



## **Long-Term Disability Health and Insurance Benefits Package for U.S. Colleagues**

**Applies to Pfizer benefits eligible U.S. colleagues who terminate after completing  
their short-term disability (STD) on or after January 1, 2026**

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## The Long-Term Disability Health and Insurance Benefits Package

Pfizer offers the Long-Term Disability Health and Insurance Benefits Package (LTD Benefits Package) to colleagues who become eligible under the Pfizer LTD Plan.

Generally, the LTD Benefits Package includes:

- Medical coverage (including prescription drug coverage);
- Dental coverage;
- Vision coverage;
- Pfizer Employee Assistance Program; and
- Basic life insurance coverage.

Included in this booklet is an overview of the LTD Benefits Package. It explains the process for participating in the benefit plans for which you are eligible and the effect your LTD status has on other Pfizer benefits. For additional information about your Pfizer benefit plans, refer to the summary plan description (SPD) for each plan, which can be found at [www.NetBenefits.com](http://www.NetBenefits.com) in the *Reference Library* under the *Health & Insurance* section.

To be eligible for medical, dental, vision and/or basic life insurance coverage under the LTD Benefits Package, you must be a participant in the respective Pfizer plan prior to your termination date. The medical, dental, vision and/or basic life insurance coverage you receive under the LTD Benefits Package will be the same you were enrolled in as an active colleague. This includes the Pfizer contribution to your Health Savings Account, provided you remain enrolled in the HSA copay option (if applicable) and remain eligible to receive that contribution. If you wish to waive coverage under one or more of these plans, see page 9 for more information.

### Becoming Medicare-Eligible

Once you (or a covered dependent) become Medicare-eligible, how your Pfizer medical coverage works will be impacted; refer to page 11 for details. You may wish to waive coverage under one or more of these plans. See page 9 for more information.

Coverages under the LTD Benefits Package run concurrently with any coverage continuation available as part of your Pfizer separation program and may continue for up to 24 months following your termination date. See *“When Coverage Begins and Ends”* on page 14 for details.

**Note:** If you do not return your signed *Release Agreement* by the required deadline, you will not be eligible for the LTD Benefits Package.

### If You Are a Union Colleague

The information in this communication may or may not apply to union colleagues on a site-by-site basis. If there is a question as to application to your site, please consult with local People Experience. To the extent the information provided differs from any rights or benefits under any relevant collective bargaining agreement (CBA), the CBA will control. Please see your CBA for additional information.

## LTD Benefits Package Highlights

This chart gives you a summary of the LTD Benefits Package’s key features. For each plan, the coverage and contributions are the same as those provided to active colleagues.

Plan	Coverage/Options	Cost	Duration of Coverage
Medical	<ul style="list-style-type: none"> <li>No coverage</li> <li>Pfizer Medical Plan options for active colleagues</li> </ul>	You and Pfizer share the cost of coverage.	Up to 24 months from your termination date (see “ <i>When Coverage Begins and Ends</i> ” on page 14).
Dental	<ul style="list-style-type: none"> <li>No coverage</li> <li>Pfizer Dental Plan options for active colleagues</li> </ul>	You and Pfizer share the cost of coverage.	
Vision	<ul style="list-style-type: none"> <li>No coverage</li> <li>Pfizer Vision Plan for active colleagues</li> </ul>	You pay the full cost of coverage.	
Pfizer Employee Assistance Program	<ul style="list-style-type: none"> <li>Automatic coverage</li> <li>Pfizer Employee Assistance Program coverage for active colleagues</li> </ul>	Pfizer pays the full cost of coverage.	
Basic Life Insurance	<ul style="list-style-type: none"> <li>Automatic coverage</li> <li>Coverage equal to your basic life insurance coverage amount continues</li> </ul>	Pfizer pays the full* cost of coverage. *If you are a part-time colleague working between 40% and 60% of a full-time schedule, you and Pfizer share in the cost of basic life insurance coverage.	
<p><b>Note:</b> Your cost of coverage is based on active rates and is subject to change at any time.</p>			

For details regarding eligibility for benefits under the LTD Benefits Package, see page 10. In addition, please note that imputed income may apply to certain coverages. See the “*About Imputed Income*” section for more information.

