



WITH YOU ON LIFE'S JOURNEY

2026 Guide to Retiree Benefits
November 5 – 12, 2025





WITH YOU ON LIFE'S JOURNEY

November 5 – 12, 2025

Wherever life takes you, you can count on your RRD benefits to support you.

Each year during Annual Enrollment, you have the opportunity to verify your coverage or change your retiree medical and prescription drug benefits. Please review this guide and make sure you understand how your benefits work. If you decide to change your coverage for 2026, you can use the online enrollment system or call the RRD Benefits Center at **1-877-RRD-4BEN (1-877-773-4236)**. To review the 2026 Retiree Group Health Program Comparison Chart, please visit rrd.bswift.com.

If you are already enrolled in retiree coverage and don't wish to make changes for 2026, you don't need to take action during this Annual Enrollment period. Your current coverage will automatically carry over to our new carriers.

What's Inside



Two Ways to Update Your Coverage

1

rrd.bswift.com

2

1-877-RRD-4BEN (1-877-773-4236)

Mon. – Fri., 7 a.m. – 7 p.m. CT

You will receive a Confirmation of 2026 Coverage Statement in the mail in late November. Please review it carefully. You may also review your statement at rrd.bswift.com. Please see the enclosed instructions for how to review your confirmation statement online.

If you have questions or trouble navigating the enrollment website, contact the RRD Benefits Center. You can also refer to the enrollment materials, as well as Certificates of Insurance, the Summary Plan Description (SPD) and Summaries of Material Modifications (SMMs) at myRRDbenefits.com (under RETIREE).

ELIGIBILITY & ENROLLMENT RULES

All Retirees

If you are enrolled in coverage under the RR Donnelley retiree medical plans* (“RRD Retiree Group Health Program” or “Program”) and later decide to opt out, that election is permanent and you cannot re-enroll yourself or your eligible spouse in the future for any reason.

Benefits-Eligible Retirees

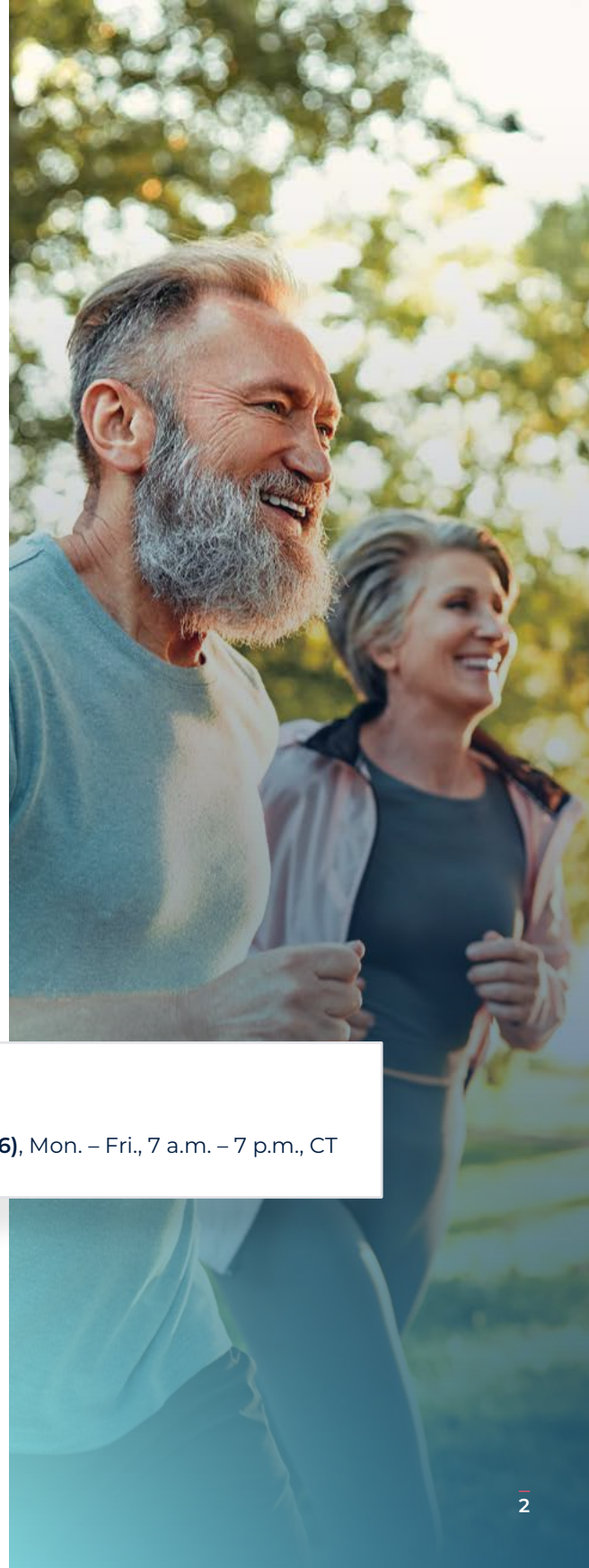
If you are a retiree eligible for RRD retiree medical benefits, you must enroll in the RRD Retiree Group Health Program upon the earlier of attaining Medicare eligibility or age 65. Otherwise, coverage under the Program will no longer be available to you (or your spouse, if he or she is eligible). This means your last chance to opt in to the Program is when you become Medicare-eligible or turn age 65.

