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Recognition

YOUR 2027 BENEFITS
ENROLLMENT GUIDE

NOVEMBER 9–20, 2026

Choose
your 2027
benefits with
confidence.



For more information, visit our
[annual enrollment page](#).



What's changing in 2027

BMO is committed to offering benefits that support your health, well-being, financial security, and family needs. As healthcare costs continue to rise at the fastest pace seen in decades, BMO is focused on investing in solutions that provide the most meaningful value and support, improve the employee experience, and help ensure the long-term affordability and sustainability of our benefits programs.

We are making updates to our programs that may affect what you pay, how certain benefits work, or where you go for support. We understand that any change can have an impact, and we encourage you to explore the tools, resources, and guidance to help you make informed choices and access the care you and your family need.

Medical plan design and prescription drug updates

There will be changes to premiums, deductibles, out-of-pocket maximums, and prescription drug costs for 2027. Review the available medical plan options carefully to determine which plan best meets your needs for the coming year.

Enhancing fertility care and navigation

Beginning January 1, 2027, BMO is enhancing fertility support for employees enrolled in BCBSIL medical plans by introducing Maven, which provides personalized guidance, care navigation, and advocacy. Employees enrolled in Kaiser will continue to access fertility and family-building support through Kaiser's programs and resources. As part of this change, fertility-related expenses will no longer be reimbursed through the Family Building Benefit policy. The policy will continue to support eligible adoption and surrogacy expenses.

Leave and disability updates

There are changes to short-term disability, long-term disability, and military leave. A new personal leave policy is also being introduced for 2027.

Life insurance changes

Employer-paid Basic Life Insurance will change from 2x Total Compensation BBR (TCBBR) to 1x TCBBR. During Annual Enrollment, you will have a one-time opportunity to increase your Supplemental Life Insurance by 1x without Evidence of Insurability (EOI) if you wish to maintain the same coverage level you currently have.

Dependent eligibility reverification

BMO is conducting a dependent eligibility reverification in early 2027 to confirm that covered dependents continue to meet plan eligibility requirements.

What you need to know for 2027

- **Annual Enrollment is November 9 to November 20, 2026.**
- **Some medical, prescription drug, life insurance, disability, leave, and family building benefits are changing.**
- **There are changes to premiums for medical and supplemental LTD. Dental, vision, and all voluntary plan premiums are not changing.**
- **Most elections will carry forward, but FSAs will not. You must re-enroll if you want an FSA in 2027.**
- **If you cover dependents in 2027, you will need to verify dependent eligibility.**
- **Review your options, submit your elections, and save your Benefits Summary before enrollment closes.**



Important Dates

November 9

Benefits enrollment for 2027 begins

November 20

Benefits enrollment for 2027 ends

January 1, 2027

Annual Enrollment elections take effect

2027 Annual Enrollment checklist



Use this checklist to complete the Annual Enrollment actions that apply to you. After Annual Enrollment closes, you can change your benefits only if you have a qualifying life event.

- ☐ **Log into [Workday](#).**
 - Click on *My Benefits & Retirement*.
- ☐ **Confirm your benefits that will carry forward.**
 - Most current elections will carry forward automatically.
 - Review your elections to confirm they still fit your needs for 2027.
- ☐ **Re-enroll in Flexible Spending Accounts if you want to participate in 2027.**
 - Health Care FSA, Limited Purpose FSA, and Dependent Care FSA elections do not carry forward.
- ☐ **Compare your medical plan options.**
 - Review premiums, deductibles, out-of-pocket maximums, prescription drug coverage, networks, and expected care needs.
- ☐ **Check HSA eligibility before contributing.**
 - If you enroll in the HDHP and want to contribute to a Health Savings Account, confirm you meet HSA eligibility rules.
- ☐ **Confirm who you cover.**
 - Add or remove dependents as needed and remove anyone who no longer meets dependent eligibility rules.
- ☐ **Review life insurance and disability coverage.**
 - Evaluate whether the changes to Basic Life Insurance and Long-Term Disability coverage create a need for additional Supplemental Life Insurance or LTD buy-up coverage.
- ☐ **Submit your elections and save your Benefits Summary.**
 - Keep a copy for your records.