**While Pfizer expects to continue the benefits described in the LTD Benefits Package, it reserves the right to amend, suspend or terminate these benefits at any time, with or without notice, and for any reason.**

## What Happens to Your Other Benefits When Your Employment Ends

Once your employment is terminated, generally your coverage under Pfizer’s benefits plans, programs and policies also ends, except where stated in the “*LTD Benefits Package Highlights*” section. However, you may be able to continue coverage under certain plans or programs as outlined below. Refer to the individual SPDs or program booklets for more information.

Benefit/Program	Continuing Coverage
Accidental Death and Dismemberment (AD&D) Insurance	Coverage ends on your termination date. This coverage cannot be converted to an individual policy.
Adoption and Surrogacy Program	You must be an eligible Pfizer colleague at the time the adoption or surrogacy is completed. Your request for reimbursement under the program must be submitted within 45 days of the adoption or surrogacy being completed. Requests for reimbursement must be submitted prior to your termination date. Refer to the program booklet for details.
Pfizer Benefit Extras	If you participate in the Pfizer Benefit Extras Program, you may continue most coverages on an individual basis within 31 days of your termination date. Contact Pfizer Benefit Extras for your coverage continuation options. See the “ <i>Resources</i> ” section of this booklet for contact information.
Breast Milk Shipping	Eligibility for Pfizer’s breast milk shipping program ends on your termination date.
Bright Horizons Back-Up Care (Child/Adult Care) and Enhanced Family Supports	Participation ends as of your termination date. If you are using services such as tutoring or hired a nanny or caregiver through the Enhanced Family Supports Program, you continue to have access to that family support benefit that you pay for directly. However, any discount associated with that service, if applicable, will end as of your termination date.
Business Travel Accident Insurance	Coverage ends on your termination date and cannot be continued.
Cariloop (Concierge Caregiving)	Participation ends on your termination date. If you have an open care case as of your termination date, you have access to your case manager for 30 days from your termination date. After that you may continue the benefit at your own cost.
Commuter Benefits	Your participation in this program ends upon your termination date. You have 90 days from your termination date to use any unused transit before-tax funds on your Commuter Card or request reimbursement under the Pay Me Back feature. After 90 days, any unused transit before-tax amounts are forfeited. Parking before-tax funds on your Commuter card are forfeited as of your termination date. You may contact HealthEquity at any time for a refund of any unused after-tax amounts. See the “ <i>Resources</i> ” section of this booklet for contact information.

Benefit/Program	Continuing Coverage
Dependent Care Account (DCA)	<p>Your participation ends when you begin a leave of absence. You may still submit claims and receive reimbursement for those eligible expenses incurred while you were participating in the DCA Plan, up to the balance in your account at the time your participation ended.</p> <p>You can submit claims for eligible expenses through May 31 of the year following your termination date.</p>
Educational Assistance	<p>You will be reimbursed for covered expenses (up to the maximum amount permitted by the program) for a successfully completed course that ends before your termination date. Approved courses that begin on or after your termination date will not be reimbursed.</p>
General Purpose or Limited Purpose Health Care Account (GPHCA or LPHCA)	<p>Participation ends on your termination date but can be continued on an after-tax basis for the remainder of the calendar year in which your employment terminates by electing COBRA continuation coverage.</p> <p>If you do not elect COBRA continuation coverage, you may still submit claims and receive reimbursement for eligible expenses you incurred while you were participating in the HCA Plan, up to the amount you elected to contribute for the year.</p> <p>You can submit claims for eligible expenses through March 31 of the year following your termination date.</p>
Healthy Pfizer Wellbeing Program	<p>Participation ends on your termination date. Please be sure to claim any prizes earned before your last day worked. Prize notifications would have been sent to your Pfizer email address unless you changed your contact email with Grokker.</p>
Life Insurance (supplemental coverage for you and coverage for your dependents)	<p>Your Dependent and Supplemental Life Insurance coverage ends on your Date of Termination for you, your spouse / domestic partner, and dependent children, as applicable. Approximately 5–10 business days after your termination date, MetLife will provide you with conversion and portability information, as applicable.</p> <p>Keep in mind, conversion rates are generally significantly greater than your current contributions. To understand conversion rates versus portability rates (as applicable), contact MetLife. Coverage must be elected, and the first premium paid within the later of 31 days after your termination date or 15 days after the date of your written notice of coverage continuation (but no later than the 91st day after your termination date).</p>
Matching Gifts	<p>Your eligibility for the Matching Gifts Program will end on your termination date.</p>
Pension	<p><input type="checkbox"/> <b>If you are a non-union colleague:</b> Pension accruals for all eligible colleagues ended on December 31, 2017.</p>