NOTE: These rules are based on your (the retiree’s) Medicare eligibility. For example, if you are under age 65 and not yet eligible for Medicare but your spouse is 65 or older, you have until your Medicare attainment age to enroll both yourself and your spouse in coverage. References to spouses throughout this guide include covered domestic partners.

Unsure about eligibility and enrollment rules?

Call the RRD Benefits Center at **1-877-RRD-4BEN (1-877-773-4236)**, Mon. – Fri., 7 a.m. – 7 p.m., CT

* The Retiree Welfare Benefits Plan was restructured in May 2025. Benefits for pre-65 retirees and dependents are now provided through the Pre-65 Medical Program under the RR Donnelley Group Medical Plan. Benefits for Medicare-eligible (post-65) retirees and dependents is now provided through the RR Donnelley Post-65 Retiree Welfare Benefits Plan.



YOUR ENROLLMENT CHECKLIST

rrd.bswift.com // **Benefits Center:** 1-877-RRD-4BEN (1-877-773-4236) Mon. – Fri., 7 a.m. – 7 p.m. CT.

1 Understand your benefits

Review your medical and prescription drug coverage in this guide.

- Go to rrd.bswift.com to review your coverage options, rates for 2026 and these helpful tools:
 - Provider Directory and Certificates of Insurance
 - Summary Plan Descriptions (SPDs), Summaries of Material Modifications (SMMs) and, in the case of pre-65 participants, SBCs. (If you haven't already elected to review plan information online, you will have the option to go paperless.)
- Contact the **Benefits Center** for general benefits information and questions.

Want the same coverage?

If you want the same coverage for 2026, you don't need to take action.

2 Enroll by November 12, 2025

If you want to make changes to your benefits, take action!

- Register and log in to rrd.bswift.com. Follow the onscreen instructions to change your current elections or covered family members.
- Once you've reviewed your changes, click *Review* and *Confirm*. Scroll to the bottom of the page to agree to the terms and conditions, and then click *Complete Enrollment*. (If you see the green check mark, your elections are saved and your enrollment is complete.)
- If you have difficulties verifying your coverage online or you would like to verify by phone, call the **Benefits Center**. Phone enrollment ends November 12 at 7 p.m. CT. You might experience long wait times if you call during the last two days of enrollment.

3 Check your confirmation

Print a confirmation of your enrollment for your records.

You will receive a confirmation of your enrollment by mail in late November. If anything is incorrect, please call the Benefits Center immediately (and no later than December 31, 2025) or you may be locked into that election for the entire Plan year.

