

Maven Wallet for Universal Music Group

2026

Introduction

Welcome to Universal Music Group's family building benefits, administered by Maven.

Maven is a digital family health platform that provides virtual support for those navigating trying to conceive, fertility treatments and preservation—including IUI, IVF, egg/sperm freezing and male fertility—adoption, surrogacy, pregnancy and postpartum, parenting and menopause. Maven is the only program of its kind to combine easy-to-use benefits with digital care on a single platform, with an integrated care team.

This document is your comprehensive resource on the Fertility, Donor, Adoption and Surrogacy benefits offered by Universal Music Group through Maven. Maven's family building expense management system is called "Maven Wallet." The benefits offered by Universal Music Group through Maven Wallet have been carefully curated to combine high quality and accessible in-person and virtual care. We understand that your journey to parenthood can be both exciting and challenging, and Maven is here to support you every step of the way.

In this guide, you will find information on the financial support offered under the program, guidance on accessing these benefits, and valuable insights on how to navigate your journey.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Table of Contents

Your benefits at a glance
How to enroll in Maven
How to access your coverage through Maven
Your care options
- Virtual Care
- The Maven Performance Network
- Maven Rx
- Other Fertility Services
- Donor, Adoption, and Surrogacy

Maven Cycles
How benefits are processed
- In-network fertility services
- Seeking reimbursement for other covered services
- Your financial responsibility

Coverage details
- Covered Fertility Services
- Donor and Tissue reimbursement through Maven
- Adoption reimbursement through Maven
- Surrogacy reimbursement through Maven

Important Tax Information
Exhaustion/Termination of Benefits
Contact Us
Frequently Asked Questions
Appendix

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Your benefits at a glance

Free access to Maven's virtual clinic*

Get personalized 24/7 virtual support, care, and guidance for your family building, pregnancy, parenting and menopause journey. With Maven, you and your spouse/partner can meet with providers anytime day or night so you can get the care you need, when you need it.

Programs	Description
Fertility and Family Building	Navigate fertility treatment options (like IUI, IVF, egg/sperm freezing, and male fertility services), choose an adoption or surrogacy agency, and find support while trying to conceive
Maternity and Newborn Care	Create a birth plan, navigate infant sleep, get support with breastfeeding and bottle feeding, and meet with postpartum mental health specialists; plus, ship your breastmilk for free when you travel for work with Maven Milk
Parenting and Pediatrics	Access specialized pediatric care as well as personalized support for parenting and navigating your career while raising kids
Menopause and Midlife Health	Manage symptoms, navigate the treatment that's best for you and your options for in-person care

**Benefits eligible employees of Universal Music Group and their spouses/domestic partners are eligible for access to Maven's virtual clinic.*

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Maven Wallet for Fertility, Donor, Adoption and Surrogacy coverage

Universal Music Group (UMG) offers the following Fertility, Donor, Adoption, and Surrogacy financial benefits for eligible members through Maven Wallet.

Fertility	● 1 Maven Cycle per household lifetime maximum ○ 'Household' is defined as an eligible employee and their eligible dependents ● All employees, spouses/domestic partners and dependents under age 26 enrolled in a UMG Anthem medical plan are eligible for coverage ● Eligibility begins upon enrollment in a UMG Anthem medical plan ● Fertility treatment and preservation expenses are subject to cost share (such as a deductible, copay, or coinsurance). Maven will coordinate your fertility benefit with your UMG Anthem medical plan to ensure appropriate benefits are applied to the services utilized during your journey ● Members pursuing fertility treatments (like IUI, IVF and egg freezing) are required to use a Maven Performance Network provider to qualify for coverage (see "Maven Performance Network" in the Additional Details section below).
Adoption, Surrogacy, and Donor Tissue	● $14,000 lifetime maximum per household ○ This amount is combined across Donor Tissue, Adoption and Surrogacy ● All employees and spouses/domestic partners are eligible for reimbursement ● Eligibility begins on the date of hire

Additional Details

Historical Utilization	Even if you have previously used all or a portion of your lifetime fertility and family building benefits through a previous UMG coverage or reimbursement program, you will have access to 1 Maven Cycle and $14,000 per household per lifetime for adoption, surrogacy and donor tissue expenses.
Infertility Diagnosis Requirements	A medical diagnosis of infertility is **not required** to receive fertility treatment (IUI, IVF) or preservation (egg, sperm freezing) coverage through this benefit.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

	Dependent children enrolled in a UMG Anthem medical plan may only access the benefit for medically necessary fertility preservation (egg/sperm freezing).
Maven Performance Network	With Maven, we've taken out the guesswork of finding a fertility clinic with outstanding reviews and outcomes. The Maven Performance Network is our curated and high-performing network of clinic partners that have been chosen to give you the best experience, exceptional care, and help you achieve your family building goals. Members pursuing fertility treatments (like IUI, IVF and egg freezing) are **required to use a Maven Performance Network provider to qualify for coverage.** So long as you have selected a provider that participates in Maven's network, no additional prior authorization is needed to access care. In certain limited circumstances, you may be eligible to continue using your current fertility clinic / provider that does not participate in Maven's Performance Network. You may inquire with the Maven Care Team if you need to apply for an exception to use an out-of-network provider.
Reimbursement Submission Timeline	For adoption, requests for reimbursement must be submitted to Maven Wallet within 180 days of the finalized or failed adoption event. For surrogacy, requests for reimbursement must be submitted to Maven Wallet within 180 days of incurring the eligible expense, or after the surrogacy agreement is signed, whichever is later. Requests for donor/tissue reimbursement must be submitted to Maven Wallet within 180 days of incurring the eligible expense. When applicable, eligible fertility expenses paid out-of-pocket must also be submitted within 180 days of incurring the eligible expense.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

How to enroll in Maven

Maven provides free virtual support for your reproductive health and family building journey. UMG has partnered with Maven to give you access to top-rated providers, judgment-free advice, on-demand classes and support from a dedicated Care Advocate. Follow the instructions below to enroll in Maven.

1. Create your account

Download the Maven Clinic app (Google Play or App Store) to enroll or sign into your account at https://www.mavenclinic.com/join/takecare.

You will create your account using your personal email. You will then need to confirm your eligibility by providing details such as your first and last name and date of birth.

If you have any questions or issues creating your account, please contact the Maven Care Team at support@mavenclinic.com.

2. Choose a track

Choose a custom track based on where you are in your reproductive or family health journey.

3. Meet with your dedicated Maven Care Advocate

Once you are registered, schedule your introduction appointment with your Care Advocate. You can meet or message with them for support, to discuss your family building goals and ask any questions. They can help you navigate Maven, will assign a team of virtual providers, and share resources that are relevant for your journey.

You'll also have access to Maven's Member Benefits Services team for guidance and support navigating your employer's family building benefits administered by Maven. You can contact a Maven Member Benefits Specialist at any time at benefits@mavenclinic.com.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

How to access your coverage through Maven

With Maven Wallet, we've simplified paying for your family building journey so you can focus on what really matters — your care. Wallet is your home base for understanding your employer-sponsored family building coverage, managing treatment costs, submitting reimbursements, and tracking your benefit balance – all within the Maven app!

Follow the instructions below to start using Universal Music Group's family building benefits through Maven Wallet.

1. Activate your Maven Wallet

Once you enroll in Maven, you can apply to activate your Wallet right in the app. We will verify your eligibility after which you will be able to access your employer-sponsored benefits through Wallet.

2. Get your Maven Benefit ID

A Maven Benefit ID is your unique Maven ID – similar to a health insurance member ID card. Your Maven Benefit ID is available digitally in your Maven Wallet.

A Maven Benefit ID is needed for **fertility treatment and preservation care and to fill fertility prescriptions through the Maven Rx program.** If you are using Maven Wallet for donor, adoption, or surrogacy expenses, you do not need to use your Maven Benefit ID.

