

New Hire Highlights

2026 Benefits



At HelloFresh, our employees are our most valuable asset and we're dedicated to investing in your well-being. That is why we are continuing to offer a range of benefits that can help you stay healthy, feel secure, and achieve your goals. From our employer provided basic life and disability insurance to employee elected medical, dental, and voluntary benefits, our comprehensive benefits package is designed to meet your unique needs and help you thrive both inside and outside of work.

We feel that our comprehensive benefit program, as part of your Total Rewards package, nourishes and supports everyone who sits at the HelloFresh table. No matter what your unique circumstances are, we worked hard to provide options for you to focus on your wellness.

Benefits eligible on your first day: Regular full-time eligible employees can enroll in benefits starting on their date of hire. You have 31 days to complete enrollment, and your coverage will be retroactive to your first day of employment.

HelloFresh offers three (3) Cigna medical plans:

Open Access Plus (OAP) Copay Plan with Health Reimbursement Account (HRA): The Open Access Plus (OAP) Copay Plan includes a \$5,000 deductible and an employer-funded HRA. HelloFresh also covers 100% of the employee-only payroll contribution for this plan.

High Deductible Health Plan (HDHP) with Health Savings Account (HSA): This plan has a \$3,400 deductible and allows you to contribute pre-tax dollars to an HSA, which you can use to pay for eligible health care expenses. After you meet the deductible, the plan pays a portion of covered services, and prescriptions are covered with copays.

Open Access Plus (OAP) Traditional Copay Plan: Has the lowest deductible, \$1,000, and copays for office visits and prescriptions, but has higher payroll contributions.

HelloFresh offers many additional resources with these medical plans, including: infertility and conception benefits, Omada's diabetes prevention program, Hinge Health virtual physical therapy, and preventive care rewards. MDLive virtual care is covered at 100% under all medical plans.

Employee-Paid Vision Plan & Dental Plan Options: HelloFresh offers base and buy-up dental plans, and the buy-up option includes adult orthodontia coverage.

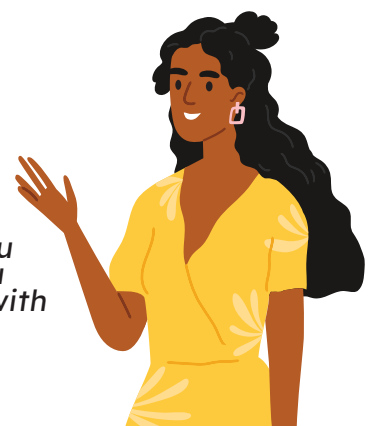
Income Protection Benefits: HelloFresh provides eligible employees with company-paid Basic Term Life and Accidental Death & Dismemberment (AD&D) coverage, as well as Short-Term and Long-Term Disability coverage. Employees may also purchase additional Life Insurance for themselves, their spouse/domestic partner, and dependents, along with an optional buy-up Long-Term Disability plan.

Voluntary Benefits: Employees can purchase additional coverage to help with major medical and life events, including Critical Illness, Accident, Hospital Indemnity, and Whole Life Insurance with Long-Term Care, as well as ID Theft Protection and Legal Coverage.



Scan here to visit
the Employee
Benefits &
Enrollment Site

If you don't elect benefits during your new hire enrollment window, you will be unable to make any further changes at a future date unless you have a qualifying life event. Changes must be completed in Workday with supporting documentation (e.g., birth certificate, marriage certificate, etc.) within 31 days of life events.



How to Enroll

Review your 2026 enrollment materials at MyHelloFreshBenefits.com

To complete your Enrollment selections:

- **Online:** Log-on to wd103.myworkday.com/hellofresh/login.html (or use the Workday mobile app)
- **Call:** HelloFresh Benefits and Payroll Connect at **1-877-431-7867** (Monday to Friday 8 AM to 5 PM CST; translation available)
- You will be required to add your beneficiary information in Workday to complete the enrollment form. Name, phone number, address, and relationship status will be needed.
- You should save your benefits confirmation for your records by printing, saving, or taking a screenshot or picture with your phone, as email confirmation will not be available.