Benefit/Program	Continuing Coverage
	<ul style="list-style-type: none"> <li>• <b>If you are a legacy Wyeth union colleague:</b> Eligibility for continued pension accruals ends as of your termination date or the date you are no longer represented by a collective bargaining unit that provides for participation in the plan. You may be eligible for a Disability Retirement Benefit from the retirement plan.</li> </ul> <p>Once your employment with Pfizer ends and you have met the eligibility requirements, you may commence your pension benefit. Depending on the form of payment you elect, your LTD benefit may be offset by the value of your pension benefit. For more information, call the Pfizer Benefits Center at 1-866-476-8723 and follow the <i>Colleague Services</i> prompts for Benefits at Fidelity.</p>
Savings	<p>Your contributions and company matching contributions end as of your termination date. At the end of the quarter in which you separate, you will receive company matching contributions for the portion of the quarter in which you were active. If you are eligible for a Retirement Savings Contribution (RSC), you will receive the RSC for the portion of the year in which you were active and received eligible pay. Once you are separated due to LTD, you become 100 percent vested in your RSC contributions if you are not already vested. You are always 100% vested in your Pfizer matching contributions. After your separation, you are eligible for partial or full distributions from the Pfizer Savings Plan. If you have an account in the non-qualified Pfizer Supplemental Savings Plan, that account will be paid out in accordance with plan provisions and your distribution elections.</p>
Scholarship Awards	<p>Your participation in the Pfizer Scholarship Program ceases upon your termination date. If your child was awarded a scholarship prior to termination, he or she remains eligible to begin or continue to receive the scholarship payments.</p>
Service Awards	<p>Participation ends as of your termination date. If you reached a service anniversary prior to your termination date, you are eligible for that service award.</p>
Company-Provided Vacation	<ul style="list-style-type: none"> <li>• <b>If you are a non-union colleague:</b> Vacation stopped accruing once you began your Short-term Disability (STD) leave. Additionally, any accrued vacation as of the day prior to the start of your STD leave will be paid to you as soon as administratively practicable following your termination.</li> <li>• <b>If you are a union colleague:</b> Vacation stopped accruing once you began your Short-term Disability (STD) leave. Additionally, any accrued vacation as of the day prior to the start of your STD leave will be paid to you as soon as administratively practicable following your termination. To the extent the policies differ from any rights or benefits under any relevant CBA, the CBA will control. Please refer to your CBA for additional time-off benefits.</li> </ul>

Benefit/Program	Continuing Coverage
Vacation Purchase Program (if enrolled)	<ul style="list-style-type: none"> <li>• <b>If you used all your Vacation Purchase days:</b> The total amount of contributions that would be required through the end of the calendar year to pay for the Vacation Purchase will be deducted from your final pay (or as soon as administratively possible) following your termination date.</li> <li>• <b>If you did not use any of your Vacation Purchase days:</b> The amount of Vacation Purchase to which you contributed will be paid out to you on a taxable basis and included in your final pay (or as soon as administratively possible) following your termination date.</li> <li>• <b>If you used some of your Vacation Purchase days:</b> Your final pay (or as soon as administratively possible following your termination date) will be adjusted, as applicable, based on the days purchased, the days used and year-to-date Vacation Purchase deductions.</li> </ul>
Wellbeing Wallet	Participation ends on your Date of Termination. Additionally, you must be an active colleague and an eligible participant at the time your reimbursement is processed; therefore, submit your eligible expenses at least 2–3 weeks prior to your termination date. Any unused amount or remaining balance will be forfeited as of your termination date.

Access to Pfizer-provided discounts and other services generally ends upon your termination date. For those programs where coverage is provided on a direct bill basis (e.g., not paid through Pfizer payroll, such as Humana Medicare Advantage for Parents), generally coverage may be continued on a direct bill basis. If you have questions for a plan or program not listed in this booklet, contact the program provider directly.

After your subsidized rate period ends, your coverages can be continued as shown below.