Important tip

The enrollment system saves your elections as you go. Before Annual Enrollment closes, review your elections carefully and save your Benefits Summary for your records. Once Annual Enrollment closes, saved elections will be finalized and go into effect for 2027.



Check your home address

Make sure your home address is current in [Workday](#). This helps avoid delays in receiving insurance cards, dependent audit mailings, and tax forms.

A few important reminders

1 Dependent Eligibility Reverification

To help ensure benefits are administered consistently and in accordance with plan eligibility requirements, BMO is conducting a dependent eligibility reverification in the first quarter of 2027. This process helps maintain accurate enrollment records and supports the responsible administration of benefit plans for all employees and their families. Dependents verified on or after January 1, 2026, will be excluded from the 2027 dependent eligibility reverification process.

If you cover dependents under a BMO medical, dental, or vision plan in 2027, you will be required to verify that they meet plan eligibility requirements. You will receive an introductory notification by mail in January with detailed instructions about the verification process. The communication will outline the documentation you'll need, how to submit it, and key deadlines.



You will receive a notice for any dependents that you are required to verify. You may be required to verify a dependent if:

- Your dependent's eligibility was last verified on or before December 31, 2025, and your dependent relationship is one that can change over time (for example, a spouse, domestic partner, stepchild, or other dependent whose eligibility may change).
- Your dependent has never been verified by BMO.

2 Get support to make informed decisions

You have tools and resources to help you compare your options and choose benefits that fit your situation:

- **Benefits website:** Visit the [2027 Annual Enrollment page](#) for plan details, tools, and resources.
- **Summary of Benefits and Coverage (SBCs):** Use these standardized summaries to compare medical plan options.
- **Be Ready webinars:** Attend education sessions before Annual Enrollment.
- **Enrollment Specialist appointments:** You do not have to make benefits decisions alone. Enrollment support will be available before and during Annual Enrollment. You can schedule an appointment with an Enrollment Specialist through [Workday](#) using the My Benefits & Retirement application.
- **Carrier and vendor contacts:** Use member portals and mobile apps to access ID cards, claims, provider searches, and plan resources.



Important reminder

Don't miss out on [BMO's Student Loan Retirement Match](#)

- Eligible BMO U.S. employees who make qualifying student loan payments may now receive tax-advantaged retirement matching contributions, just like a traditional 401(k)-match program. Review the [Student Loan Retirement Match Guide](#) to learn more. Don't miss out on your 2026 SLRM - Submit by January 15, 2027.
- Get Connected! To find out more or get started: log into your Empower 401(k) account, then go to "Planning", and select "Student Debt Solution" to connect to your Candidly dashboard.
- Need More Help? Live chat from your Candidly dashboard, or email help@getcandidly.com.

Healthcare

Medical plan options

BMO offers medical plan options that let you choose how you want to balance paycheck costs, out-of-pocket costs, and tax savings opportunities. Your options include the High-Deductible Health Plan (HDHP), and the PPO or Kaiser DHMO, where available, based on your location.

- The **HDHP** can be paired with a **Health Savings Account (HSA)**, if you are eligible.
- The **PPO** or **Kaiser DHMO** options may provide more predictable costs when you receive care, but with higher paycheck premiums.

Choose based on what matters to you

Each plan offers different advantages. Consider your expected health care needs, who you'll cover, your comfort with out-of-pocket costs, and whether you can take advantage of tax-advantaged savings accounts.