- To access your Maven Benefit ID, you will be prompted to link your preferred payment method to your Maven Wallet to pay any applicable cost share for Covered Fertility Services (such as a deductible, copay or coinsurance). Your payment method can be your personal checking or savings account (including your HSA) or your preferred credit/debit card. **Any credit card payment processed will include a 3% convenience fee.** You will pay any applicable cost share after Covered Fertility Services are completed.

- When you receive in-network fertility services, an estimate of your cost share will be provided in your Maven Wallet once your treatment or service at a Maven in-network provider is scheduled. Once your treatment or service is completed, your cost share will be updated to a

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

final amount. You will receive an email notifying you of your final cost share for the approved claim, and payment will be deducted from the payment method you have on file in your Maven Wallet 7 days later.

- If your Maven Performance Network (in-network) clinic or provider has any questions about your fertility coverage through Maven, you can provide them with your Maven Benefit ID and they can look up your benefits directly in Maven's Provider Portal.

Partner/Dependent access to Maven Wallet

- Once you activate your Wallet, invite your spouse/domestic partner to join your Maven Wallet. They will receive an email with a unique URL and instructions on how to join your Wallet. If your spouse/domestic partner will also need treatment or services, they must be added to your Wallet prior to getting care.

- You and your partner will share a Maven Benefit ID and will each draw down from the household benefit offered by UMG. Both partners will have full visibility into the financial and medical information available in Maven Wallet.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Your care options

Virtual Care

Maven's 24/7 platform is designed to complement the care you receive in person. As a member, you'll get matched with a dedicated Maven Care Advocate to help answer your questions along your health journey and connect you with high quality in-person care. Maven also provides 24/7 unlimited virtual education and coaching appointments and messaging with providers spanning 35+ specialties, including OB-GYNs, mental health specialists, fertility awareness educators, adoption and surrogacy coaches, and more. You can access thousands of trusted articles, attend on-demand provider-led classes, or get support from the Maven community.

Maven's Performance Network

With Maven, we've taken out the guesswork of finding a fertility clinic with outstanding reviews and outcomes. The Maven Performance Network is our curated and high-performing network of clinic partners that have been chosen to give you the best experience, exceptional care, and help you achieve your family building goals. If you are still beginning your journey the Maven Care Team will provide a list of in-network clinics that meet your unique needs, or you can self-navigate the Maven Performance Network in your Maven Wallet under "Wallet Settings" by clicking on "Find a fertility clinic".

Maven Performance Network Clinics use a billing method called "bundled billing" for most services. This means that standard procedures, services, tests, and treatments needed within your fertility treatment cycle are combined at a single fee for the treatment cycle.

Regardless of the number of office visits, blood draws, or other covered services you receive, your clinic will charge a flat fee per treatment cycle at Maven's negotiated rates. This is done to give you clear, upfront information about the total cost of your chosen treatment cycle.

Depending on your clinic, some covered services will be billed separately from the bundled bill. You will review your treatment plan and costs with your clinic's financial counselor. Any covered services not included within a bundle will appear in your Maven Wallet, along with an estimate of any cost share (deductible, copay, or coinsurance) that you may owe for those services. Depending on your clinic and treatment plan, common services that could be billed separately include: anesthesia, intracytoplasmic sperm injection (ICSI), and preimplantation genetic testing (PGT).

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Additionally, fertility clinics within Maven's Performance Network perform a variety of services, including those covered in your benefits through Maven and your health insurance. If you receive a service that is covered through your health insurance and not Maven (such as a hysteroscopy, laparoscopic or other surgical procedures), the clinic will bill your health insurance instead of Maven. You can always ask the financial counselor at your clinic to provide an overview of which services within your treatment plan will be billed to your health insurance or Maven.

Important: You must use a Maven Performance Network fertility clinic / provider to qualify for coverage (unless you've received an exception).

1. Once you select your preferred provider within Maven's Performance Network, let the Maven Care Team know so that we can facilitate a warm introduction. Maven will email your contact information, Maven Benefit ID, and any other information you'd like us to convey to your selected Performance Network clinic. We'll also let them know you're a **Maven Gold** member — this will indicate to the clinic that they'll bill Maven directly for covered services, up to your benefit maximum.

    a. You may also call and make an appointment yourself. Be sure to self-identify as a Maven Gold member and share your Maven Benefit ID.

2. In addition to your Maven Benefit ID, you may be asked to provide information about your health insurance. While you are welcome to share this information with your selected Performance Network clinic, as a Maven Gold member, you will access Covered Fertility Services through Maven and the clinic will bill Maven directly. You will pay any applicable cost share (such as a deductible, copay, or coinsurance) that you owe through Maven Wallet, not to your clinic / provider.

    a. If you have fertility benefits through your employer and also your spouse/partner's employer, please see the Frequently Asked Questions section of this document, *"I'm enrolled in two health plans. How does this work with my UMG fertility coverage through Maven?"*

3. Once you and your in-person provider have decided on your treatment plan, your clinic's billing team will begin submitting Covered Fertility Services through Maven's Provider Portal for payment. No additional prior authorization through Maven is required for Covered Fertility Services. So long as you're seeking care at a Maven Performance Network clinic, your clinic may submit covered services through Maven's Provider Portal, up to your benefit maximum.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

How to apply for an exception for out-of-network care:
If you (or your covered partner) are actively undergoing Timed Intercourse, IUI, IVF, egg or sperm freezing, or have frozen tissue (egg/sperm/embryo) stored at an out-of-network fertility clinic when your benefits launch with Maven on January 1, 2026, or if you live more than 50 miles from a Maven in-network clinic, you may be eligible for an exception to continue using your out-of-network provider.

To apply for an exception please reach out to the Maven Care Team. You'll be asked to fill out a Network Exception Request Form. If your request is approved, you will be able to submit eligible out-of-pocket expenses for reimbursement of Covered Fertility Services incurred up to your benefit maximum through the applicable exception expiration date. You will not be eligible to receive reimbursement until the service is rendered to you and complete (i.e., only incurred expenses are eligible for reimbursement).

You must request an exception to utilize an out-of-network clinic or provider ***at least 14 days prior to receiving services.***

Maven Rx

Maven Rx provides members with critical support to manage the cost and complexity of fertility medications, including best-in-class support for ordering, receiving and administering your fertility medications.

Please instruct your clinic to send your prescriptions directly to a Maven specialty pharmacy partner using the instructions on the backside of your Maven Benefit ID card. If you have any questions about ordering your fertility medications through a Maven Rx pharmacy partner, you can contact the Maven Member Benefits Services team at benefits@mavenclinic.com or the phone number listed in the "Contact Us" section of this guide.

Note: You are not required to use a Maven specialty pharmacy partner. If you choose to obtain covered fertility medications from another pharmacy you will not be able to take advantage of Maven's negotiated rates, and you will need to submit for reimbursement through the Maven app.

Other Fertility Services

Preimplantation Genetic Testing: Preimplantation genetic testing (PGT) is a procedure used to identify genetic abnormalities in embryos created through IVF. Following an egg retrieval procedure embryos are fertilized in a fertility clinic's embryology lab. The embryos are monitored until day 5 or 6

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

after fertilization. At that point, a small number of cells are removed from each embryo ("biopsied") and these samples are shipped to a PGT laboratory for testing and analysis.

There are two (2) separate billing events for PGT — (1) the PGT biopsy, which is performed and billed by the fertility clinic, and (2) the PGT testing, which is performed and billed by a PGT laboratory.

Maven has several preferred PGT laboratory partners that offer excellent service and competitive rates for Maven members for PGT A, SR, and M testing. Maven's genetic testing laboratory partners bill Maven directly for covered testing.

Your fertility clinic can select among Maven's PGT laboratory partners for your testing. You can also inquire about your PGT laboratory options by contacting the Maven Member Benefits Services team.