You are eligible to participate in the 401(k) plan through Voya if you are age 18 or older and have completed three (3) consecutive months of employment. HelloFresh matches 100% of your contribution up to 3% of your compensation and then 50% of the next 2%. Enrollment can be completed up to 30 days prior to your eligibility directly through Enroll.Voya.com or call **1-888-311-9487**. Use Plan Number: **551637** and Verification Number: **55163799** to enroll.

Benefit Type	Carrier	Employee Elected	HelloFresh Provided
Medical/Prescription (Rx)	Cigna	X	
Dental	Cigna	X	
Health Savings Account (HSA)	HSA Bank/Cigna	X	
Vision	EyeMed	X	
Health Care Flexible Spending Account (FSA)	Flores	X	
Dependent Care Flexible Spending Account (FSA)	Flores	X	
Commuter Transit Spending Account	Flores	X	
Commuter Parking Spending Account	Flores	X	
Voluntary Accident, Critical Illness and Hospital Indemnity	Unum	X	
Employee Basic Life and AD&D	Unum		X
Voluntary Life and AD&D for Employee, Spouse/Domestic Partner, and Child(ren)	Unum	X	
Short-Term Disability	Unum		X
Long-Term Disability	Unum		X
Buy-Up Long-Term Disability	Unum	X	
401(k) Retirement Plan	Voya	X	
Employee Assistance Program (EAP)	HealthAdvocate/Unum		X
Medical Bill Saver	HealthAdvocate/Unum		X
Back-Up Child and Elder Care	Bright Horizons		X
Whole Life Insurance with Long-Term Care	Allstate	X	
Premier Plus ID Theft Protection	Norton LifeLock	X	
Legal Insurance	MetLife	X	

Eligibility

Benefits are available to all regular full-time eligible employees and their eligible dependents. You have 31 days from your hire date to complete enrollment and benefits coverage are retroactive to your first day of employment.

Visit Online for More Information

MyHelloFreshBenefits.com is your year-round, one-stop resource for all benefits, including a benefits guide, carrier flyers, videos and more! Access it on a computer, tablet, or mobile device—no account required. Use the drop-down menu in the upper left corner to select your preferred language.

Medical and Prescription Drug Benefits

Medical and prescription benefits are an essential part of your overall health and wellness. With our comprehensive medical plans, you'll have access to a network of doctors and specialists to help you manage your health. You'll also have coverage for prescription drugs, including both generic and brand name medications. All medical plans have the same network of doctors and hospitals and provide free preventive-only care visits.

Benefit	OAP Copay Plan w/HRA: \$5,000 Deductible	HDHP w/HSA: \$3,400 Deductible	OAP Traditional Copay Plan: \$1,000 Deductible
	In-Network	In-Network	In-Network
Annual/Calendar Year Deductible (Individual/Family)	\$5,000/\$10,000	\$3,400/\$6,800	\$1,000/\$2,000
Out-of-Pocket Maximum (Individual/Family)	\$6,000/\$12,000	\$6,000/\$12,000	\$5,000/\$10,000
Coinsurance (You Pay)	40%	20%	30%
Physician Services			
Doctor's Office Visit	\$50 copay	20% coinsurance after deductible	\$35 copay
Specialist Office Visit	\$100 copay	20% coinsurance after deductible	\$60 copay
Preventive Care*	Covered at 100%	Covered at 100%	Covered at 100%
Lab & X-Ray Services	40% coinsurance after deductible	20% coinsurance after deductible	30% coinsurance after deductible
Hospital Services			
Inpatient	40% coinsurance after deductible	20% coinsurance after deductible	30% coinsurance after deductible
Outpatient			
Emergency Care	\$500 copay; waived if admitted	\$500 copay after deductible is met; waived if admitted	\$500 copay; waived if admitted
Pregnancy & Maternity Care (Prenatal)	Covered at 100%	20% coinsurance after deductible	Covered at 100%