If this sounds like you	Compare these features	Questions to ask
I want more control over what I spend.	• Paycheck cost (premiums) • Amount you pay before the plan starts paying more (deductible) • Most you would pay in a year for covered care (out-of-pocket maximum) • Tax savings account for eligible healthcare expenses (Health Savings Account, or HSA)	<i>Would a lower paycheck cost plus HSA tax savings and BMO contribution help you manage total annual cost?</i>
I want more predictable costs.	• Set costs for certain services (copays) • Amount you pay before the plan starts paying more (deductible) • How often you expect to use care (expected healthcare use)	<i>Would a higher paycheck cost be worth more predictable costs when you receive care?</i>
I want to maximize tax savings.	• Tax savings accounts for eligible expenses (HSA, LPFSA, HCFSA, DCFSA) • Maximum annual contribution amounts (IRS contribution limits) • Rules for unused money (carryover rules) • Account availability by medical plan (account eligibility)	<i>Which accounts can you use with your medical plan election?</i>
I cover my family.	• Family deductible • Family out-of-pocket maximum • Covered doctors and facilities (network) • Who you can cover under the plan (dependent eligibility)	<i>How does each plan work for everyone you cover?</i>
I rarely use care.	• Paycheck cost (premiums) • No-cost in-network preventive care • BMO HSA funding, if eligible • Protection from unexpected costs (out-of-pocket maximum)	<i>Can you save on premiums while still protecting yourself from unexpected expenses?</i>
I take ongoing or maintenance medications.	• Medication coverage level (formulary status) • Lower-cost options (generic alternatives) • 90-day refills (mail order) • Special medication rules (specialty drugs and coverage requirements)	<i>Have you checked how your prescriptions will be covered in 2027?</i>

Healthcare

Medical plan design highlights

This table summarizes key 2027 in-network design features for the national BCBSIL plans. Kaiser options may vary by region. If you are eligible for Kaiser, review the Kaiser plan materials and [SBCs](#) before enrolling.

Feature	HDHP	PPO
BMO HSA funding	Yes, if HSA-eligible: \$500 employee-only/\$1,000 family	Not eligible
Deductible type	Aggregate	Embedded
In-network deductible	\$2,000 employee-only/\$4,000 family	\$850 employee-only/\$1,700 family
In-network out-of-pocket maximum	\$4,500 employee-only/\$9,000 family	\$4,500 employee-only/\$9,000 family
Plan coinsurance	20%	20%
Office visits	*NEW FOR 2027* \$25 primary care/\$40 specialist after deductible	\$25 primary care/\$40 specialist
Emergency room	Deductible, then coinsurance	\$500 copay
Preventive care	You pay nothing for covered in-network preventive care	You pay nothing for covered in-network preventive care

Deductible reminder: With an aggregate family deductible, the full family deductible must be met before the plan begins paying for non-preventive care for any covered family member. With an embedded deductible, the plan may begin paying for one covered family member once that person meets the individual deductible.



VIP Health Advocacy Support

If you're enrolled in a BCBSIL medical plan, you have access to 24/7 Health Advocacy support, a personalized service to help you navigate the healthcare system with ease. Whether you need help finding a doctor, managing a diagnosis, resolving a billing issue, or connecting with mental health resources, Health Advocates are here to support you.

Call 855-643-3171 anytime for assistance, 24/7.



GoWellBeing

For BCBSIL medical plan members, GoWellBeing will replace WellonTarget as the well-being platform for 2027. GoWellBeing will provide access to well-being resources and tools designed to help you support your health throughout the year.

Updates to Fertility Support

As part of this update, BMO is expanding fertility coverage through the BCBSIL medical plans and introducing Maven to provide personalized guidance, care navigation, education, and advocacy for employees and families considering fertility and family-building care. Employees enrolled in Kaiser can continue to access fertility and family-building support through Kaiser's programs and resources.

As a result, fertility-related expenses will no longer be reimbursed through the current [Family Building Benefit](#) policy, starting January 1, 2027. Instead, eligible fertility services may be covered under the BMO medical plans, subject to plan terms, eligibility requirements, applicable law, and any applicable limits or exclusions.

The Family Building Benefit policy will continue to support eligible adoption and surrogacy expenses. Through the partnership with Maven and Kaiser, members will also have access to expert support and resources to help them navigate their family-building journey with confidence.

Healthcare

Prescription drug coverage

Prescription drug costs vary based on the medication, the formulary, where you fill the prescription, and whether your plan deductible applies. Before you enroll, check how your current medications will be covered in 2027.