Note: You are not required to use one of Maven's preferred PGT lab partners. However, if you choose another PGT lab, you will not be able to take advantage of Maven's negotiated rates and you will need to pay out-of-pocket and submit for reimbursement via the Maven app.

Male Fertility: Maven partners with Posterity Health, a Virtual First Center of Excellence for Male Fertility, to offer Maven members access to high quality male fertility care at competitive rates. Posterity Health is a national provider, employing fellowship trained reproductive urologists. If you'd like to be referred to Posterity Health, message the Maven Care Team. Posterity Health bills Maven directly for covered services.

Note: You are not required to use a reproductive urologist in the Posterity Health network to qualify for coverage of eligible male fertility services. However, if you choose another reproductive urologist, you will not be able to take advantage of Maven's negotiated rates and you will need to pay out-of-pocket and submit for reimbursement via the Maven app.

Donor, Adoption, and Surrogacy

Maven maintains a database of high quality adoption and surrogacy agencies, as well as donor banks and agencies. If you are just starting your journey, the Maven Care Team will be able to provide a curated list of agencies and/or banks.

Nodal is one of Maven's key partners for surrogacy benefits. Nodal is a platform that efficiently connects vetted surrogates and intended parents, offering transparency, equity, education, and support for all parties on their journey. That means Nodal saves intended parents time and money by providing them with highly-vetted surrogates, all while giving surrogates the support and resources

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

they need to find their best matches. Maven members are eligible to receive up to $500 off the Nodal match fee for members pursuing surrogacy. You do not need an exception to work with an agency outside of Nodal. If you are interested in learning more about Maven's Nodal partnership please reach out to the Maven Care Team.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Maven Cycles

What is a Maven Cycle?

Maven Cycles provide you with comprehensive, transparent fertility coverage.

Within one Maven Cycle, we've bundled together standard procedures, services, tests and treatments needed for a round of fertility treatment. Each Maven Cycle is made up of twelve (12) cycle credits. As treatment or services are completed, cycle credits will be deducted from your total Maven Cycle balance. Through our comprehensive bundling, you don't have to worry about running out of coverage in the middle of treatment. Maven Cycles are also flexible so you and your provider can elect the appropriate pathway for your unique family building journey.

Each fertility treatment covered by your benefit reduces your Maven Cycle balance by the corresponding number of cycle credits, as outlined below.



Timed Intercourse ▫ Intrauterine Insemination (IUI) ▫ Sperm Freezing ▫ Male Hormone Therapy



Frozen Embryo Transfer ▫ Standalone PGT[1]



Egg Freezing Cycle ▫ Frozen Oocyte (Egg) Transfer ▫ Frozen Oocyte Embryo Banking ▫ INVOcell



Fresh IVF Cycle ▫ IVF Freeze All Cycle ▫ Split Cycle ▫ PESA ▫ TESA ▫ MESA ▫TESE ▫ mTESE
PVSA ▫ VASA ▫ Varicocelectomy ▫ Vasectomy Reversal ▫ Tubal Ligation Reversal

[1]Embryo thaw, Preimplantation Genetic Testing (PGT) and refreezing of embryos.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

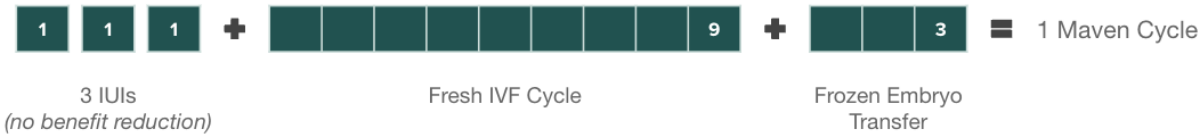
Additionally, your first Maven Cycle includes 3 “bonus” cycle credits that can be used exclusively for IUI and Timed Intercourse. In other words, while you are not required to do IUI or Timed Intercourse before IVF, your first 3 rounds of IUI or Timed Intercourse do not reduce your Maven Cycle lifetime balance. These first 3 rounds of IUI or Timed Intercourse treatments are subject to financial responsibility (such as a deductible, copay, or coinsurance) and will be counted towards your medical plan deductible and annual out-of-pocket maximum.

For a complete list of covered procedures, services, and tests included within each fertility treatment described above, please see the “Covered Fertility Services” section of this guide.

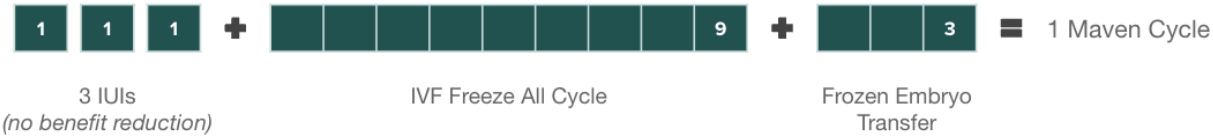
Common ways to use a Maven Cycle

Whether you’re pursuing fertility treatment or preservation, Maven Cycles have been designed to support the most common treatment pathways with seamless coverage. Here are a few common ways Maven members use their Maven Cycles:

Fertility Treatment with IUI and Fresh IVF



Fertility Treatment with IUI, IVF Freeze All and a Frozen Embryo Transfer



Fertility Preservation with Egg Freezing



Canceled cycles

Your treatment may need to be canceled prior to completion. If this happens, your Maven Cycle lifetime balance will be adjusted according to the following guidelines:

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

- **Cycles canceled prior to retrieval or aspiration, or canceled IUI:** No reduction in your Maven Cycle balance. However, services that do occur are subject to financial responsibility (such as a deductible, copay, or coinsurance) and will be counted towards your medical plan deductible and annual out-of-pocket maximum.
- **Cycles canceled after retrieval or aspiration (due to no available eggs):** 3 cycle credits will be deducted from your Maven Cycle balance. Services that do occur are subject to financial responsibility (such as a deductible, copay, or coinsurance) and will be counted towards your medical plan deductible and annual out-of-pocket maximum.
- **Cycles canceled after fertilization (due to no available embryos):** 6 cycle credits will be deducted from your Maven Cycle balance. Services that do occur are subject to financial responsibility (such as a deductible, copay, or coinsurance) and will be counted towards your medical plan deductible and annual out-of-pocket maximum.
- **Cycles converted to IUI or Timed Intercourse:** 1 cycle credit will be deducted from your Maven Cycle balance, if you have already used up your 3 “bonus” cycle credits for IUI or timed intercourse. Otherwise, this IUI or timed intercourse cycle will count towards your 3 “bonus” cycle credits. Services that do occur are subject to financial responsibility (such as a deductible, copay, or coinsurance) and will be counted towards your medical plan deductible and annual out-of-pocket maximum.

If you have any questions about how your Maven Cycle benefit works, reach out to the Maven Member Benefits Services team at benefits@mavenclinic.com.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

How benefits are processed

With Maven Wallet, paying for covered expenses is a bit like managing your personal wallet. Just like you may use cash, credit cards, or checks for different personal, family, and household expenses there are different payment options with Maven Wallet.

In-Network Fertility Services

Payments for covered in-network fertility services are facilitated seamlessly through the Maven platform. Here's how it works:

- Your provider will input your upcoming covered services directly into Maven's Provider Portal.
- You will be able to see the total cost of your upcoming services right in your Wallet.
- An estimate of any cost share you may owe — such as a *deductible, copay, or coinsurance* — will appear directly in your Maven Wallet.
    - Fertility medical and pharmacy expenses are subject to cost share.
    - Any cost share you owe will accumulate toward your medical plan annual deductible and out-of-pocket maximum.
- We will use your preferred payment method on file for any cost share you owe, charging your account or card after the covered service has been completed.
    - If your preferred payment method on file is a credit card, payment for your cost share will be processed along with a 3% convenience fee.