MEDICARE-ELIGIBLE RETIREES

RRD Medical & Prescription Drug Coverage

If you are eligible for Medicare and collecting Social Security benefits, you are automatically covered by Medicare Part A (hospital care). You must also be enrolled in Medicare Part B (physician services) to participate in the company-sponsored group Medicare Advantage plan (also known as Medicare Part C) under the RR Donnelley Post-65 Retiree Welfare Benefits Plan.

Your prescription drug coverage is part of the company-sponsored group Medicare Part D program also under the RR Donnelley Post-65 Retiree Welfare Benefits Plan.

When you age-in or become Medicare-eligible for the first time, you will also receive a Summary of Medicare Part D Benefits and an Opt Out Notice.

Do not opt out if you wish to keep your retiree medical coverage through RRD. If you opt out of prescription drug coverage, you will also be removed from medical coverage.

Here are some important things to know about your RRD retiree medical and prescription drug coverage:

- For 2026, Aetna Medicare Plan PPO will provide retiree medical coverage. Aetna Medicare prescription drug coverage will be provided by SilverScript.
- Because this is a Medicare Advantage plan:
 - When you use the plan, your Medicare benefits are “assigned” to Aetna, which is then responsible for paying your claims.
 - Your medical coverage is not secondary to Medicare, so there is no coordination of benefits to worry about.
- You can visit any provider you choose, in or out of the Aetna network, and pay the same share of the cost as long as the provider accepts Medicare and is willing to bill Aetna.
- If you are a new Medicare enrollee in the RR Donnelley Post-65 Retiree Welfare Benefits Plan, make sure you have the following on file with the Benefits Center:
 - A valid Medicare Beneficiary Identifier (MBI).
 - An actual street address (not a P.O. box). Please call the Benefits Center or go to rrd.bswift.com if you are unsure of your address on file.



Using Your Prescription Drug Benefits

Once you are enrolled in the retiree drug benefit program under the RR Donnelley Post-65 Retiree Welfare Benefits Plan (“RRD Post-65 Retiree Drug Benefit Program”):

- You can purchase up to a 90-day supply of medication at retail, as long as you fill your prescription at a participating pharmacy.
- You can refill a retail prescription when 85% of your existing prescription has been used.
- You can refill a mail-order prescription when 75% of your existing prescription has been used.
- You must provide consent for prescriptions you do not initiate yourself (for example, auto-refills, “e-prescribing” by your doctor, and your doctor’s office calling in a prescription). Make sure your phone number is on file with Aetna Medicare Rx so they can contact you to obtain consent. If they do not receive your consent, the prescription will be held, and you will need to contact Aetna Medicare Rx to release the prescription(s). Your drugs will not ship automatically.
- If you purchase diabetic testing supplies, please note some diabetic supplies are covered under medical (Part B) and some under pharmacy (Part D):
- You may purchase a 90-day supply at retail. Using retail does not change your coverage or the process to receive these supplies under the RRD Post-65 Retiree Drug Benefit Program.

- Diabetic supplies covered under pharmacy (needles, gauze pads, syringes, alcohol swabs) are available through Caremark mail order.
- Your medical coverage covers blood glucose monitors and test strips. For 2026, Aetna exclusively covers Accu-Check/Roche brand and TRU/Trividia brand diabetic supplies. Prior authorization will be required starting January 1, 2026, for manufacturers other than Accu-Chek/Roche and TRUE/Trividia.

Note about RRD Medical Coverage

When you see “plan” in materials you receive from Aetna, it means the Aetna Medicare PPO plan. References to “plan sponsor” in materials you receive from Aetna mean the RR Donnelley Post-65 Retiree Welfare Benefits Plan, the plan administrator or the company, depending on the context.

ID cards

You will receive two new ID cards: one for medical coverage and one for prescription drug coverage.

Have questions?

