Your 2026–2027 Guide

BENEFITS

FOR YOUR EVERYDAY



Enroll for benefits by May 22

WILLIAMS-SONOMA, INC.

PUERTO RICO

Open Enrollment Is May 4–22

Williams-Sonoma continues to offer benefits to support your everyday life. Take time to review your choices and enroll by **May 22**. Open Enrollment is your only opportunity to make changes, unless you have a qualifying life event during the year.

There are no plan design changes to your medical, pharmacy or dental benefits.

3 Ways To Enroll

1. **MyWSIBenefits.com**
2. **MyChoice® Benefits app**
3. **WSI Benefits Resource Center at 800.413.1444, Option 1**

Review Plan Documents

Visit **MyWSIBenefits.com/enrollment/puerto-rico** to access Legal Notices and the Summary Plan Description (SPD) for the MCS Global Standard plan described in this guide. If you would like to receive a paper copy of an SPD, contact the WSI Benefits Department at **benefitsdept@wsgc.com**.

Health Benefits at a Glance

Learn more by contacting MCS Life at 888.758.1617.

	MCS Global Standard
Medical	**You pay**
Physician visits	$10 for generalist $15 for specialist, sub-specialist or chiropractor $7 for physical or respiratory therapy
Emergency room	$0 for accident $50 for sickness
Urgent care	$35
Hospital	$150
Ambulatory facilities	$75
Laboratory and X-rays	30%
Diagnostic and office surgical procedures	25%
Out-of-pocket maximum	$6,350 for individual; $12,700 for family
Pharmacy	
Bioequivalent preferred or non-preferred	$5 for retail; $10 for mail-order
Brand preferred	$20 for retail; $40 for mail-order
Brand non-preferred	$35 for retail; $70 for mail-order
Specialty	30%, $200 maximum
Dental	
Diagnostic and preventive	0%
Restorative, oral surgery, endodontic, periodontal treatment	20%
Major restorative (including crowns and prosthesis)	50%
Orthodontics	N/A
Annual plan maximum	$1,000 (the most the plan will pay in a plan year)

Dental

Dental benefits are through Delta Dental of California. Choose the Standard Plan or the Premium Plan. Find a provider at **deltadentalins.com** or call **800.397.4741**. You will not receive a dental ID card. You can print one from the Delta Dental website.

How are the plans alike?

BOTH STANDARD & PREMIUM PLANS

- Let you see any dentist with savings when you use a Delta Dental network provider
- Cover 100% for preventive care
- Cover preventive, basic and major services

How are the plans different?

STANDARD PLAN

- Lower premiums and a higher deductible
- Orthodontia is **not** covered

PREMIUM PLAN

- Higher premiums and a lower deductible with a higher level of benefits coverage
- Orthodontia **is** covered

Dental Plans at a Glance

Here's what you'll pay when you need dental care. Out-of-network benefits are paid on a "reasonable and customary" schedule. If you use an out-of-network dentist, you may be bill for the difference between what the plan pays and what the dentist charges.

	Standard Plan	Premium Plan
Deductible (what you pay first for some services)		
Individual	$50	$25
Family	$150	$100
Annual Benefit Maximum (the most the plan will pay in a plan year)		
Per person	$1,500	$2,500
Orthodontia Lifetime Maximum (the most the plan will pay for orthodontia per lifetime)		
Per person	N/A (orthodontia not covered)	$2,500
What You Pay		
Preventive (exams, cleanings, X-rays; sealants and fluoride covered up to age 16)	$0, no deductible	$0, no deductible
Basic (fillings, oral surgery, denture repair)	20% after deductible	20% after deductible
Major (crowns, inlays, onlays, bridges, dentures, implants)	50% after deductible	50% after deductible
Orthodontia	Not covered	50% after deductible



Vision

You can choose from two plans through VSP – the Standard Plan or the Premium Plan. To find a provider, visit **vsp.com** or call **800.877.7195**. In-network providers include Costco®, Walmart® and Sam's Club®. You will not receive a vision ID card. When you schedule your appointment, give your name, date of birth and Social Security number so the provider can verify your benefits.

How are the plans alike?