Prescription Drugs (In-Network Only, Out-of-Network Not Covered)	OAP Copay Plan w/HRA: \$5,000 Deductible	HDHP w/HSA: \$3,400 Deductible	OAP Traditional Copay Plan: \$1,000 Deductible
	Retail (30-Day Supply)		
Generic	\$20	\$10 after deductible	\$15
Preferred Brand	\$50	\$30 after deductible	\$40
Non-preferred Brand	\$120	\$50 after deductible	\$100
Mail Order (90-Day Supply)			
Generic	\$50	\$25 after deductible	\$37.50
Preferred Brand	\$125	\$75 after deductible	\$100
Non-preferred Brand	\$300	\$125 after deductible	\$250

The information above is a summary of coverage. Please refer to your Benefits Guide for additional plan details. Out-of-Network benefits are available to you, but you will pay more. Please refer to your SPD for details.

*Not all preventive care services are covered. For example, immunizations for travel are generally not covered. Please see plan materials for complete list of covered preventive care services.

NOTE: Your medical plan options must offer certain preventive care benefits to you in-network without cost sharing and these preventive care benefits generally are updated annually. Under the Affordable Care Act, the medical plans generally may use reasonable medical management techniques to determine frequency, method, treatment or setting for a recommended preventive care service. Review the Summary Plan Description (SPD) for a list of preventive care services.

Bi-Weekly Employee Payroll Contributions

Medical

Bi-Weekly Medical Payroll Contributions (26 contributions per year)			
Coverage	OAP Copay Plan w/ HRA: \$5,000 Deductible	HDHP w/ HSA: \$3,400 Deductible	OAP Traditional Copay Plan: \$1,000 Deductible
Employee	\$0.00	\$21.57	\$54.01
Employee + Spouse or Domestic Partner	\$85.80	\$93.54	\$158.42
Employee + Child(ren)	\$64.31	\$71.23	\$129.62
Family	\$159.25	\$172.72	\$270.04

Dental

Our dental benefits provide comprehensive coverage for preventive, basic, orthodontic, and major dental services. You have the choice between a base and buy-up dental plan.

Benefit	Base Plan (In-Network)	Buy-Up Plan (In-Network)
Annual/Calendar Year Deductible (Individual/Family)	\$75/\$225	\$50/\$150
Annual/Calendar Year Maximum	\$1,000	\$2,000
Preventive Services	Covered at 100%	Covered at 100%
Basic Services	You pay 20%	You pay 10%
Major Services	You pay 50%	You pay 40%
Orthodontia Lifetime Maximum	\$1,000 (child(ren) only, up to age 19)	\$2,000 maximum (child(ren) and adults)
Orthodontia	You pay 50%	

Bi-Weekly Dental Payroll Contributions (26 contributions per year)		
Coverage	Base Plan	Buy-Up Plan
Employee	\$6.01	\$8.79
Employee + Spouse or Domestic Partner	\$11.69	\$17.09
Employee + Child(ren)	\$11.91	\$17.41
Family	\$18.13	\$26.52

Vision

Our vision benefits provide comprehensive coverage for routine eye exams, eyeglasses, and contact lenses.

Benefit	In-Network
Exam (every 12 months)	\$15 copay
Lenses (every 12 months)	Covered in full after \$25 copay
Frames (every 24 months)	\$0 copay; 20% of balance over \$130 allowance
Contact Lenses Instead of Glasses	
Conventional (every 12 months)	\$0 copay; 15% of balance over \$130 allowance
Disposable (every 12 months)	\$0 copay; 100% of balance over \$130 allowance
Medically Necessary (every 12 months)	\$0 copay; paid-in-full

Bi-Weekly Vision Payroll Contributions (26 contributions per year)	
Employee	\$1.74
Employee + Spouse or Domestic Partner	\$3.31
Employee + Child(ren)	\$3.49
Family	\$5.13

NOTE: The information in the tables are a summary of coverage. Please refer to your Benefits Guide for additional plan details. Out-of-Network Medical, Dental, and Vision benefits are available to you, but you will pay more. Please refer to your SPD for details.

Additional Benefits

HelloFresh offers a wide range of benefits designed to help protect your health, income, and financial security.