After your subsidized rate period ends...	
For all colleagues...	<p>Your basic life insurance coverage ends, but you can elect to continue medical, dental, vision and/or employee assistance program coverage under COBRA at 102 percent of the full cost of coverage for up to an additional 18 months.</p> <p>Under COBRA, you are not eligible for the Company contribution to the HSA through Pfizer if you remain enrolled in the HSA Copay medical option.</p> <p><b>Note:</b> After the 18 months of coverage under COBRA, if you were enrolled in a medical plan and are not eligible for retiree medical plan coverage, you continue medical coverage at 102 percent of the full cost of coverage until you reach age 65 (or for five years from your termination date if you are age 60 or older when you became disabled, provided that you continue to be certified as disabled by your long-term disability insurance carrier).</p>
For colleagues who were eligible for retiree medical coverage on their termination date...	<p>You can elect coverage under the Pfizer Retiree Medical Plan at retiree contribution rates. Information about Pfizer retiree medical coverage will be mailed to you approximately 45 days prior to your coverage ending under the LTD Benefits Package. You will also have the opportunity to enroll in voluntary dental coverage. Information will be mailed to you at the end of your LTD Benefits Package or your COBRA period for active dental coverage, if later. For summary information about the coverage offered under the Pfizer Retiree Medical program, refer to the <i>Retiree Medical Benefits Brochure</i> located in the <i>Reference Library</i> on <a href="http://www.NetBenefits.com">www.NetBenefits.com</a>.</p> <p><b>Note: If you (or your covered dependents) are eligible or become eligible for Medicare</b>, the Pfizer Retiree Medical Plan also requires you to be enrolled in both Medicare Part A and Part B. For additional information on retiree medical eligibility, refer to your <i>Pfizer Retiree Medical Plan SPD</i>.</p>

For additional information on your rights and responsibilities under COBRA, refer to the SPD for the specific plan. You will receive information about COBRA continuation coverage separately.

### ***Your Right to Waive Coverage***

You may choose the LTD Benefits Package but waive medical, dental and/or vision coverage. For example, you may waive coverage if you have it under another plan, such as your spouse or domestic partner's plan at another company.

If you waive medical, dental and/or vision coverage, you generally will not be able to elect that coverage at a later date. However, if you are covered under another Pfizer-sponsored plan (such as a spouse or domestic partner's coverage under the Pfizer couples rule), you would be able to elect coverage under the LTD Benefits Package at a later date if you lose that other Pfizer-provided coverage. See the "*About Pfizer Families*" section.

To waive coverage, contact the Pfizer Benefits Center; see the "*Resources*" section on page 15 for contact information.

## LTD Benefits Package Eligibility

When you become disabled (as defined by the Pfizer LTD Plan), you are eligible for coverage under the LTD Benefits Package provided you return a signed *Release Agreement* by the required deadline.

You may also be eligible to enroll as the dependent of an active Pfizer colleague or Pfizer retiree after you become disabled. See the “*About Pfizer Families*” section below for details.

### ***Dependent Eligibility***

If you continue coverage for yourself under the LTD Benefits Package, you may continue to cover your eligible dependents for medical, dental and/or vision benefits if they were covered as your dependents under those plans when you became disabled. The definition of eligible dependents is the same under the LTD Benefits Package as under Pfizer’s health plans for active colleagues.

You can enroll new dependents during the Annual Enrollment period each fall or within 31 days of a qualified life event. A qualified life event includes events such as marriage, entering into a domestic partnership, or the birth/adoption of a child, among others. (See the applicable SPD for details on qualified life events.) To enroll a newly eligible dependent, call the Pfizer Benefits Center and follow the *Colleague Services* prompts to Benefits at Fidelity; see the “*Resources*” section for contact information.

### ***About Pfizer Families***

If you are an eligible dependent (child, spouse or domestic partner) of an active Pfizer colleague or Pfizer retiree, you can be covered under their medical, dental and/or vision coverage subject to the following rules:

- You cannot be covered under both the LTD Benefits Package and as a dependent under another U.S. Pfizer medical, dental and/or vision plan;
- Either you or your spouse or your domestic partner (but not both of you) can elect to cover your eligible children as dependents under a Pfizer medical, dental and/or vision plan; and
- Your spouse or domestic partner or parent cannot cover you under his/her Pfizer dependent life insurance coverage.