Important notes:

- In the event that a procedure such as IUI or IVF is canceled or unable to be completed, your benefit maximum will only be reduced based on rendered services (as will any applicable cost share that you owe).
- If your service cost is greater than your Wallet balance, then remaining payment will be made directly from your preferred payment method on file.
- Only Covered Fertility Services will be processed through Maven's Provider Portal. Should you choose to receive treatment that is not covered under your benefits, you will be required to pay the clinic directly at your own expense.

Seeking Reimbursement for Other Covered Services

There are some eligible expenses and services outlined in this document for which you must first pay out-of-pocket and provide documentation through the Maven app to receive reimbursement — like

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

eligible adoption, surrogacy or donor related expenses.

Here's how it works:

- Pay for eligible services using your personal credit or checking account.
    - Prepaid services, including fertility treatment packages (e.g., multi-cycle packages, or money-back guarantee packages) **cannot be reimbursed until the service you are seeking reimbursement for has been rendered or is complete.**
    - Expenses are only eligible for reimbursement when not already covered by any other employer or government fund; including but not limited to your health insurance, FSA, HSA, or your spouse/domestic partner's benefits.
- Submit the documentation below to Maven Wallet **within 180 days of your date of service.**
    - All Wallet expenses submitted for reimbursement need to be accompanied by an itemized invoice and proof of payment. The itemized invoice should show the date of service, description of services, and service provider's name and contact information. A receipt showing your financial responsibility for the service serves as proof of payment.
        - There may be other substantiation required for particular expenses.
    - Donor expenses only: Documentation outlining any legal agreements and consent forms and/or a known donor agreement where applicable
    - Adoption expenses only: Documentation of a finalized, legal adoption
    - Surrogacy expenses only: Copy of legal surrogacy agreement or a letter from an attorney attesting that there is a signed agreement or that the arrangement is legal despite the absence of a signed agreement
- **For donor, adoption and surrogacy reimbursement,** once your eligible expense is received with complete documentation, Maven processes your reimbursement within 7 to 10 business days to enable UMG to reimburse you in the next 1-2 payroll cycles.
    - When reimbursement is approved for taxable expenses, an appropriate tax withholding will be deducted via payroll.
- **For fertility reimbursement,** be sure to add your bank account information to Maven Wallet to receive reimbursements through direct deposit. Maven will make every effort to help ensure reimbursement within a few weeks of receiving all required documentation. You will be reimbursed less any cost share you owe — such as a deductible, copay, or coinsurance.
    - Fertility medical and pharmacy expenses are subject to cost share.
    - Any cost share you owe will accumulate toward your medical plan annual deductible and out-of-pocket maximum.
- In the event that your expense is deemed ineligible for reimbursement, you will receive an email notification from Maven. If you think you have received a denial in error you may reach out to the Maven Member Benefits Services team for more information.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Your Financial Responsibility

Fertility benefits are available to full-time employees of UMG, their spouse/domestic partner, and dependents under age 26 who enroll in a UMG Anthem medical plan. As such, fertility treatment and preservation medical and pharmacy expenses are subject to cost share — such as a deductible, copay, or coinsurance.

You are responsible for all medical expenses (including fertility treatment and preservation) until you meet your *deductible.*

After you reach your *deductible,* Maven Wallet will share the cost of your fertility treatment and preservation expenses. Depending on the service, this will either be a percent of the cost of treatment (coinsurance) or a flat fee (copay).

Once you reach your *annual out-of-pocket maximum,* Maven Wallet will pay 100% of your eligible treatment costs that benefit year, until you reach the 1 Cycle lifetime maximum. Your medical plan deductible and out-of-pocket maximums reset every January 1st.

An estimate of your cost share will be provided in your Maven Wallet once your treatment or service at a Maven in-network provider is scheduled. You are not billed for your cost share until after services at a Maven in-network provider are completed. Once your treatment or service is completed, the clinic will request payment directly from Maven. You will receive an email notifying you of your final cost share for the approved claim, and your payment will be deducted from the payment method you have on file in your Maven Wallet 7 days later.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Covered Fertility Services

Outlined below are the details of your UMG fertility treatment and preservation coverage through Maven, including coverage and eligibility, taxation, reimbursement timeline for eligible expenses not facilitated and paid directly through the Maven platform, and covered services.

Coverage and Eligibility

- All employees, spouses/domestic partners and dependents under age 26 enrolled in a UMG Anthem medical plan have access to 1 Maven Cycle per household lifetime maximum for eligible fertility treatment and preservation expenses.
- A medical diagnosis of infertility is not required to receive fertility treatment (IUI, IVF) or preservation (egg, sperm freezing) coverage through this benefit.
    - Dependent children enrolled in a UMG Anthem medical plan may only access the benefit for medically necessary fertility preservation (egg/sperm freezing).
- Even if you have previously used all or a portion of your lifetime fertility and family building benefits through a previous UMG coverage or reimbursement program, you will have access to 1 Maven Cycle and $14,000 per household per lifetime for adoption, surrogacy and donor tissue expenses.

Taxation

Covered services you receive under this Covered Fertility Services section are intended to be treated as excludable from your taxable income.

Reimbursement Timeline

There are some covered fertility services for which you may first have to pay out-of-pocket and cannot be facilitated directly through the Maven platform—like expenses at an out-of-network fertility clinic.

If you pay out-of-pocket for a covered fertility service, you may provide documentation through the Maven app to receive reimbursement. You must submit any claim for reimbursement within 180 days of incurring an eligible fertility expense. Eligible expenses will be reimbursed quickly via direct deposit, within 7 to 10 business days.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Covered Fertility Services

Maven Performance Network Clinics use a billing method called **“bundled billing”** for most services. This means that standard procedures, services, tests, and treatments needed within your fertility treatment cycle are combined at a single fee for the treatment cycle.

Regardless of the number of office visits, blood draws, or other covered services you receive, your clinic will charge a flat fee per treatment cycle at Maven's negotiated rates. This is done to give you clear, upfront information about the total cost of your chosen treatment cycle.

Depending on your clinic, **some covered services will be billed separately from the bundled bill.** You will review your treatment plan and costs with your clinic's financial counselor. Any covered services not included within a bundle will appear in your Maven Wallet, along with an estimate of any cost share (deductible, copay, or coinsurance) that you may owe for those services.

Outlined below are the services included in your Maven fertility treatment and preservation coverage.

Initial Evaluation**

An Initial Evaluation includes your initial office visit(s) and diagnostic testing with your selected Maven Performance Network clinic. While all of the following services may not be required for you (and/or your partner), the following services are covered within an Initial Evaluation:

• Office visits (virtual or in person) • Ultrasounds • Blood work	• Hysterosalpingography (HSG) or Saline Sonogram (SIS) • Semen analysis

Note: Some diagnostics, genetic carrier screening, and other reference lab work may be billed to your medical plan instead of your fertility benefits through Maven.