Medicare Advantage & Prescription Drug Coverage: Call Aetna at **1-800-307-4830**, Mon. – Fri., 7 a.m. – 8 p.m. CT.

Individual Medicare vs. RRD Coverage

Because you are eligible for Medicare, you likely receive many offers from insurance companies encouraging you to enroll in their individual Medicare Part C and/or Part D plans. While you may wish to review their plan information, here are some important things to keep in mind:



RRD retiree medical and prescription drug coverage are tied together.

If you opt out of the Aetna Medicare Advantage PPO plan, you lose your RRD retiree medical and prescription drug coverage. When you first enroll, you will receive a letter asking if you wish to opt out or cancel your coverage through Aetna; this is a required notice and includes Medicare-required wording. You should disregard this letter if you want to keep retiree medical and prescription drug coverage through RRD.



Medicare will not allow you to be enrolled in the RRD Retiree Drug Benefit Program and also participate in an individual Medicare Part C and/or Part D plan.

If you enroll in an individual Medicare Part C and/or Part D plan, your RRD coverage will end and you will not be able to re-enroll in RR Donnelley Post-65 Retiree Welfare Benefits Plan coverage in the future.



Medicare Part C and D are voluntary.

If you choose to enroll in individual coverage, you can enroll during the Medicare Part C and D annual enrollment, which takes place Oct. 15 – Dec. 7, 2025. But in that case, **you cannot enroll for RRD coverage.**

Special Cost Considerations

- Avoid a late Medicare enrollment penalty by enrolling in Medicare Part B and in a Medicare prescription drug plan (such as RRD prescription drug coverage through Aetna; see page 5) or other creditable prescription drug coverage when you are first eligible. You may have to pay a penalty of 10% of the base premium for each full 12-month period you were eligible for Part B but didn't have coverage. Additional penalties apply if you don't enroll for creditable prescription drug coverage, such as RRD prescription drug coverage through Aetna or a Medicare Part D plan. Visit [medicare.gov](https://www.medicare.gov) for more information.
- If you qualify for the Extra Help Program to assist in paying for your medical and prescription drug coverage, you will receive a Low Income Subsidy (LIS) rider along with your Confirmation of Enrollment letter (or your Annual Notice of Change, if you are already enrolled). If you are eligible for this subsidy, the RRD Benefits Center will be notified and will adjust your premiums accordingly.
- If your income is above a certain level, you are responsible for paying Income-Related Monthly Adjustment Amounts (IRMAA) to Social Security. Please call Social Security at **1-800-772-1213** if you have questions.

Questions about Medicare?

Call your local Social Security office at
1-800-772-1213 (TTY 1-800-325-0778)
Mon. – Fri., 8 a.m. – 7 p.m., CT.

PRE-65 RETIREES

and not otherwise Medicare-eligible

RRD Medical & Prescription Drug Coverage

If you are not eligible for Medicare, you have the same pre-65 retiree medical options and plan design available to you as in 2025 (incorporating the plan changes that were made and announced in May 2025), and your coverage will be provided through Blue Cross Blue Shield of Illinois (BCBSIL):

- Retiree Value (eligible for a private Health Savings Account)
- Retiree PPO

Your prescription drug coverage is provided by CVS Caremark as part of your medical option. You'll receive new ID cards for both medical and prescription drug coverage.

NOTE: When you visit the online enrollment system, you can see and elect your own Program option, even if you are enrolled with a Medicare-eligible family member. Use the interactive “Emma” tool available at rrd.bswift.com to compare your options and features, including costs, coverage and access.