If you are enrolled as a dependent but later lose that coverage, you can elect coverage under the LTD Benefits Package if you still meet the eligibility requirements.

## Medical Benefits and Medicare

Pfizer has retained the services of Allsup, Inc. to assist eligible colleagues who become disabled and qualify for Medicare benefits. If you are disabled and become eligible (or are currently eligible) for Medicare, Allsup will contact you directly. See the “Resources” section on page 15 for their contact information.

You generally become eligible for Medicare when you reach age 65 or if you have been entitled to Social Security Disability benefits for a period of 24 months. Once you become eligible, you are enrolled in Medicare as follows:

- **Medicare Part A:** You are automatically enrolled.
- **Medicare Part B:** You are required to enroll in Part B, but your enrollment is not automatic. If you do not enroll by the required deadline, Medicare assesses higher monthly premiums for the duration of your Part B coverage. Medicare premiums and Medicare penalties are your financial responsibility. Once you or a covered dependent becomes Medicare-eligible, you are required to enroll; otherwise, your Pfizer coverage will be impacted.
- **Medicare Part D:** You are not automatically enrolled. Medicare Part D is an optional prescription drug coverage program that you are not required to choose.

### ***Benefits Under Medicare Parts A and B***

Under the terms of the Pfizer Medical Plan, if you are disabled and eligible for Medicare Parts A and B, your Pfizer benefits become the secondary payer to Medicare. This means, if you do not enroll or if you do not remain enrolled in Medicare Parts A and B, the Pfizer Medical Plan will assume you are enrolled in both and will pay benefits accordingly. Therefore, to avoid paying a Medicare Part B late enrollment penalty, be sure to enroll in Medicare as soon as you are eligible after your termination date or become eligible (if later). See the *Pfizer Medical Plan SPD*, available at [www.NetBenefits.com](http://www.NetBenefits.com) in the *Reference Library*, for details on how the Plan coordinates with Medicare. (Please note that this secondary payor rule only applies to the medical portion of your Pfizer benefits.)

In addition, if you see a provider who has opted out of Medicare, the Pfizer Medical Plan will reduce the benefit it pays by the amount that Medicare would have paid, had your provider not opted out of Medicare.

### ***Benefits Under Medicare Part D***

Medicare Part D is an optional prescription drug coverage program. Your prescription coverage under the Pfizer Medical Plan is, on average, expected to pay out as much as the standard Medicare Part D prescription drug coverage. As a result, your Pfizer prescription drug coverage is considered creditable coverage by the Centers for Medicare and Medicaid Services.

Pfizer’s prescription drug benefits and Medicare Part D benefits do not coordinate, so you are unlikely to receive additional benefits if you enroll in Medicare Part D. If you do not enroll in Medicare Part D but decide to enroll in coverage at a later date, you will not be assessed a late enrollment penalty if you remain enrolled in Pfizer prescription drug coverage.

**Note:** If you enroll in Medicare Part D, your prescription drug coverage under the Pfizer Medical Plan will end and Medicare Part D will become your primary coverage for prescription drugs. If you do not enroll in a Medicare Part D, the Pfizer Medical Plan will continue to be your primary payor for prescription drugs.

#### **If You are Eligible for Retiree Medical Coverage**

If you are eligible for Pfizer retiree medical coverage, that coverage will work differently than as described here. For example, if you are Medicare-eligible, the Pfizer Retiree Medical Plan allows you to visit any provider who accepts Medicare. Additional rules also apply to enrollment in other Medicare plans. See the *Pfizer Retiree Medical Plan SPD* for details.

## Medical Benefits and your Pfizer Health Savings Account (HSA)

The HSA is an individual account, which means you can take it with you after your termination and can transfer it to an HSA provider of your choice.

If you continue to meet the IRS eligibility guidelines for the HSA and continue to be enrolled in the HSA Copay option, you may continue to receive the Company HSA contribution (if applicable) provided you are under age 65 under the LTD Benefits Package; in the final year under the LTD Benefits Package, the Company contribution to your HSA, if eligible, will be prorated based on the number of months you are expected to be enrolled in the HSA Copay option under the LTD Benefits Package. Your payroll contributions to the HSA will end as of your Termination Date. If you wish to contribute directly to your HSA account, please contact HealthEquity for more information. Once the benefits under the LTD Benefits Package ends, you will not be eligible for the Company contribution or the HSA through Pfizer.