Prescription type	2027 cost-sharing	What to know
Generic	Retail: \$10 copay. Mail order: \$25 copay.	Ask your doctor or pharmacist if a generic option is right for you.
Formulary brand	30% coinsurance, with \$30 minimum/\$100 maximum.	Formulary drugs generally cost less than non-formulary drugs.
Non-formulary brand	40% coinsurance, with \$60 minimum/no maximum.	If you use a non-formulary medication, ask whether a formulary alternative is available.
New for 2027 Weight loss medications	HDHP: You pay a \$150 copay per 30-day fill without first meeting the deductible. PPO: You pay a \$150 copay per 30-day fill after meeting the prescription drug deductible.	Coverage for weight loss medications is subject to plan rules and program requirements, including utilization management and participation in a lifestyle support program.

Dental

Research shows that good oral health relates to good overall health and well-being. Practicing daily oral health habits and visiting the dentist for preventive care can help remove plaque, prevent cavities and protect your gums and teeth. It can also protect your wallet by catching and treating problems early, so you can avoid costly, time-consuming procedures in the future.

BMO offers dental coverage through Delta Dental. You can see any licensed dentist you choose; however, you will save the most money by visiting a Delta Dental PPO or Delta Dental Premier network dentist.

Understand your Delta Dental network options.

- **Delta Dental PPO:** You will save the most with a Delta Dental PPO dentist. Delta Dental PPO network dentists agree to accept the reduced PPO fees as payment in full for dental services. This means they cannot bill you the difference between what they usually charge and what the Delta Dental PPO fee is.
- **Delta Dental Premier:** You will pay more with a Delta Dental Premier dentist compared to a Delta Dental PPO dentist. However, you will likely save compared to a non-Delta Dental network dentist. Delta Dental Premier dentists agree to the maximum plan allowance as payment in full, which may be lower than the dentist's regular fee.

Consider your expected dental needs for 2027, including preventive, basic, major, and orthodontic services. You may also qualify for additional oral health benefits through Delta Dental of Illinois' [Enhanced Benefits Program](#) if you have certain health conditions.

	HIGH PLAN	LOW PLAN
Deductible (single/family)	\$50/\$150	\$50/\$150
Annual limit (per person)	\$2,000	\$1,000
Preventive coinsurance	100%	100%
Basic coinsurance	80%	80%
Major restorative coinsurance	50%	50%
Orthodontic services	Adult: Yes Child: Yes	N/A
Orthodontic coinsurance	50%	N/A
Orthodontic lifetime limit	\$2,000	N/A
Lifetime Non-surgical TMJ Maximum	\$1,000 per person	

Healthcare

Vision

An annual visit to your [VSP® Vision Care](#) network eye doctor is an essential part of maintaining your eye health. At your [eye exam](#), your eye doctor will check for any vision correction needs, but that’s not all they’ll look at. Your eye doctor [will keep an eye out](#) for signs of eye conditions like glaucoma, cataracts, and macular degeneration. Plus, they’ll watch for signs of more than 270 health conditions that your eye doctor can detect during an eye exam, like diabetes, high cholesterol, and high blood pressure.

BMO offers two vision plan options through VSP:

a High Plan and a Low Plan. Both plans let you see any vision care provider, but you generally receive the best value when you use a VSP network provider.

Review your anticipated needs for eye exams, eyeglass lenses, frames, and contact lenses when selecting a vision plan.

	HIGH PLAN	LOW PLAN
Exam	Every Calendar Year No Copay	Every Calendar Year \$10 Copay
Lenses	Every Calendar Year No Copay	Every Calendar Year \$20 Copay
Frames	Every Other Year \$175 allowance (retail) \$225 allowance (featured)	Every Other Year \$150 allowance (retail) \$200 allowance (featured)
Contact Lenses	\$175 allowance (in lieu of frames)	\$150 allowance (in lieu of frames)
VSP EasyOptions	N/A	Choose one of the following upgrades when purchasing glasses or contact lenses*: • Additional \$75 frame allowance • Fully covered premium or custom progressive lenses • Fully covered light-reactive lenses • Fully covered anti-glare coating • Additional \$75 contact lens allowance * Upgrade is available every calendar year. Copay is included in prescription.
VSP Lightcare	N/A	\$250 allowance for ready-made non-prescription sunglasses or non-prescription blue light filtering glasses (instead of prescription glasses or contacts)* * Allowance available every calendar year. \$0 copay



Tax Savings Accounts

Tax savings accounts can help you pay eligible expenses with pre-tax dollars. Your medical plan election affects which healthcare accounts you can use, so review these options before choosing your contributions.

