day

Bereavement

All employees are eligible for three days of bereavement pay if an immediate family member passes away.

Volunteer Time Off

Employees (including DC managers and supervisors) can take up to eight hours off per quarter to volunteer at a charity of their choice, as long as it's on our pre-approved list of eligible organizations. You're eligible after 90 days of service, and time off is prorated.

Jury Duty

Regular full-time employees are eligible for up to 10 paid days off each calendar year to serve jury duty.

Leaves of Absence

There may be times when you need a leave of absence for medical reasons (including pregnancy), family care, or military service. To request leave, you must submit a "Request for Leave of Absence Form" for review by your immediate supervisor and Human Resources. To access the form, please email LOARequests@hottopic.com.

Sick Pay

Full-time SM and FTASM and Part-time PTASM, KH, and SA must complete the 30-day waiting period prior to using sick pay hours. Sick hours are accrued monthly, at the end of the month.

- Annual Maximum Sick-Pay Hours Usage: 12 days
- Maximum Sick Pay Hours Accrual: 15 days
- Maximum Sick-Pay Hours Annual Rollover: 15 days

Full-Time SM and FTASM

Sick Pay Hours Accrual: 1 day (1 day = 8 hours) for every 115 hours worked in a calendar month.

Part-Time PTASM, KH and SA

Sick Pay Hours Accrual: 1 day (1 day = average hours worked for the previous 2 months) for every 115 hours worked in a calendar month.

Vacation Time

Associates who work at least 115 hours per calendar month will accrue 1.25 days of vacation time for that month, up to a maximum of 15 days per year.

- For any month in which the 115-hour minimum requirement is not met, the associate will not have any accrual for that month.
- There is no cap on vacation accrual.
- For part-time associates, one day of vacation is based on the average hours during the previous two months.
- The vacation balance for each associate is calculated on a monthly basis. The updated balance is noted on the associate's paycheck stub or can be viewed through Self-Service.
- Management enters available vacation time in the time and attendance system.

WORK/LIFE PERKS

First-Class Extras for Your Journey

Every space flight deserves first-class extras. Our work/life perks offer added benefits to make your ride smoother and more enjoyable.

Travel Assistance

As part of our company-paid Life Insurance through The Standard, you, your spouse, and your children up to age 25 have access to Travel Assistance. This benefit is available when you travel 100 miles or more from home, offering:

- Credit card and passport replacement.
- Missing baggage support.
- Help replacing missing prescriptions or lost corrective lenses.
- Connection to medical care providers, interpreter services, and local attorneys.
- Visa, weather, and currency exchange information.

To access services, email medservices@assistamerica.com or download the AssistAmerica app. You can also reach out by phone at **800-872-1414** (for U.S., Canada, Puerto Rico, U.S. Virgin Islands, Bermuda) or **609-986-1234** (everywhere else). Provide reference number **01-AA-STD-5201**.

EarnIn

EarnIn is an app that gives you access to the pay you've earned when you want it, without waiting for payday. Employees with a U.S. Bank Account are eligible. To get started, visit EarnIn's website.

Tuition Assistance Program

Working and going to school at the same time can be challenging—and expensive. Our Tuition Assistance Program helps by offering up to $400 per course and $100 for one textbook per course, up to three times per year.

AllCampus

With AllCampus, take advantage of online certificate and degree programs with preferred tuition rates from some of the nation's top universities. AllCampus advisors can help you select the ideal program aligned with your goals and timeline. They can also provide career-oriented education coaching throughout your educational journey. Visit AllCampus' website for more information.

Store Discounts

Our employees have access to exclusive discounts.

Hot Topic Associate Discount Amounts

- 40% discount on Hot Topic apparel, accessories, shoes, and select novelty items.
- 40% discount on Hot Topic gift cards (in-store only).
- 20% discount on high-end collectibles over $50, CDs, vinyl, DVDs, and most electronic items.