Please note that while you are under the LTD Benefits Package, HealthEquity will continue to waive the monthly administrative fees for the HSA.

It is your responsibility to determine whether you are eligible or not to make contributions to the HSA, as well as receive the Company contribution, if applicable. For details about HSA eligibility, visit the IRS website at [www.irs.gov/publications/p969](http://www.irs.gov/publications/p969). **Note:** Having ineligible HSA contributions will likely create tax issues that you will personally be responsible to correct.

### Important Information about Medicare Eligibility and the HSA

If you become Medicare-eligible and enroll in Medicare, under IRS rules, you are not eligible to contribute to an HSA. As a result, once you reach age 65, you will be automatically opted out of the Pfizer HSA, and, therefore, not eligible to contribute to an HSA. Your coverage under the HSA Copay medical option will remain in effect while under the LTD Benefits Package, as applicable.

**Action Required: If you are under age 65 at termination and determine that you are not eligible for the HSA (e.g., you are enrolled in Medicare) but still wish to enroll in the HSA Copay option without the HSA (including the Company contribution), you will need to call the Pfizer Benefits Center before your termination.**

### Additional Information About Your Basic Life Insurance Coverage

Under the LTD Benefits Package, your basic life insurance that was in effect prior to your disability (meaning your last day worked) will continue at no cost\* to you. You may only change this coverage amount during Annual Enrollment or if you have a qualified life event.

\*If you are a part-time colleague working between 40% and 60% of a full-time schedule, you and Pfizer share in the cost of basic life insurance coverage.

**Note:** During the Annual Enrollment period, you may waive coverage in excess of \$50,000 to avoid imputed income. If you waive coverage in excess of \$50,000, the amount waived will not be eligible for conversion.

For information about the Pfizer Life Insurance Plan, contact Fidelity at the Pfizer Benefits Center or refer to the *Pfizer Life Insurance and Accidental Death and Dismemberment (AD&D) Plan SPD*.

### Conversion

When your basic life insurance coverage ends, you may be able to continue coverage through conversion by purchasing an individual life insurance policy. If you choose to convert your coverage, this may be different than the coverage and rates you have under the Pfizer Life Insurance Plan.

You will receive information regarding conversion from the Plan Insurer (MetLife) within 15 business days from your coverage end date. For more information, contact MetLife at 1-877-275-6387.

## Paying for Coverage

You and Pfizer generally share the cost of your medical and/or dental coverage under the LTD Benefits Package, with Pfizer paying the greater share. Pfizer pays the full cost of your basic life insurance\* and employee assistance program coverage, while you pay the full cost of vision coverage. The cost you pay depends on the coverage option and coverage category you chose as an active colleague.

\*If you are a part-time colleague working between 40% and 60% of a full-time schedule, you and Pfizer share in the cost of basic life insurance coverage.

You will receive a monthly bill from the Pfizer Benefits Center for the cost of your coverage, and you will have a 30-day grace period to make your payments. **If you fail to make the required payments by the end of the grace period, your coverage will end and you will not be given the opportunity to re-enroll for any reason.** For more information about the billing process, call the Pfizer Benefits Center.

### About Imputed Income

There are certain circumstances in which you may have to pay federal income taxes on the value of the benefits you receive. This value is known as imputed income and applies if you have life insurance coverage in excess of \$50,000, or you have medical and/or dental coverage for your domestic partner (or the child of your domestic partner).

Imputed Income Rules	
If you have life insurance coverage in excess of \$50,000	<p>In general, you pay federal income taxes on the value of Pfizer-paid life insurance coverage in excess of \$50,000. This excess amount will be reported to you on your annual W-2 form.</p> <p>You may be exempt from this tax if your disability qualifies under IRS rules. To qualify, you must be eligible to receive LTD benefits and:</p> <ul style="list-style-type: none"> <li>• Your disability must have lasted for a period of at least 12 consecutive months;</li> <li>• You are not expected to recover in the foreseeable future; or</li> <li>• Your condition is expected to result in death.</li> </ul>
If you have medical and/or dental coverage for your domestic partner and/or the child of your domestic partner	<p>If your domestic partner (or the child of your domestic partner) does not meet the IRS's definition of a dependent, Pfizer's contribution toward that coverage must be reported as imputed income to you.</p> <p>It is your responsibility to notify Pfizer of any changes in your eligible dependents, including any changes in their tax status. See the <i>Domestic Partner Enrollment Kit</i> for details.</p>

Imputed income is subject to ordinary federal, Federal Insurance Contributions Act (FICA), state, local and any other applicable taxes, and will be reported on your W-2 form at the end of each year. To determine how imputed income impacts your personal financial situation, please contact your personal tax advisor.