If You or Your Spouse Becomes Eligible for Medicare During the Year

If you wish to retain coverage under the RRD Retiree Group Health Program when you or your spouse becomes Medicare-eligible, here are some important things to note and do:

- **You will begin receiving Medicare notices** about 90 days before your 65th birthday.
- **You must take action to enroll in Medicare Part B** (physician services) if you wish to participate in the company-sponsored group Medicare Advantage plan (also known as Medicare Part C), as explained on page 3 of this guide. This is true even if you become Medicare-eligible due to disability. If you do not enroll in Medicare Part B when you first become eligible, you may also be charged a premium penalty if you later enroll.
- **If some eligible family members are Medicare-eligible** and others are not, individuals may be covered by different options. This is called split family coverage.
- **If you are a retiree eligible for RRD retiree medical benefits**, you must enroll in RRD Retiree Group Health Program coverage upon attaining Medicare eligibility. Otherwise, coverage under the Program will no longer be available to you (or your spouse, if he or she is eligible).
- **You must provide your valid Medicare Beneficiary Identifier (MBI)** to the RRD Benefits Center.
- **When you become Medicare-eligible, your plan benefits (e.g., deductible) start over** under the programs described on pages 5-7 of this guide.
- **When you turn age 65 or become eligible for Medicare because of a disability**, you must change from the RRD Pre-65 plan to the RRD Post-65 plan.

How Enrolling In Medicare Will Affect Your HSA

Enrolling in Medicare when you have an HSA?

If you enroll in Medicare Part A and/or B, you can no longer contribute to your HSA. This is because to contribute to an HSA for any month, you cannot have any health insurance other than an HDHP for that month. As soon as your Medicare coverage begins, you must change your contribution to your HSA to zero, as described below.

However, you may continue to withdraw money from your HSA after you enroll in Medicare to help pay for medical expenses, such as deductibles, RRD plan premiums, premiums for Medicare Parts B, C or D (but not MediGap premiums), copayments and coinsurance. If you use the account for qualified medical expenses, funds will continue to be tax-free.

What are the consequences of contributing funds to an HSA while enrolled in Medicare?

Medicare beneficiaries who continue to contribute funds to a HSA may face IRS penalties including excise taxes and additional income taxes.

HIPAA Privacy Notice

As a participant in the RRD Retiree Group Health Program, you are entitled to receive the HIPAA Privacy Notice for the Plan. You may view a copy of the HIPAA Privacy Notice on myRRDbenefits.com, or you may request a copy from the HIPAA Privacy Official for the Plan by writing to:

R.R. Donnelley & Sons Company
c/o HIPAA Privacy Official
4101 Winfield Road
Warrenville, IL 60555

How much can I contribute to my HSA for the year that I enroll in Medicare?

Once you are enrolled in Medicare, you must pro-rate any HSA contributions for the year the Medicare coverage begins. (You are allowed to contribute 1/12 of the annual contribution amount for each month you did not have Medicare coverage.)

Unless you postpone enrollment, Medicare coverage begins on the first of the month in which you turn 65 (except if your birthday is on the first, then Medicare coverage begins on the first day of the month prior to your birthday). Note that collecting Social Security retirement benefits automatically enrolls you in Medicare Part A if you are age 65 or older, and the Medicare enrollment can be retroactive up to six months prior to signing up for Social Security. Check on the date of your Medicare enrollment and prorate your annual HSA contributions accordingly.

NOTE: You can make an HSA contribution after you enroll in Medicare if you did not maximize your contribution for your last full year of HSA eligibility. You have until the tax filing date of the year following the tax year you lose HSA eligibility to make HSA contributions. You can do this even if you are no longer eligible for an HSA, as long as you are making a contribution for a period when you were eligible.

USEFUL CONTACTS

General Benefits Information

RRD Benefits Center

rrd.bswift.com | 1-877-RRD-4BEN (1-877-773-4236)
Mon. – Fri., 7 a.m. – 7 p.m. CT

Benefits Information

myRRDbenefits.com

Includes Summary Plan Descriptions (SPDs) and
Summaries of Material Modifications (SMMs)