Account	2027 Limit	Usually paired with	Use it for	Rolls over?	Key reminder
Health Savings Account (HSA)	Employee only: \$4,500 Family: \$9,000 Catch-up: \$1,000 if you are age 55 or attain age 55 by the end of 2027	HDHP, if HSA-eligible	Qualified medical, prescription drug, dental, and vision expenses	Yes	You cannot contribute if you are enrolled in Medicare or otherwise not HSA-eligible.
Limited Purpose Flexible Spending Account (LPFSA)	TBD	HDHP plus HSA	Eligible dental, vision, and post-deductible medical expenses	Limited carryover	This account can work with an HSA.
Health Care Flexible Spending Account (HCFSA)	TBD	Non-HDHP coverage, or if not contributing to an HSA	Eligible healthcare, dental and vision expenses	Limited carryover	You cannot contribute to a regular HCFSA and HSA at the same time.
Dependent Care Flexible Spending Account (DCFSA)	\$7,500 per household	Any (or no) medical plan election	Eligible childcare or elder care expenses that allow you to work	No carryover permitted	This account is for dependent care, not healthcare expenses.

Note: If you are considered highly compensated under IRS rules and earned more than \$160,000 in 2026, your 2027 DCFSA contributions will be limited to \$2,000.



Quick account decision guide

Start with your medical plan choice. If you choose the HDHP and are HSA-eligible, consider the HSA and LPFSA. If you do not choose the HDHP or are not HSA-eligible, consider the HCFSA. If you pay eligible childcare or elder care expenses so you can work, consider the DCFSA.



If you are turning age 65 or enrolling in Medicare

Planning to enroll in Medicare next year? Now is a good time to review your HSA contributions. Enrollment in any part of Medicare makes you ineligible to contribute to an HSA or receive BMO HSA contributions. Remember that HSA contribution elections can also be adjusted during the year if your eligibility changes.

To learn more, visit [BMO's Medicare Eligibility page](#).

Health Savings Account (HSA)

An HSA is a tax-advantaged account you can use to save and pay for qualified medical expenses. To contribute to an HSA, you must be enrolled in an HSA-eligible HDHP and meet IRS eligibility rules:

- You can contribute pre-tax dollars.
- Your balance can grow tax-free.
- Withdrawals are tax-free when used for qualified medical expenses.
- Unused funds roll over year to year.
- The account belongs to you, even if you leave or retire from BMO.

If you enroll in the HDHP and are HSA-eligible, BMO will contribute \$500 for employee-only coverage or \$1,000 for family coverage to your HSA.

Income protection and leave



Life Insurance

BMO provides employer-paid Basic Life Insurance to help protect your family financially. For 2027, the employer-paid Basic Life Insurance will change from 2x Total Compensation BBR (TCBBR) to 1x TCBBR. During Annual Enrollment, you will have a one-time opportunity to increase Supplemental Life Insurance by 1x without Evidence of Insurability (EOI), provided your total coverage does not exceed the guaranteed issue limit of the lesser of \$1,000,000 or 5x pay. Take this opportunity to review your personal and family needs and decide whether additional coverage could provide added financial protection and peace of mind.

- Review your current life insurance coverage.
- Consider whether the Basic Life Insurance change affects your needs.
- Explore Supplemental Life Insurance options and rates.
- Confirm that your beneficiaries are up to date in [Workday](#).

 **TCBBR is the compensation amount BMO uses to calculate certain benefits. You can find your TCBBR in your [Workday](#) profile, under “View Benefits Annual Rate”.**



Review your beneficiaries

Confirm your life insurance beneficiaries in [Workday](#), even if you do not change your coverage. You may name one or more primary and contingent beneficiaries. If you do not name a beneficiary, benefits will be paid according to the plan's default beneficiary provisions.

Income protection and leave

Disability and leave changes

BMO is updating disability and leave programs for 2027. These programs provide income replacement or time away from work when you are unable to work due to a qualifying condition or need approved leave. Review the changes below to understand how they may affect you and any decisions you may need to make during enrollment.