Timed Intercourse (TIC)

The following procedures included within a Timed Intercourse cycle are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits	• In-cycle blood work • Related ultrasounds

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Intrauterine insemination (IUI)

The following procedures included within an intrauterine insemination (IUI) cycle are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits • In-cycle blood work	• Related ultrasounds • Simple or complex sperm wash & prep • Insemination

Fresh in vitro fertilization (IVF)

The following procedures included within a Fresh IVF cycle are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits • In-cycle blood work • Related ultrasounds • Simple or complex sperm wash & prep • Anesthesia • Retrieval • Assisted hatching • Blastocyst culture • Sperm cryopreservation for the cycle	• Embryo biopsy and culture in lab • Intracytoplasmic sperm injection (ICSI) • Oocyte identification and fertilization • Embryo transfer • Preparation and cryopreservation of embryo(s) • Preimplantation genetic testing (PGT-A, M or SR) • Tissue storage (1 year)*

In vitro fertilization (IVF) Freeze All

The following procedures included within an IVF Freeze All cycle are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits • In-cycle blood work • Related ultrasounds • Simple or complex sperm wash & prep • Anesthesia • Retrieval • Assisted hatching • Blastocyst culture	• Sperm cryopreservation for the cycle • Embryo biopsy and culture in lab • Intracytoplasmic sperm injection (ICSI) • Oocyte identification and fertilization • Preparation and cryopreservation of embryo(s) • Preimplantation genetic testing (PGT-A, M or SR) • Tissue storage (1 year)*

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Frozen Embryo Transfer

The following procedures included within a Frozen Embryo Transfer are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits • In-cycle blood work • Related ultrasounds	• Embryo thaw • Preparation of embryo for transfer • Embryo transfer

Egg Freezing

The following procedures included within an Egg Freezing cycle are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits • In-cycle blood work • Related ultrasounds • Anesthesia	• Retrieval • Oocyte identification • Preparation and cryopreservation of eggs • Tissue storage (1 year)*

Split Cycle

A Split Cycle is a fertility preservation cycle where both eggs and embryos are frozen within one cycle. The following procedures included within a Split Cycle are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits • In-cycle blood work • Related ultrasounds • Simple or complex sperm wash & prep • Anesthesia • Retrieval • Assisted hatching • Blastocyst culture	• Embryo biopsy and culture in lab • Intracytoplasmic sperm injection (ICSI) • Oocyte identification and fertilization • Preparation and cryopreservation of embryo(s) and egg(s) • Preimplantation genetic testing (PGT-A, M or SR) • Tissue storage (1 year)*

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Frozen Oocyte (Egg) Transfer

Frozen Oocyte (Egg) Transfer is the thawing and fertilization of previously frozen eggs, plus a fresh embryo transfer and refreezing of any remaining embryos. The following procedures included within a Frozen Oocyte (Egg) Transfer are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits • In-cycle blood work • Related ultrasounds • Simple or complex sperm wash & prep • Assisted hatching • Blastocyst culture • Oocyte thaw • Oocyte identification and fertilization	• Sperm cryopreservation for the cycle • Embryo biopsy and culture in lab • Intracytoplasmic sperm injection (ICSI) • Preimplantation genetic testing (PGT-A, M or SR) • Preparation and cryopreservation of extra embryo(s) • Embryo transfer • Tissue storage (1 year)*

Frozen Oocyte Embryo Banking

Frozen Oocyte Embryo Banking is the thawing and fertilization of previously frozen eggs, and then the re-freezing of any embryos. The following procedures included within Frozen Oocyte Embryo Banking are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits • In-cycle blood work • Related ultrasounds • Simple or complex sperm wash & prep • Assisted hatching • Blastocyst culture • Oocyte thaw • Sperm cryopreservation for the cycle	• Oocyte identification and fertilization • Embryo biopsy and culture in lab • Intracytoplasmic sperm injection (ICSI) • Preimplantation genetic testing (PGT-A, M or SR) • Preparation and cryopreservation of embryo(s) • Tissue storage (1 year)*

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Standalone PGT

Standalone PGT is the thawing of previously frozen embryos, PGT biopsy and testing, and refreezing of the embryos. The following procedures included within Standalone PGT are covered in your Maven benefits:

• Embryo thaw • Embryo biopsy in lab • Preimplantation genetic testing (PGT-A, M or SR)	• Preparation and cryopreservation of embryo(s)

INVOcell

INVOcell is an innovative FDA-cleared medical device. Retrieved eggs and sperm are placed in the INVOcell device for fertilization. The device is then placed in the body for incubation and any embryos that develop are retrieved from the device, to be frozen and/or used for embryo transfer(s). The following procedures included within an INVOcell cycle are covered in your Maven benefits:

• Cycle management and monitoring • Related office visits • In-cycle blood work • Related ultrasounds • Anesthesia • Retrieval • Oocyte identification • INVOcell	• Preparation of embryo for transfer • Fresh embryo transfer • Preimplantation genetic testing (PGT-A, M or SR) • Preparation and cryopreservation of extra embryo(s) • Tissue storage (1 year)*

Tubal Ligation Reversal

Tubal ligation is a surgery in which the fallopian tubes are cut or tied to prevent pregnancy. *Tubal ligation reversal* is a surgery to reverse a prior tubal ligation, and is covered in your Maven benefits.

Pregnancy Monitoring at a Fertility Clinic

Following successful pregnancy, your fertility clinic / provider may not refer you to your OB-GYN until week 8 of your pregnancy. Pregnancy monitoring at a fertility clinic / provider before you are referred back to your OB-GYN is covered within your Maven benefits.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Male Fertility

The following male fertility related services and procedures are included within your Maven benefits:

- Consultations with a licensed male fertility specialist**
- Male factor evaluation, including but not limited to semen analysis (including sperm DNA fragmentation analysis), bloodwork, and ultrasounds**
- Hormone therapy for infertility
- Sperm freezing
- Testicular sperm aspiration (TESA)
- Percutaneous epididymal sperm aspiration (PESA)
- Testicular sperm extraction (TESE)
- Microdissection testicular sperm extraction (mTESE)
- Microepididymal Sperm Aspiration (MESA)
- Percutaneous Vasal Sperm Aspiration / Vasal Sperm Aspiration (PVSA / VASA)
- Varicocelectomy (unilateral or bilateral)
- Surgery to reverse prior sterilization (vasectomy reversal)

Fertility Medications

Fertility medications prescribed by your doctor for a covered fertility treatment cycle listed above may be eligible for coverage through Maven. You may receive fertility medications through a Maven specialty pharmacy partner or another pharmacy. Refer to the "Your care options" section of this guide for further information on how to fill your fertility related prescriptions. If you have any questions about covered fertility medications, reach out to the Maven Member Benefits Services team.

Members who completed cycles in the 12 months prior to January 1, 2026 may be paying for the first year of tissue storage when benefits launch with Maven. In the first year of benefits with Maven, members may submit short-term storage fees to Maven for reimbursement, so long as the treatment cycle occurred in the 12 months prior to benefits launching with Maven on January 1, 2026. Long-term storage fees (i.e. storage fees after the first year of storage)* ***are not eligible* *for reimbursement under the Fertility benefit, but* ***are reimbursable under the Donor and Tissue benefit.*** *See the "Donor and Tissue Reimbursement through Maven" section for additional information.*

***Under your Maven Cycle benefit, up to two (2) initial evaluations at a fertility clinic and one (1) initial consultation and male factor evaluation are covered per year.*

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Donor and Tissue Reimbursement through Maven

UMG provides reimbursement for those procuring donor eggs or sperm, or pursuing egg or sperm donor cycles, as well as tissue transportation and storage fees. Outlined below are the details of your UMG donor and tissue reimbursement program through Maven, including coverage and eligibility, taxation, reimbursement timeline, eligible and ineligible expenses.

Coverage and Eligibility

- All employees and spouses/domestic partners have access to a $14,000 lifetime maximum for eligible donor and tissue related expenses.
    - This amount is combined across Donor Tissue, Adoption, and Surrogacy.
- The donor egg and/or sperm is to be used for the eligible member's fertility or surrogacy journey. Expenses or services for the covered employee or their dependent are ineligible for reimbursement.
- You may be required to supply documentation outlining any legal agreements and consent forms and/or a known donor agreement where applicable.

Taxation

Any reimbursement you receive through Maven Wallet for eligible donor and tissue expenses is intended to be treated as **taxable** income to you. These reimbursements are intended to be reported on your W-2 as wages that are subject to standard tax withholding.

Reimbursement Timeline

You must submit any claim for reimbursement within 180 days of incurring an eligible donor and tissue related expense.