Prescription Drug Information

Post-65 (or Medicare-eligible): Aetna

1-888-267-2637, Mon. – Fri., 7 a.m. – 8 p.m. CT

Pre-65: CVS Caremark

caremark.com | 1-866-273-8402, 24/7

Medical Information

Post-65 (or Medicare-eligible): Aetna

1-888-267-2637, Mon. – Fri., 7 a.m. – 8 p.m. CT

Pre-65: Blue Cross Blue Shield of Illinois (BCBSIL)

bcbsil.com/rrd | 1-800-537-9765
Mon. – Fri., 7 a.m. – 7 p.m. CT

Other Information

Medicare

medicare.gov | 1-800-633-4227, 24/7
(TTY 1-877-486-2048)

Pension Service Center

millimanbenefits.com | 1-866-767-1212
Mon. – Fri., 7 a.m. – 7 p.m. CT

Fidelity

401(k) Savings Plan | netbenefits.com
1-800-835-5095, Mon. – Fri., 7 a.m. – 9 p.m. CT

ABOUT THIS GUIDE

This guide describes the coverage that will be offered in 2026 to the majority of benefits-eligible retirees under the Pre-65 Medical Program under the RR Donnelley Group Medical Plan and the RR Donnelley Post-65 Retiree Welfare Benefits Plan (*collectively the "Plan"*). Your benefits eligibility will determine the coverage and premium that is offered to you, your spouse and your eligible child(ren). More details on benefits eligibility are available in the SPDs and SMMs online at myRRDbenefits.com, as well as the enrollment website at rrd.bswift.com. You can also call a Benefits Center Representative at 1-877-RRD-4BEN (1-877-773-4236).

IMPORTANT

The descriptions provided in this guide are based on official Plan documents. Every effort has been made to ensure the accuracy of this material. In the unlikely event there is a discrepancy between the official Plan documents, this guide, the SPDs, the SMMs, and any other materials summarizing the Plan, the following documents will control:

- Where this document is intended to summarize existing benefit provisions the SPDs, SMMs, any other materials summarizing the Plans and the official Plan documents, the official Plan documents will control.
- Where this document is intended to communicate a change to the SPDs, SMMs, any other materials summarizing the Plans and the official Plan documents, this document will control

RRD reserves the right to amend or terminate the Plan or Programs at any time for any reason.

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IMPORTANT NOTICES & DISCLOSURES

Applicable to the Pre-65 Medical Program under the RR Donnelley Group Medical Plan.

Special Enrollment Right for Certain Pre-65 Retirees

Pre-65 retirees who are enrolled in the Group Medical Plan and who marry or remarry on or after May 1, 2025, may enroll their new spouse in the Group Medical Plan if their spouse otherwise meets the Plan's eligibility criteria.

This special enrollment right does not apply in the following situations:

- Retirees who waived medical coverage (through the former Retiree Welfare Benefits Plan) at retirement;
- Participants who married (or remarried) after retirement but prior to May 1, 2025;
- Participants who marry (or remarry) after losing eligibility for the Pre-65 Group Health Program (e.g., due to becoming eligible for Medicare);
- Participants who marry a spouse who is not eligible for coverage under the Group Medical Program (e.g., if your spouse is age 65 or older or otherwise eligible for Medicare);
- Participants who enter into a civil union or domestic partnership at any time; and
- Surviving spouses of a deceased RR Donnelley retiree who later remarry.

To enroll a new spouse, you must notify the RR Donnelley Benefits Center within 30 days following the date of marriage.

If you have questions about these special enrollment rights, please call the RR Donnelley Benefits Center at **1-877-RRD-4BEN (1-877-773-4236)**.

Women's Health & Cancer Rights Act

Important information about benefits that may be available to women who have had or are going to have a mastectomy: If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prosthesis; and
- Treatment of physical complications of the mastectomy, including lymphedema.

Such coverage is subject to all Plan provisions, limitations and requirements applicable to other medical and surgical benefits provided under the Program, including any annual deductible and coinsurance limitations, outlined in the SBC, your SPD, and any related SMMs. If you would like more information, visit myRRDbenefits.com or call the Benefits Center at **1-877-RRD-4BEN (1-877-773-4236)**.