Program	What is changing	What this means for you
Short-term Disability (STD)	Benefit Duration: STD benefits will be available for up to 26 weeks. Pay Schedule: The pay schedule for STD is being simplified. Employees with less than 10 years of service will receive 75% of base salary* (employees with 10 or more years of service will continue to receive 100% of base salary*).	If you have less than 10 years of service, you will now be paid 75% of your base salary* for the full duration of your approved STD period. You can substitute available sick and/or vacation time to reach 100% pay. If you have 10+ years of service, there is no change to your pay schedule.
Long-term Disability (LTD)	Elimination Period: To align to the updated leave duration for STD, LTD benefits are available after a 26-week elimination period. Basic LTD Benefits: The Basic LTD coverage is changing to 50% of total compensation (TCBBR). Supplemental LTD options: For additional income protection, you will have the ability to increase your coverage with two supplemental buy-up options: 15% or 25%.	You should consider whether the basic benefit provides enough income protection or whether you wish to buy-up supplemental coverage to increase your income protection.
Personal Leave	New Leave Type: BMO is offering a new unpaid personal leave for up to 4 weeks to provide more flexibility for life's unique circumstances. This leave will be subject to manager approval and will require that your accrued vacation is exhausted first.	If you have a unique circumstance (like a wedding or trip of a lifetime) and require additional time away, consider requesting approval from your manager to take personal leave. The new Personal Leave Policy, including all the applicable requirements, will be available January 1, 2027.
Military Leave	Payment option: The Military Leave policy will be simplified to include one payment option going forward. Your military leave benefit will be calculated using your standard bi-weekly pay minus any military pay you receive. Benefit Duration: Paid Military Leave will be available for up to a maximum of one year, per leave event (active duty or annual training).	Military leave benefits will be more straightforward and easier to calculate.

*Note: Leave benefits for certain commissioned employees are determined using their Base Benefit Rate (BBR).

Voluntary Benefits



BMO offers additional benefits that can help provide financial protection, legal support, and other resources. Review these options during Annual Enrollment and consider whether they fit your needs.

Accident Insurance

Accident Insurance pays a lump sum benefit if you or a covered family member has a covered injury or receives covered testing, medical services, or treatment. You can use the payment however you choose. The plan also includes a Sports Accident Benefit that may provide additional benefits for covered accidents that occur while participating in organized amateur sports, such as school athletics, recreational leagues, and organized competitions or practices, as well as eligible coaching, officiating, or refereeing activities.

Hospital Indemnity Insurance

Hospital Indemnity Insurance pays a fixed daily benefit if you have a covered stay in a hospital, critical care unit, or rehabilitation facility.

Critical Illness Insurance

Critical Illness Insurance pays a lump sum benefit if you are diagnosed with a covered illness or condition, such as cancer, stroke, coronary artery bypass, or heart attack.



Voya Wellness Benefit

If you enroll in accident, hospital indemnity, or critical illness insurance, you are eligible to claim a Wellness Benefit through Voya. This benefit can pay you, and any covered dependents, once per calendar year when you receive preventive care services or complete a covered health screening test, subject to plan rules.

Legal Plan

The Legal Plan, administered by ARAG, gives you access to legal support for a range of matters, such as wills and living wills, home purchase or refinancing, small claims, and identity theft defense.

2027 Premiums



Premiums are what you pay from your paycheck for coverage. They are one part of your total cost. When comparing options, also review deductibles, copays, coinsurance, out-of-pocket maximums, prescription drugs, networks, tax savings accounts, and expected care needs.

Monthly Premiums (before-tax)