## When Coverage Begins and Ends

Once your employment terminates, if you are approved for LTD benefits your coverage under the LTD Benefits Package or under a Pfizer-sponsored separation program will begin. Coverage for medical, dental, vision and basic life insurance will generally continue for 24 months from the date your employment is terminated, assuming you remain disabled during that time. However, there may be circumstances under which your coverage may end earlier.

**Note:** Coverage under any plan will end immediately if that plan is terminated.

If coverage ends for any reason before the 24-month period ends, you and/or your covered dependent(s) will not be allowed to re-enroll into coverage.

When your basic life insurance coverage under the LTD Benefits Package ends, you may be eligible to continue your coverage through the plan's conversion feature. See the *Pfizer Life and Accidental Death and Dismemberment (AD&D) Insurance Plans SPD* for details.

### **If You Die While Participating in the LTD Benefits Package**

If you die after you begin participation in the LTD Benefits Package, but before the 24-month period ends, your enrolled dependents may continue the medical, dental and/or vision coverage at active rates until your health and insurance continuation coverage would have ended. After that, your enrolled surviving dependents may continue coverage under COBRA for a period of up to 36 months at 102 percent of the full cost of coverage. If you were eligible for Pfizer retiree medical coverage as of your termination date, your eligible dependents may alternatively elect coverage under that plan.

## Resources

For Information About...	Use These Resources...
<p>LTD Health and Insurance Benefits Package, online resources, SPDs and/or provider directories</p> <p>General questions (eligibility, including retiree medical eligibility, billing, plan documents)</p>	<p><b>Fidelity</b></p> <p><a href="http://www.NetBenefits.com">www.NetBenefits.com</a> or call Fidelity at the Pfizer Benefits Center at 1-877-208-0950 and follow the appropriate prompts to Benefits at Fidelity.</p> <p>Representatives are available Monday through Friday from 8:30 a.m. to midnight Eastern time.</p>
<p>Pfizer Medical Plan</p>	<p><b>Horizon for medical, mental health, and substance use services</b></p> <p><a href="http://www.horizonblue.com/pfizer">www.horizonblue.com/pfizer</a> or call 1-888-340-5001. Representatives are available Monday through Friday from 8 a.m. to 11 p.m. Eastern time.</p> <p><b>UnitedHealthcare (UHC) for medical, mental health, and substance use services</b></p> <p><a href="http://www.whyuhc.com/pfizer">www.whyuhc.com/pfizer</a> or call 1-800-638-8010. Representatives are available Monday through Friday from 8 a.m. to 11 p.m. Eastern time.</p> <p><b>CVS Caremark – for prescription drug coverage for Horizon and UHC members</b></p> <p><a href="http://www.caremark.com">www.caremark.com</a> or call 1-866-804-5881. Representatives are available 24/7/365.</p>
<p>Pfizer Retiree Medical Plan (medical, mental health, substance use, and prescription drug coverage)</p>	<p><b>Horizon for medical, mental health, and substance use services</b></p> <p><a href="http://www.horizonblue.com/pfizer">www.horizonblue.com/pfizer</a> or call 1-888-340-5001. Representatives are available Monday through Friday from 8 a.m. to 11 p.m. Eastern time.</p> <p><b>UnitedHealthcare (UHC) for medical, mental health, and substance use services</b></p> <p><a href="http://www.whyuhc.com/pfizer">www.whyuhc.com/pfizer</a> or call 1-800-638-8010. Representatives are available Monday through Friday from 8 a.m. to 11 p.m. Eastern time.</p>