BOTH STANDARD AND PREMIUM PLANS

- Let you use any provider with savings when you use a VSP network provider
- Cover routine eye exams and eyeglasses or contacts
- Offer discounts on certain glasses and contacts at **eyeconic.com**

How are the plans different?

PREMIUM PLAN ONLY

- Offers enhanced benefits, so your paycheck contributions are higher
- Choice of a $250 frame allowance, progressive lenses, light-reactive lenses, anti-glare coating or a $250 elective contact lens allowance in lieu of glasses
- Each covered family member can choose one upgrade every 12 months

Vision Benefits at a Glance

Here's what's covered and what you'll pay. If you use an out-of-network provider, you'll need to pay the cost up front and then submit a claim form to be reimbursed up to the out-of-network allowance.

	Standard Plan and Premium Plan[1]	
What You Pay	**IN-NETWORK**	**OUT-OF-NETWORK**
Eye Exam (once every plan year)		
WellVision exam	$10 copay (up to $39 copay for routine retinal screening)	All amounts over $45
Eyeglass Frames		
Frames (**Premium Plan:** once every year; **Standard Plan:** once every other year)	$25 copay for frames and lenses, then all amounts over $150 allowance[2]	All amounts over $70
Lenses[3] (once every plan year)		
Single vision	$25 copay for frames and lenses	All amounts over $30
Bifocal	$25 copay for frames and lenses	All amounts over $50
Trifocal	$25 copay for frames and lenses	All amounts over $65
Contact Lenses (once every plan year in lieu of glasses)		
Contact lens exam (fitting and evaluation)	Up to $60 copay	No reimbursement
Contacts	All amounts over $150	All amounts over $105

[1] The Premium Plan offers some enhanced benefits. You can choose one of the following every 12 months: a $250 frame allowance, progressive lenses, light-reactive lenses, anti-glare coating or a $250 elective contact lens allowance instead of glasses.

[2] You get an $80 Costco frame allowance and a $170 allowance for featured frame brands, plus a 20% discount on amounts over the plan allowance.

[3] Some lens enhancements, including progressive lenses, may have an added cost.

Life and AD&D Benefits at a Glance

WSI provides you with associate Basic Life and AD&D benefits through MetLife.

Benefit	Amount
Basic Life	1x your base earnings; $1 million maximum
Basic AD&D	1x your base earnings; $1 million maximum



Costs for Coverage

Your Monthly Paycheck Costs for Health Coverage

	Associate Only	Associate Plus One	Associate Plus Two or More
If you make $50,000 or less			
Non-tobacco user	$113.64	$207.43	$259.28
Tobacco-user	$188.68	$282.46	$334.31
If you make $50,000.01–$100,000			
Non-tobacco user	$116.96	$214.04	$267.01
Tobacco-user	$194.19	$291.28	$344.24
If you make greater than $100,000			
Non-tobacco user	$120.26	$220.67	$274.73
Tobacco-user	$199.71	$300.11	$354.18

