OMB Control number 1210-0040; Expiration Date 03/31/2026

SUMMARY ANNUAL REPORT FOR MEDICAL TRANSPORTATION MANAGEMENT, INC. BENEFITS WRAP PLAN

This is a summary of the annual report of the MEDICAL TRANSPORTATION MANAGEMENT, INC. BENEFITS WRAP PLAN (Employer Identification Number 43-1719762, Plan Number 512) for the plan year 01/01/2025 through 12/31/2025. The annual report has been filed with the Employee Benefits Security Administration, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

MEDICAL TRANSPORTATION MANAGEMENT, INC. has committed itself to pay certain Telemedicine, Health, Severance pay, Prescription drug, Dental, Flexible spending account, Health reimbursement arrangement claims incurred under the terms of the plan.

Insurance Information

The plan has insurance contracts with METLIFE LEGAL PLANS, VISION SERVICE PLAN, LIFE INSURANCE COMPANY OF NORTH AMERICA, UNITEDHEALTHCARE INSURANCE COMPANY, CONTINENTAL AMERICAN INSURANCE COMPANY and KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST to pay certain Life insurance, Accidental death and dismemberment, Long-term disability, Temporary disability, Legal, Vision, Business travel accident, Health, Prescription drug claims incurred under the terms of the plan. The total premiums paid for the plan year ending 12/31/2025 were $4,674,020.

Your Rights to Additional Information

You have the right to receive a copy of the full annual report, or any part thereof, on request. The items listed below are included in that report:

1. Insurance information, including sales commissions paid by insurance carriers.

To obtain a copy of the full annual report, or any part thereof, write or call the office of Jill Heneghan, who is a representative of the plan administrator, at 16 HAWK RIDGE CIRCLE, LAKE ST. LOUIS, MO 63367 and phone number, 636-561-5686.

You also have the legally protected right to examine the annual report at the main office of the plan: 16 HAWK RIDGE CIRCLE, LAKE ST. LOUIS, MO 63367, and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210. The annual report is also available online at the Department of Labor website www.efast.dol.gov.