For Information About...	Use These Resources...
	<p><b>CVS Caremark – for prescription drug coverage for Horizon and UHC members</b>  <a href="http://www.caremark.com">www.caremark.com</a> or call 1-866-804-5881. Representatives are available 24/7/365.</p> <p><b>For Medicare-Eligible Retirees:</b></p> <p><b>Humana for the Pfizer Medicare Advantage Plan</b>  <a href="http://www.your.humana.com/pfizer">www.your.humana.com/pfizer</a> or call 1-800-654-1092. Representatives are available Monday through Friday from 8 a.m. to 9 p.m. Eastern time.</p> <p><b>SilverScript Prescription Drug Plan</b>  <a href="http://www.pfizer.silverscript.com">www.pfizer.silverscript.com</a> or call 1-844-774-2273. Representatives are available 24/7.</p>
Enrolling in Medicare	<p><b>Allsup, Inc.</b>  1-800-883-6650.</p>
Pfizer Dental Plan	<p><b>Delta Dental</b>  deltadentalins.com/Pfizer or call 1-888-893-4411.  Representatives are available Monday through Friday from 8 a.m. to 8 p.m. Eastern time</p>
Pfizer Vision Plan	<p><a href="http://www.eyemedvisioncare.com/pfizer">www.eyemedvisioncare.com/pfizer</a> or call 1-855-629-5015.  Representatives are available Monday through Saturday from 7:30 a.m. to 11 p.m., Sunday from 11 a.m. to 8 p.m. Eastern time.</p>
Health Savings Account (HSA)	<p><b>HealthEquity (formerly WageWorks)</b>  my.healthequity.com or call 1-877-924-3967;  Representatives are available 24 hours a day, 7 days a week</p>
Pfizer Benefit Extras Program	<p><b>Pfizer Benefit Extras</b>  PfizerBenefitExtras.com or call 1-888-926-2525. Representatives are available Monday through Friday from 8:30 a.m. to 8 p.m. Eastern time.</p>
Pfizer Employee Assistance Program	<p><b>Spring Health</b>  24 hours a day, seven days a week by calling 1-855-629-0554 or visiting <a href="http://www.springhealth.com/support">www.springhealth.com/support</a>.</p>
Life Insurance and AD&D (including conversion feature)	<p><b>MetLife</b>  Call 1-877-275-6387. Representatives are available Monday through Friday from 9 a.m. to 6 p.m. Eastern time.</p>

For Information About...	Use These Resources...
Policies and Additional Benefits (Time off, including leaves of absence, Service Awards, Educational Assistance and Adoption and Surrogacy)	<p><b>Pfizer Colleague Service Center</b></p> <p>Call 1-866-476-8723 and follow the <i>Colleague Services</i> prompts for PX Policy Support.</p>
Savings Plan	<p><b>Fidelity</b></p> <p><a href="http://www.NetBenefits.com">www.NetBenefits.com</a> or call Fidelity at the Pfizer Benefits Center at 1-877-208-0950 and follow the appropriate prompts for Benefits at Fidelity. Representatives are available Monday through Friday from 8:30 a.m. to midnight Eastern time.</p>
Pension Plan	<p><b>Fidelity</b></p> <p><a href="http://www.NetBenefits.com">www.NetBenefits.com</a> or call Fidelity at the Pfizer Benefits Center at 1-877-208-0950 and follow the appropriate prompts for Benefits at Fidelity. Representatives are available Monday through Friday from 8:30 a.m. to midnight Eastern time.</p>
Pfizer Separation Plan	<p><b>Pfizer Colleague Service Center</b></p> <p>Call 1-866-476-8723 and follow the <i>Colleague Services</i> prompts for PX Policy Support.</p>
Commuter Benefit Program	<p><b>HealthEquity</b></p> <p><a href="http://www.healthequity.com">www.healthequity.com</a> (select <i>EZ Receipts</i>) or call 1-877-924-3967. Representatives are available 24/7.</p>

*This guide is intended to provide an overview of certain provisions of certain benefits sponsored by Pfizer. You must review the summary plan descriptions for the described plans for details. Neither the guide nor the summary plan descriptions are intended to provide every detail of the plans. Only the official plan documents for the plans described in this guide contain the actual terms and conditions of the benefits. If there is a discrepancy between the official plan documents and the information in this guide and the summary plan descriptions, the official plan documents will govern. Pfizer reserves the right to amend, suspend or terminate any of the benefit plans and any of the terms of the LTD Benefits Package (including, but not limited to, contribution amounts and the benefits offered thereunder) at any time and for any reason, with or without notice.*

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