Plan Option	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Medical – HDHP Plan (BCBSIL and Kaiser)				
Total compensation*: \$70,999 and under	\$171.50	\$393.00	\$325.00	\$495.00
Total compensation*: \$71,000 - \$130,999	\$215.50	\$497.00	\$410.50	\$625.00
Total compensation*: \$131,000 - \$175,999	\$239.50	\$552.50	\$457.00	\$694.50
Total compensation*: \$176,000 - \$285,999	\$271.00	\$623.00	\$515.50	\$783.50
Total compensation*: \$286,000 and over	\$306.00	\$703.50	\$581.00	\$886.00
Medical – PPO (BCBSIL) and DHMO (Kaiser)				
Total compensation*: \$70,999 and under	\$224.00	\$529.50	\$419.50	\$696.00
Total compensation*: \$71,000 - \$130,999	\$273.00	\$645.50	\$514.50	\$841.00
Total compensation*: \$131,000 - \$175,999	\$300.50	\$707.50	\$566.50	\$919.00
Total compensation*: \$176,000 - \$285,999	\$335.00	\$786.00	\$631.00	\$1,018.00
Total compensation*: \$286,000 and over	\$374.00	\$876.00	\$705.50	\$1,132.00
Dental (Delta Dental)				
Low Plan	\$15.00	\$33.00	\$35.00	\$45.00
High Plan	\$25.00	\$56.00	\$59.00	\$76.00
Vision (VSP)				
Low Plan	\$7.40	\$14.78	\$15.80	\$25.24
High Plan	\$14.28	\$26.00	\$27.28	\$42.12

* Your eligible total compensation is your base salary, overtime, shift differential and any variable pay that is related to work performance that you receive between October 1 and September 30 of the prior year. For example, for 2027, pay paid from October 1, 2025, to September 30, 2026. You can view your total compensation in [Workday](#). In your worker profile, select **"Actions"** - **"Benefits"** - **"View Benefits Annual Rate"**

2027 Premiums

Monthly Premiums (after-tax)

Plan Option	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Accident Insurance				
High Plan	\$5.00	\$9.86	\$10.29	\$15.15
Low Plan	\$2.53	\$4.66	\$5.29	\$7.42
Hospital Indemnity				
High Plan	\$13.36	\$28.65	\$26.04	\$41.33
Low Plan	\$6.24	\$13.53	\$12.60	\$19.89

Monthly Premiums (after-tax)

ARAG Group Legal	
ARAG Group Legal	\$20.50

2027 Supplemental Disability Monthly Premium (pre-tax)

Coverage Level	Your Cost
Additional 15% of TCBBR (65% total)	\$0.3467 (annual premium per \$1,000 of TCBBR)
Additional 25% of TCBBR (75% total)	\$0.3467 (annual premium per \$1,000 of TCBBR)

Monthly Premiums (after-tax)

Plan Option	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Critical Illness (\$20,000 Plan) - Non Smoker				
Age: Under 25	\$6.20	\$13.40	\$7.40	\$14.60
Age: 25-29	\$6.80	\$14.20	\$8.00	\$15.40
Age: 30-34	\$7.80	\$17.00	\$9.00	\$18.20
Age: 35-39	\$9.60	\$20.40	\$10.80	\$21.60
Age: 40-44	\$13.20	\$29.60	\$14.40	\$30.80
Age: 45-49	\$20.40	\$45.60	\$21.60	\$46.80
Age: 50-54	\$32.00	\$65.60	\$33.20	\$66.80
Age: 55-59	\$36.80	\$78.20	\$38.00	\$79.40
Age: 60-64	\$42.80	\$97.60	\$44.00	\$98.80
Age: 65-69	\$44.80	\$109.00	\$46.00	\$110.20
Age: 70+	\$60.80	\$138.00	\$62.00	\$139.20

2027 Premiums

Monthly Premiums (after-tax)