BoxLunch Associate Discount Amounts

- 40% discount on BoxLunch accessories, shoes, novelty items, CDs, vinyl, DVDs, and select electronic items.
- 40% discount on BoxLunch gift cards (in-store only).

MENTAL HEALTH & WELLNESS RESOURCES

Balance Your Mind & Mission

Available to All Employees

Hot Topic Mental Health Foundation

- **Mental Health America:** Get a mental health screening anytime, anywhere with Mental Health America's Screening Tool. Screens are anonymous, free, and confidential.
- **National Suicide Prevention Lifeline & Crisis Text Line:** If you or someone you know is in crisis, call the National Suicide Prevention Lifeline at **800-273-8255** or text **MHA to 741-741** to be connected to a trained crisis counselor. They're available 24/7.
- **LGBTQ Community Resources:** If you're a member of the LGBTQ community and need to talk to a trained counselor, call the Trevor Project's lifeline 24/7 at **866-488-7386**.

For more information, visit our Benefits Website at hottopicboxlunchperks.com. Log in with code **LERK9BR**.

Available to Triple S Medical Plan Members

Behavioral Health & Crisis Support

Triple-S offers confidential support for emotional, financial, and legal concerns, as well as help with substance use, relationship issues, and work-related stress. Services include access to clinical psychologists, industrial psychologists, and psychotherapy. Crisis support is available 24/7.

To get started, call the crisis line at **787-448-5651** or contact a clinic at **1-800-284-9515** or **787-651-2384**.

Services You May Need	Your In-Network Cost	Limitations & Exceptions
Mental/Behavioral health or Substance Abuse Disorder **Outpatient Services**	$5 copay /group therapy $15 copay /visit (including collaterals	15 visits to psychiatrists or clinical psychologists, collaterals, and group therapies.
Mental/Behavioral health or Substance Abuse Disorder **Inpatient Services**	Preferred Hospitals $25 copay / partial admission $50 copay / admission Non-Preferred Hospitals $50 copay / partial admission $100 copay / admission	30 days per member, per year for substance abuse hospital services. Two partial hospital days equivalent to one regular hospital day.

MENTAL HEALTH & WELLNESS RESOURCES

Clinical Care Coordination

If you're managing a chronic condition or need help coordinating your care, Triple-S provides access to a team of nurses, health educators, social workers, and nutritionists. They can help evaluate your health needs, schedule services, and support you in managing conditions such as diabetes, asthma, heart failure, hypertension, COPD, obesity, high-risk pregnancies, cancer, and more.

To get started, call **787-706-2552** or **1-800-981-4860** (Monday–Friday, 8:00am to 4:30pm).

Prenatal & Women's Health Education

Triple-S offers virtual workshops and telephone counseling for prenatal care, childbirth, and breastfeeding. Additional programs promote women's health through educational videos and events.

To get started, email contigomama@ssspr.com.

Functional Fitness Program

If you complete the required education modules and nutritionist questionnaires, you can access a virtual fitness program with a personal trainer to help build monthly routines and improve your physical activity.

To get started, visit mitriples.com and register for the program.

MOBILE RESOURCES

Smart Tech for Smooth Landings

App	Features	IOS	Android
Benefits Assistant TouchCare	Connect with advocates who can: ▪ Explain your benefits ▪ Find in-network providers ▪ Resolve claim and billing issues ▪ And more		
Dental Delta Dental	▪ Find an in-network dentist ▪ Access your ID card ▪ Check benefits and coverage ▪ Search claims		
Vision VSP	▪ Find a VSP provider near you ▪ View your ID card and benefits ▪ Look up past services and visits ▪ See frame and contact lens options before your visit ▪ Access exclusive savings		
Triple S Salud	▪ View your digital ID card and coverage info ▪ Find providers and office locations near you ▪ Check services received, pre-authorizations, and lab results ▪ Chat with a nurse and submit reimbursements		
ALL PROVIDERS Plan Documents Passcode: **HT1989**	▪ Summary Plan Descriptions (SPDs) ▪ Evidence of Coverage (EOCs) ▪ Summaries of Benefits and Coverage (SBCs) ▪ Benefit Summaries ▪ Carrier informational fliers ▪ And more!		