Households with two UMG employees may only seek reimbursement once for eligible donor and tissue expenses. Additionally, expenses that have already been reimbursed under another employer program are not eligible for reimbursement.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Eligible and Ineligible Expenses

Eligible expenses

- Egg retrieval cycle for a live egg donor
  - Physical examination & psychological consultation and testing on donor
  - Cycle management and monitoring
  - Related office visits
  - In-cycle blood work
  - Related ultrasounds
  - Anesthesia
  - Retrieval
  - Oocyte identification
  - Preparation and cryopreservation of eggs
  - Medications
- Directed (known) sperm donor cycle
  - Screening blood work
  - Serology testing and donor eligibility determination testing
  - Physical examination
  - Related office visits
  - Semen analysis, processing, and freeze
- Procurement of frozen donor egg or sperm from a donor bank
- Egg/sperm donation agency fees
- Donor screening costs and compensation
- Clinic donor coordination fees
- Court costs, legal and attorney's fees
- Tissue (frozen egg/sperm/embryo) shipping/transport costs
- Long-term storage (>1 year after egg/sperm/embryo freeze date)

Ineligible expenses

- Short-term storage of frozen tissue (egg/sperm/embryo)
- Gifts or personal expenses to a donor and/or family members
- Voluntary donations or contributions to the donor agency
- Creation of embryo(s)
- Embryo testing
- Costs for you to donate eggs, sperm, and/or embryos to another individual or family
- Medical expenses for the covered employee or their dependent(s)
- Fees associated with adoption or purchase of donor embryos
- Testing related to the transfer of genetic material for anyone other than the donor; including but not limited to infectious disease testing, risk assessment, physical exam, psychological evaluation

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Adoption Reimbursement through Maven

UMG provides reimbursement for those pursuing adoption as part of their family building journey. Outlined below are the details of your UMG adoption reimbursement program through Maven, including coverage and eligibility, taxation, reimbursement timeline, eligible and ineligible expenses.

Coverage and Eligibility

- All employees and spouses/domestic partners have access to a $14,000 lifetime maximum for eligible adoption related expenses.
    - This amount is combined across Donor Tissue, Adoption, and Surrogacy.
- Adoption reimbursement is available for eligible adoption expenses associated with the **legal finalized adoption of any child** (whether adopted domestically or internationally) who is under the age of 18 at the time the expense is incurred. This includes relatives (such as a niece, nephew, grandchild or cousin) as well as a child of your registered domestic partner if you live in a state that allows a same-sex second parent or co-parent to adopt their partner's child.
    - You'll be required to provide documentation of the finalized legal adoption.
    - Any adoption that is not legally valid and recognized in the U.S. is not eligible for reimbursement, nor are expenses that violate a state or federal law.
    - Any adoption expense paid or reimbursed by another party is ineligible for reimbursement.
- This coverage includes the child of your spouse (i.e., a stepchild).
- Reimbursements for a failed adoption attempt are available to you with submission of court documentation showing the adoption process has ended or a letter from your attorney attesting that the adoption process has concluded without a final adoption decree.

Taxation

Qualified adoption expense reimbursements you receive through Maven Wallet may be excludable from your income in accordance with IRS rules for maximum excludable amounts per adopted child and modified adjusted gross income caps on exclusions. Please review the IRS rules at https://www.irs.gov/instructions/i8839 and follow the instructions therein. Adoption reimbursements are intended to be reported on your W-2 in box 12 with code T, subject to payroll tax withholding but not income tax withholding.

Any reimbursement you receive through Maven Wallet for the adoption of a stepchild or a failed adoption attempt is intended to be treated as **taxable** income to you. These reimbursements are intended to be reported on your W-2 as wages that are subject to standard tax withholding.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Reimbursement Timeline

You must submit any claim for reimbursement within 180 days of finalizing an adoption for which you have incurred an eligible expense.

Households with two UMG employees may only seek reimbursement once for eligible adoption expenses. Additionally, expenses that have already been reimbursed under another employer program are not eligible for reimbursement.

Eligible and Ineligible Expenses

Eligible expenses
• Agency placement fees • Court costs and legal fees • Immigration, immunization, re-adoption, and translation fees • Reasonable travel and lodging costs for the intended parent(s) and any minor child(ren) associated with the adoption process (including ground and air travel) • Required education directly related to the adoption • Pre-adoption counseling directly related and for the principle purpose of the legal adoption of the child • Home study fees

Ineligible expenses
• Expenses for the biological parents, such as living, counseling, compensation and medical expenses • Guardianship or custody costs that are not associated with the legal adoption of the child(ren) • Fees for temporary foster care • Costs for medical care for the child before the adoption has been finalized • Voluntary donations or contributions to adoption agencies • Costs paid using funds from any federal, state, or local program for adoption • Cost of living expenses and/or personal items such as: rent, utilities, food, over-the- counter supplements, clothing, childcare, car seat, transportation to doctor's appointments, etc. • Meals while traveling • Loss of income, including but not limited to, loss of income due to complications of pregnancy such as bed rest for birth mother • Expenses related to the adoption of embryos including but not limited to medical fees and legal/agency fees

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Surrogacy Reimbursement through Maven

UMG provides reimbursement for those pursuing surrogacy as part of their family building journey. Outlined below are the details of your UMG surrogacy reimbursement program through Maven, including coverage and eligibility, taxation, reimbursement timeline, eligible and ineligible expenses.

Coverage and Eligibility

- All employees and spouses/domestic partners have access to a $14,000 lifetime maximum for eligible surrogacy related expenses.
    - This amount is combined across Donor Tissue, Adoption, and Surrogacy.
- Surrogacy reimbursement is available for eligible expenses associated with a **valid surrogacy arrangement** that is supported by a lawful agreement, whereby a person agrees to become pregnant and deliver a child for a contracted party (an individual or a couple) who is, or will ultimately become, the parent(s) of the newborn child or children. This may also include a gestational surrogate—someone who carries a pregnancy and gives birth to a child for another person or couple, but has no biological connection to the child. The surrogacy arrangement must be legally valid and recognized in the appropriate jurisdiction, with a legally recognized agreement between the two parties.
- For all surrogacy expenses you'll be required to provide a copy of the formal, signed surrogacy agreement or a letter from an attorney attesting that there is a signed agreement or that the arrangement is lawful despite the absence of a signed agreement.
    - Any surrogacy arrangement or expense incurred in violation of applicable laws in the location where obtained [or in the U.S.] is ineligible for reimbursement.
    - Any surrogacy expense paid or reimbursed by another party is ineligible for reimbursement.
- Expenses related to the retrieval of reproductive material (i.e. eggs, sperm) of the covered member for the purposes of being transferred to a gestational carrier will be covered under the Fertility portion of this document.

Taxation

Any reimbursement you receive through Maven Wallet for eligible surrogacy expenses is intended to be treated as **taxable** income to you. These reimbursements are intended to be reported on your W-2 as wages that are subject to standard tax withholding.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Reimbursement Timeline

You must submit any claim for reimbursement within 180 days of incurring an eligible surrogacy related expense, or after the surrogacy agreement is signed, whichever is later.

Households with two UMG employees may only seek reimbursement once for eligible surrogacy expenses. Additionally, expenses that have already been reimbursed under another employer program are not eligible for reimbursement.

Eligible and Ineligible Expenses

Eligible expenses
• Court costs, legal and attorney's fees • Surrogacy agency fees • Gestational carrier screening costs • Surrogate/gestational carrier compensation • Health care expenses for the surrogate mother related to the conception, pregnancy and delivery of the baby pursuant to the surrogacy arrangement • Fees associated with the adoption of a surrogate child • Reasonable travel and lodging costs for the intended parents and any minor children associated with the surrogacy process (including ground and air travel)

Ineligible expenses
• Gifts or personal expenses to a gestational carrier and/or family members • Gifts or personal expenses to an egg, sperm or embryo donor • Voluntary donations or contributions to surrogacy agencies • Cost of living expenses and/or personal items such as: rent, utilities, food, over-the-counter supplements, clothing, transportation to doctor’s appointments, etc. • Meals while traveling • Loss of income, including but not limited to, loss of income due to complications of pregnancy such as bed rest for surrogacy • Testing related to the transfer of genetic material for anyone other than the surrogate/gestational carrier, including but not limited to infectious disease testing, risk assessment, physical exam, psychological evaluation

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Important Tax Information

Your Maven Wallet program offers coverage for benefits that may be taxable to you. Please remember that Maven Clinic does not provide any legal or tax advice or guarantee any particular tax treatment of the benefits provided by your employer through Maven Wallet.