Plan Option	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Critical Illness (\$20,000 Plan) - Smoker				
Age: Under 25	\$9.80	\$21.40	\$11.00	\$22.60
Age: 25-29	\$10.60	\$22.80	\$11.80	\$24.00
Age: 30-34	\$12.00	\$26.60	\$13.20	\$27.80
Age: 35-39	\$14.20	\$31.60	\$15.40	\$32.80
Age: 40-44	\$26.20	\$53.00	\$27.40	\$54.20
Age: 45-49	\$46.20	\$103.40	\$47.40	\$104.60
Age: 50-54	\$53.80	\$125.60	\$55.00	\$126.80
Age: 55-59	\$62.60	\$157.80	\$63.80	\$159.00
Age: 60-64	\$68.40	\$192.20	\$69.60	\$193.40
Age: 65-69	\$76.80	\$213.20	\$78.00	\$214.40
Age: 70+	\$88.00	\$236.20	\$89.20	\$237.40
Critical Illness (\$10,000 Plan) - Non Smoker				
Age: Under 25	\$3.10	\$6.70	\$3.70	\$7.30
Age: 25-29	\$3.40	\$7.10	\$4.00	\$7.70
Age: 30-34	\$3.90	\$8.50	\$4.50	\$9.10
Age: 35-39	\$4.80	\$10.20	\$5.40	\$10.80
Age: 40-44	\$6.60	\$14.80	\$7.20	\$15.40
Age: 45-49	\$10.20	\$22.80	\$10.80	\$23.40
Age: 50-54	\$16.00	\$32.80	\$16.60	\$33.40
Age: 55-59	\$18.40	\$39.10	\$19.00	\$39.70
Age: 60-64	\$21.40	\$48.80	\$22.00	\$49.40
Age: 65-69	\$22.40	\$54.50	\$23.00	\$55.10
Age: 70+	\$30.40	\$69.00	\$31.00	\$69.60
Critical Illness (\$10,000 PLAN) - Smoker				
Age: Under 25	\$4.90	\$10.70	\$5.50	\$11.30
Age: 25-29	\$5.30	\$11.40	\$5.90	\$12.00
Age: 30-34	\$6.00	\$13.30	\$6.60	\$13.90
Age: 35-39	\$7.10	\$15.80	\$7.70	\$16.40
Age: 40-44	\$13.10	\$26.50	\$13.70	\$27.10
Age: 45-49	\$23.10	\$51.70	\$23.70	\$52.30
Age: 50-54	\$26.90	\$62.80	\$27.50	\$63.40
Age: 55-59	\$31.30	\$78.90	\$31.90	\$79.50
Age: 60-64	\$34.20	\$96.10	\$34.80	\$96.70
Age: 65-69	\$38.40	\$106.60	\$39.00	\$107.20
Age: 70+	\$44.00	\$118.10	\$44.60	\$118.70

2027 Premiums

Monthly Premium per \$1,000 of Coverage (after-Tax)

Plan Option	Non-Smoker	Smoker
Supplemental Life Insurance*		
Age: Under 25	\$0.033	\$0.050
Age: 25-29	\$0.033	\$0.060
Age: 30-34	\$0.041	\$0.080
Age: 35-39	\$0.058	\$0.103
Age: 40-44	\$0.074	\$0.150
Age: 45-49	\$0.107	\$0.206
Age: 50-54	\$0.173	\$0.384
Age: 55-59	\$0.321	\$0.655
Age: 60-64	\$0.486	\$1.030
Age: 65-69	\$0.931	\$1.938
Age: 70+	\$1.517	\$3.136

* BMO pays for Basic Life coverage equal to one time your total compensation (up to \$500,000). You can elect additional supplemental coverage from one to eight times annual total compensation up to a maximum of \$3 million.

Monthly Premiums (after-tax)

Family Life Insurance*			
Spouse	Premium	Children	Premium
\$25,000	\$4.55	\$10,000	\$1.67
\$50,000	\$9.07	\$15,000	\$2.50
\$100,000	\$18.17	\$20,000	\$3.34
\$150,000	\$27.25	\$25,000	\$4.17

* The amount of Insurance for your spouse/domestic partner cannot exceed your total combined amount of Basic and Supplemental Life Insurance. The amount of Insurance for your child(ren) cannot exceed your total combined amount of Basic and Supplemental Life Insurance.



Important Benefits
Information

[Summary Plan Descriptions >](#)

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This Annual Enrollment Guide serves as a Summary of Material Modifications (SMM) for the BMO U.S. Health and Welfare Benefit Plan and describes changes effective January 1, 2027. The information in this guide supplements and, where applicable, modifies the current Summary Plan Description (SPD). The SPD will be updated at a later date to reflect these changes. If there is any inconsistency between this guide and the official plan documents, the plan documents will govern.

This enrollment information provides highlights of BMO benefit plans. It does not include every plan detail, limit, or exclusion and does not create contractual rights. The official plan documents govern these plans and provide full details. BMO reserves the right to modify, amend, replace, or discontinue any benefit or plan at any time for any reason, subject to applicable law. If there are discrepancies between this guide and the legal plan documents, the plan documents will govern.

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