Benefit	Key Features
Health Reimbursement Account (HRA)	Employees enrolled in the \$5,000 OAP Copay Plan receive an employer-funded HRA to help cover qualified medical expenses. HelloFresh contributes \$100 for employee-only coverage and \$200 for dependent coverage annually, helping reduce out-of-pocket costs and providing added flexibility in managing medical expenses.
Health Savings Account (HSA)	Employees enrolled in the \$3,400 High Deductible Health Plan can contribute pre-tax dollars to an HSA to pay for qualified healthcare expenses for themselves and eligible dependents.
Flexible Spending Accounts (FSA)	<p>Healthcare FSA: You may use pre-tax dollars to pay for eligible health care expenses such as copays, deductibles, orthodontia, vision, and certain over-the-counter medications, etc.</p> <p>Dependent Care FSA: You can use pre-tax dollars to pay for eligible child care expenses for your dependents up to age 13, as well as eligible elder care expenses.</p> <p>Commuter FSA: You may use pre-tax dollars to pay for eligible public transportation and parking expenses to commute to and from work.</p>
Disability Insurance	<p>Short-Term Disability (STD): HelloFresh provides all regular full-time employees with STD coverage. After 14-day elimination period, you will receive 60% of your base earnings for up to a maximum of \$2,500 per week for up to 26 weeks.</p> <p>Long-Term Disability (LTD): HelloFresh provides all regular full-time employees with LTD coverage. The benefit is equal to 60% of your base monthly earnings to a maximum of \$2,500 per month. Benefits begin after 180 days of elimination period.</p> <p>Long-Term Disability “Buy-Up”: Additional LTD coverage can be purchased by employees with a base annual salary of \$50,000 or more. The LTD Buy-Up benefit is equal to 60% of your base monthly earnings to a maximum of \$10,000 per month. Benefits begin after 180 days of elimination period.</p>
Life and Accidental Death & Dismemberment Insurance (AD&D)	<p>Basic Life and AD&D: HelloFresh offers all regular full-time employees with Basic Life and AD&D insurance. The benefit is equal to 1x your base annual earnings to a maximum of \$500,000.</p> <p>Voluntary Life and AD&D: You may also choose to purchase additional coverage for you, your spouse/domestic partner and/or dependents.</p> <p>Whole Life Insurance with Long Term Care (LTC): Gives your family financial protection as a cost effective benefit that helps cover final expenses such as funeral costs, credit card debt, and medical bills. This policy also includes Long-Term Care coverage (LTC) which will pay for services and accommodations if you need assistance with your daily living activities.</p>
Voluntary Benefits	<p>Critical Illness: Pays a full lump sum benefit directly to you if you are diagnosed with a covered illness that meets the plan criteria. The benefit is paid in addition to any other insurance coverage you may have.</p> <p>Accident: Pays benefit directly to you for a range of injuries and accident-related expenses such as fractures, concussions, and emergency visits.</p> <p>Hospital Indemnity: Pays benefits directly to you to help cover out-of-pocket expenses such as deductibles and coinsurance due to a hospital stay, including the birth of a child. Benefits are paid even if you have other coverage.</p> <p>All three programs have the option to cover eligible dependents.</p>
Employee Assistance Program (EAP)	HelloFresh provides all employees at no cost access to an EAP, which provides confidential counseling and support services to help you and your family members deal with a range of personal and work-related issues.
401(k) Retirement Plan	The 401(k) retirement plan is designed to help you save for retirement. You may contribute each pay period on a pretax or Roth after-tax basis. HelloFresh offers a Safe Harbor match of 100% of your contribution up to 3% of your compensation and then 50% of the next 2%.
Medical Bill Saver	Medical Bill Saver is available at no cost to HelloFresh employees and gives employees a place to turn when faced with unplanned medical or dental expenses over \$400.
Back-up Care	HelloFresh partners with Bright Horizons to provide back-up care for child and elder care for you and your family at no cost to you. You receive ten (10) back-up care credits that reset every February 1st.
Legal Insurance & ID Theft Protection	<p>Legal: Provides access to a network of participating attorneys for help with a wide range of legal matters such as: will preparation, power of attorney, guardianship, divorce, etc.</p> <p>ID Theft Protection: Monitors and safeguards multiple gateways into your identity and credit.</p>