DIRECTORY

Command Center Contacts

Benefit	Vendor	Phone	Website	Policy/Group #
Medical	Triple S Salud	787-774-6060 800-981-3241	https://salud.grupotriples.com	SP0003127
Medical	TeleConsulta	800-992-2498	https://salud.grupotriples.com/en/teleconsulta	714347
Dental	Delta Dental	888-335-8227	www.deltadentalins.com	DPPO: #22512
Vision	VSP	800-877-7195	www.vsp.com	12286153
Life and AD&D	The Standard	800-628-8600	www.standard.com	171859
Commuter	Navia	800-669-3539	www.naviabenefits.com	Employer Code: HTO
Supplemental Health Plans	Voya	855-663-8692	https://presents.voya.com/EBRC/hottopic	
Voluntary Benefits *(except supplemental health plans)*	Corestream	562-366-4490	www.hottopic.corestream.com hottopicsupport@corestream.com	
Medicare	SGIA	888-284-3314	Info@sgiamedicare.com	

Our Benefits Team is available at benefits@hottopic.com or **626-839-4681**. You can also check out our Benefits Website at www.hottopicboxlunchperks.com. Log in with code **HT1989**.

Get Guidance from Your Benefits Copilots

Need help navigating your benefits? Call in your copilots—Benny and TouchCare—to guide your journey.

Benny by Peopled

Available 24/7, Benny is an AI-powered chat that can help:

- Compare health plans side by side.
- Estimate your out-of-pocket costs based on how you typically use care.
- Make sense of your 401(k) and retirement options.
- Get personalized recommendations based on your needs.
- Answer common benefits questions.

To access, scan the QR code or visit tinyurl.com/bennyht.
Log in with your Hot Topic email.

TouchCare

Prefer a human guide? TouchCare connects you with real people who can:

- Explain health and voluntary benefits.
- Schedule appointments and find in-network providers.
- Locate therapists or care centers.
- Review and negotiate medical bills.
- Compare costs for care and prescriptions.

To get support, call **866-486-8242** or visit touchcare.com/ask. Representatives are available Monday – Friday, from 8am – 9pm ET (6am – 7pm MT, 5am – 6pm PT). You can also use the TouchCare app for help on the go.

Health Plan Notice

Each year, employers are required to share certain health plan notices that explain your rights and protections under federal law. Which include but are not limited to the following notices:

- Medicare Part D Creditable Coverage Notice
- HIPAA Comprehensive Notice of Privacy Policy and
- Procedures
- General COBRA Notice
- Women's Health and Cancer Rights Notice
- Michelle's Law Notice
    - This notice is still required when a health plan permits dependent eligibility beyond age 26, but conditions such eligibility on student status. Further, the notice is still necessary if the plan permits coverage for non-child dependents (e.g. grandchildren) that is contingent on student status. The notice must go out whenever certification of student status is requested.

CHIP Notice

Some states offer financial help through Medicaid or the Children's Health Insurance Program (CHIP) to pay for health coverage. If you or your children are eligible for this kind of assistance, you may be able to use it to help pay for your employer health plan.

You can view and download the notices anytime by scanning the QR code below or by using the link provided. If you need a physical copy of these notices, please email benefits@hottopic.com or mail your request to Hot Topic Inc., Attn: Benefits Department, 18305 San Jose Ave, City of Industry, CA 91748.

https://hottopicboxlunchperks.com/
Password: **HT1989**

Benefits intranet site > Benefits USA> Documents: https://hottopic.sharepoint.com/sites/Benefits/Shared%20Documents/Forms/AllItems.aspx

NOTES

HOT TOPIC® INC.

HOT TOPIC | BOXLUNCH | HER UNIVERSE