Due to various factors, your withholding may be less than or more than your actual tax liability associated with Maven Wallet reimbursements. You should consult your payroll administrator if you have any questions about your W-2 or pay statements. You should consult your personal tax advisor if you have questions about your personal tax situation, such as your ability to claim credits or deductions. You are solely responsible for complying with your personal income tax filing and payment obligations. Please remember that Maven Clinic does not provide any legal or tax advice or guarantee any particular tax treatment of the benefits provided by your employer through Maven Wallet.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Exhaustion/Termination of Benefits

Exhausting your benefits

Coverage for covered fertility treatment and preservation services continues until you reach the maximum allowable benefit offered by UMG or until your eligibility for Wallet otherwise changes. If you exhaust your benefits before treatment is complete, you may receive discounts for services at a Maven Performance Clinic (if available at your selected clinic) or for fertility medications filled through Maven Rx.

For all other eligible expenses covered in this document, you may submit a request for reimbursement until you reach the maximum allowable benefit offered by UMG or until your eligibility for Wallet otherwise changes. You will be able to receive reimbursement for eligible expenses for partial coverage should your last expenses exceed the remaining amount in your Wallet benefit.

Leaving UMG

You may submit for reimbursement of eligible expenses incurred on or before the last of the month following your last day of employment up to 90 days after the last of the month following your last day of employment.

Continuing coverage (COBRA)

Your fertility benefits through Maven may be eligible for COBRA continuation coverage after your employment with UMG ends. Please contact your HR representative for details on COBRA continuation coverage and how to enroll for continuing access to your Maven Wallet.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Contact Us

Maven is available to support you through your journey to parenthood and beyond. You may contact the Maven Care Team with questions about your Maven benefits at any time through the Maven app, by calling (888) 859-8436 (9am-9pm ET, Monday-Friday and 10am-5pm ET, Saturday-Sunday and major holidays), or by emailing benefits@mavenclinic.com.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Frequently Asked Questions

Do I need to do anything to ensure that my Covered Fertility Services are counted towards my health insurance plan deductible and annual out-of-pocket maximum?
No. Maven coordinates directly with Anthem to ensure that any cost share you have paid for Covered Fertility Services counts towards your elected medical plan's deductible and annual out-of-pocket maximum.

Please note, your cost share through Maven will not appear in your medical plan member portal as a claim. If you have questions about whether your cost share on Covered Fertility Services has been shared by Maven with your medical plan, please contact the Maven Care Team.

Are Covered Fertility Services processed through Maven counted as in or out-of-network claims for purposes of my health insurance plan?
All fertility claims processed through Maven will be treated as in-network claims — regardless of whether you've received an exception to use an out-of-network clinic / provider, or have chosen to use a pharmacy that does not partner with Maven.

I'm enrolled in two health plans. How does this work with my UMG fertility coverage through Maven?
You and/or your partner may have medical coverage through more than one insurer or health plan (e.g., covered under two different employers).

If your fertility benefits through Maven are part of your secondary insurance or plan coverage, then your Maven benefits do not begin to cover services until the fertility benefits in your primary coverage have been exhausted. To demonstrate that the fertility benefits in your primary insurance or plan coverage have been exhausted, you may provide Maven with an Explanation of Benefits (EOB) from your primary coverage. Please note, Maven does not cover services that are denied by your primary coverage prior to your fertility benefit maximum through your primary coverage being exhausted.

If your primary insurance or plan coverage does not provide fertility benefits, you will be required to submit a letter from your primary insurance or plan coverage attesting to this before your Maven benefits begin to cover services.

When will I be billed for my in-network fertility treatment or service?
You are not billed for your cost share until after services at a Maven in-network provider are completed. Once your treatment or service is completed, the clinic will request payment directly from

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Maven. You will receive an email notifying you of your final cost share for the approved claim, and your payment will be deducted from the payment method you have on file in your Maven Wallet 7 days later.

Can I use my FSA/HSA card to pay my applicable cost share for Covered Fertility Services?

Yes, you may use your FSA/HSA debit card as your preferred payment method on file in Maven Wallet. This card will be charged to cover your personal financial responsibility only (i.e., the applicable cost share for covered fertility services) when you receive care at a Maven in-network clinic.

If you receive an exception to use an out-of-network clinic, you must use a standard method of payment and should **not** use your HSA or FSA card to pay for eligible services out-of-pocket that you will also submit for reimbursement from your employer's Maven benefit. Your employer's plan does **not** reimburse expenses covered by any other source (including tax-favored benefits such as an HSA or FSA).

When will a Maven Performance Network clinic bill my health insurance?

Fertility clinics within Maven's Performance Network perform a variety of services, including those covered in your benefits through Maven and your health insurance. If you receive a service that is covered through your health insurance and not Maven (such as a hysteroscopy, laparoscopic or other surgical procedures), the clinic will bill your health insurance instead of Maven.

If the Maven Performance Network clinic you've selected is in-network with your health insurance, in-network billing will apply. If the Maven Performance Network clinic you've selected is out-of-network with your health insurance, out-of-network billing will apply.

You can always ask the financial counselor at your clinic to provide an overview of which services within your treatment plan will be billed to your health insurance or Maven.

I'm currently in treatment at a fertility clinic that is out-of-network with Maven. Can I continue using my current provider?

You may be eligible to continue using your current fertility clinic or provider that does not participate in Maven's Performance Network. You must request an exception to utilize an out-of-network clinic or provider ***at least 14 days prior to receiving services.*** We recommend you request this exception as soon as possible in order to avoid unnecessary delays of services.

Reach out to the Maven Care Team to request a Network Exception Request Form. Once completed, Maven will review the form and approve/deny the request within 3 business days. If approved, you may continue to use your current provider through the exception expiration date. If denied, the Maven

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Care Team will support your transition to a high-quality Maven in-network provider.

If you incur covered fertility services through a pre-approved out-of-network provider, you must pay for your services directly and out-of-pocket, then submit a receipt with an itemized invoice through Maven Wallet for reimbursement.

What are the circumstances permitted for approval of an exception to continue services at an out-of-network fertility clinic?

The following member circumstances are eligible for approval to receive services at an out-of-network provider:

- You (or your partner) is in the middle of a Timed Intercourse, IUI, IVF, or egg/sperm freezing cycle when benefits launch with Maven on January 1, 2026 (i.e. monitoring, medications)
- You (or your partner) have frozen tissue (egg/sperm/embryo) at an out-of-network provider when benefits launch with Maven on January 1, 2026
- You live more than 50 miles from a Maven in-network provider

Note: You will be required to use a Maven in-network provider if there are no providers locally available within 50 miles and you will travel to receive fertility care.

All other members will need to use a Maven Performance Network clinic / provider to qualify for coverage.

New hires and new medical plan enrollees are eligible for approved exceptions under the same circumstances as outlined above.

If my exception request is approved, does my exception expire?

If you are in the middle of a Timed Intercourse, IUI, IVF or egg/sperm freezing cycle, or if you have frozen tissue (eggs/sperm/embryos) stored at a designated out-of-network provider when benefits launch with Maven on January 1, 2026, you may complete your current treatment cycle with that designated out-of-network provider under the approved exception. Additional Timed Intercourse, IUI, IVF and/or egg/sperm freezing cycles at the designated out-of-network provider are also approved through the end of the first benefit year with Maven. After the first benefit year, you may only receive coverage for services related to using up any remaining stored frozen tissue at the out-of-network provider, unless you are a new hire or new medical plan enrollee that has not previously been eligible for Maven benefits, in which case the circumstances outlined above apply.