Your Monthly Paycheck Costs for Dental Coverage

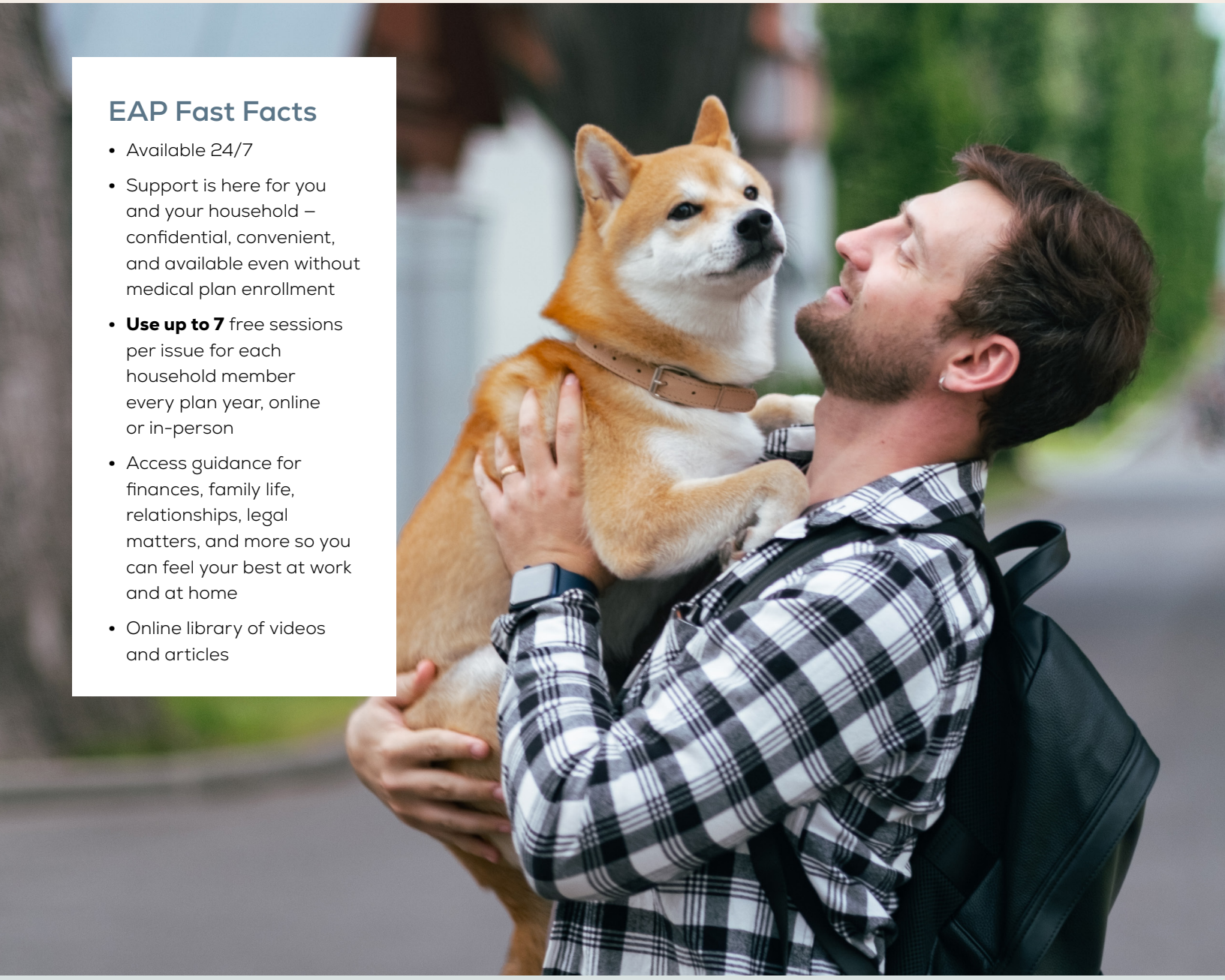
	Standard Plan	Premium Plan
Associate Only	$10.54	$25.75
Associate + Family	$43.31	$93.65

Your Monthly Paycheck Costs for Vision Coverage

	Standard Plan	Premium Plan
Associate Only	$4.68	$7.50
Associate + Family	$14.04	$22.51

Connect Employee Assistance Program (EAP)

WSI benefits are here to help you in your everyday life. Our EAP, provided by Cigna, offers free, confidential support for everyday challenges and more serious concerns. It's available to you and your household members, even if you're not enrolled in a WSI medical plan.



EAP Fast Facts

- Available 24/7
- Support is here for you and your household – confidential, convenient, and available even without medical plan enrollment
- **Use up to 7** free sessions per issue for each household member every plan year, online or in-person
- Access guidance for finances, family life, relationships, legal matters, and more so you can feel your best at work and at home
- Online library of videos and articles

Get in Touch With the EAP

Call **877.505.4161** or visit **myCigna.com**. If you haven't registered yet, click on "Register" to complete your registration (Employer ID: WSI).

This document is intended for all regular full-time associates scheduled for or normally working 30 or more hours per week.

This guide is designed as a reference to help eligible associates enroll for benefits and answer many benefit questions. The information described in the guide is for general information purposes and is not intended to replace the applicable plan documents. Review the applicable plan documents for more information regarding your benefits. The legal documents and insurance contracts governing these plans will determine your benefits in the event of any omissions or discrepancies. Your participation in these plans is not a contract of employment and does not guarantee your future employment.

April 2026