Once all frozen tissue has been exhausted, the Maven Care Team will support your transition to a high-quality Maven in-network provider for continued benefits.

If you live more than 50 miles from a Maven in-network provider, your exception request does not

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

expire. However, if you move to a location within 50 miles of a Maven in-network provider or Maven adds a clinic to our network that is located within 50 miles of where you are located, you will be required to use an in-network provider, unless one of the circumstances above also applies to your active ongoing treatment (i.e., you are in the middle of a Timed Intercourse, IUI, IVF, egg/sperm freezing cycle, or have frozen tissue stored at the out-of-network provider you've been working with previously) and therefore the corresponding expiration will apply.

How long does my coverage through Maven last?

Your coverage through Maven lasts as long as you have a cycle maximum balance available and are enrolled in a qualifying medical plan through your employer, or you elect COBRA upon leaving your employer. Should you leave your employer and not elect COBRA, your coverage through Maven will expire on the date your medical plan is terminated. If coverage lapses before you receive services, your claim will be denied, and you will be financially responsible. Speak to the Maven Care Team if you have any coverage changes.

Is Outside Monitoring covered in my fertility benefits through Maven?

Outside monitoring is **not** covered under your fertility benefits through Maven.

Outside monitoring is the practice where patients who may live far away from their treating fertility clinic complete most/all of their monitoring visits, bloodwork, and ultrasounds with a local doctor's office or fertility clinic, and travel to their treating fertility clinic only for egg retrievals and embryo transfers.

If you do need to proceed with outside monitoring, please confirm that your outside monitoring clinic can provide same day results to your treating Maven in-network clinic. Your outside monitoring clinic may be able to bill certain services to your medical insurance plan. If your outside monitoring clinic is unable to bill your medical insurance plan, these charges would be patient responsibility and the fees associated with outside monitoring would not be reimbursable under your benefits through Maven.

Can I receive Covered Fertility Services outside the US?

No. You must use a Maven Performance Network fertility clinic / provider to qualify for coverage. Approved exceptions to continue using a current fertility clinic or provider does not include fertility clinics or providers outside the US.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Appendix

Maven Wallet: Invoice and Receipt Assistance

Our team wants to make the reimbursement process as easy as possible for you! In order to process your expenses our team looks for two things, an invoice and a receipt, that has the information we need to get you your reimbursement. We've included examples of this information below - if you have any questions, please message the Wallet Team!

Invoices

An **invoice** needs the following information:

1. Name of Service Provider
2. Name of Patient/Recipient of Service
3. Description of Service(s)
4. Date(s) of Service(s)
5. Cost of Service(s)

An invoice may have multiple services, like the one below. If you are submitting an invoice like the below, please ensure that you specify the amount that you are submitting this reimbursement for!

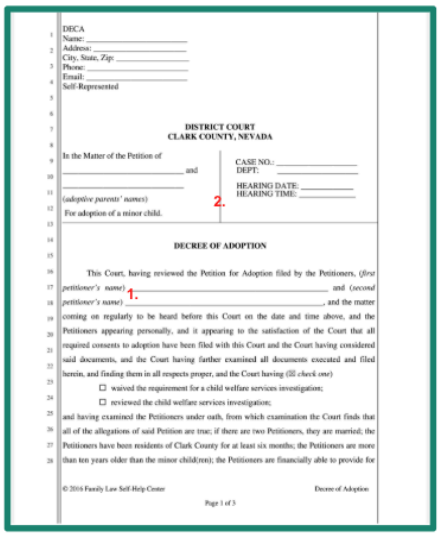


BILL TO
2. Jane Doe
29 Center St
New York, NY 10001

1. Granger Legal Clinic
77 Varick St
New York, NY 10022
4. 10/11/23

3. Item/Service	Amount
Contract Creation	4,000.00
Filing Fee	1,000.00
Appearance in Court	500.00

5. Subtotal 5,500.00



DECA
Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____
Self-Represented

DISTRICT COURT
CLARK COUNTY, NEVADA

In the Matter of the Petition of _____ and _____ (adoptive parents' names)
For adoption of a minor child.

CASE NO.: _____
DEPT: _____
HEARING DATE: _____
HEARING TIME: _____

2.

DECREE OF ADOPTION

This Court, having reviewed the Petition for Adoption filed by the Petitioners, (first petitioner's name) _____ and (second petitioner's name) 1. _____, and the matter coming on regularly to be heard before this Court on the date and time above, and the Petitioners appearing personally, and it appearing to the satisfaction of the Court that all required consents to adoption have been filed with this Court and the Court having considered said documents, and the Court having further examined all documents executed and filed herein, and finding them in all respects proper, and the Court having (fill check one)

☐ waived the requirement for a child welfare services investigation;
☐ reviewed the child welfare services investigation;

and having examined the Petitioners under oath, from which examination the Court finds that all of the allegations of said Petition are true; if there are two Petitioners, they are married; the Petitioners have been residents of Clark County for at least six months; the Petitioners are more than ten years older than the minor child(ren); the Petitioners are financially able to provide for

© 2016 Family Law Self-Help Center — Decree of Adoption
Page 1 of 3

An **adoption court order** should clearly show the following information:

1. Name of Adoptive Parents
2. Date of Adoption

If you don't have a document like the shown example, don't worry! Message the Maven Wallet team - we can help you to obtain the necessary documents to get reimbursed.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.

Helpful Invoice Tips and Tricks

- If you are submitting an invoice for medication or labwork, please ensure that the medication names prescribed or lab tests performed are clearly displayed on the invoice. Our team will not be able to submit any invoices that solely show Rx numbers or “Labwork” on the invoice without additional information.

Receipts

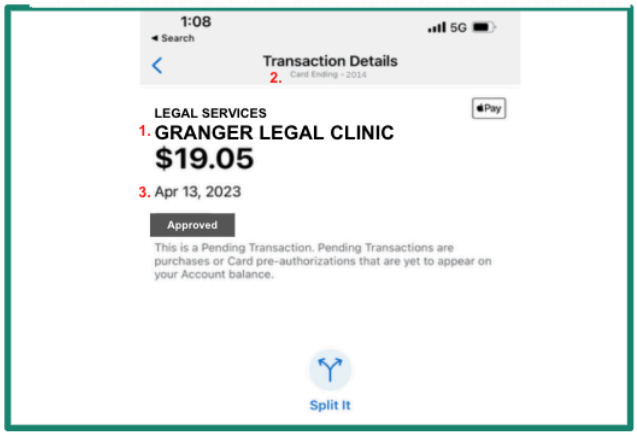
A **receipt** needs the following information:

1. Cost of Service
2. Last four digits of payment method
3. Date of Payment

If a receipt from your service provider is not available, a **bank statement** or **screenshot** from your **mobile banking app** would work! Just make sure that your card number is prominently displayed.

Please note that even if your receipt says “Credit Card”, “Debit Card” or “Bank”, **we will not be able to accept it** unless it has the **last four digits of the payment method used**. This allows our team to confirm that the transaction has been processed.





FAQ

What if I’ve used cash to pay my adoption agency or other provider?
If you use cash, please message us when you submit your documents that you have done so. This will help our team as we process your expense! Additionally, the invoice should have a balance of $0.00.

If you use checks for payment, please provide a credit card statement or screenshot of your bank app that shows the funds being withdrawn from your bank account.

This communication provides information about certain employer sponsored benefits. Receipt of this document does not entitle you to benefits offered by your employer. Every effort has been made to ensure the accuracy of this communication. However, if there are discrepancies between this communication and the official plan documents and policies, the plan documents and policies will always govern. Your employer retains the discretion to interpret the terms or language used in any of its communications according to the provisions contained in the plan documents and policies. Your employer reserves the right to amend or terminate any benefit plan or policy in its sole discretion at any time for any reason.