



< **The Essential Guide to**

# **YOUR 2023 BENEFITS**

**BENEFITS FOR A BETTER YOU!**

**FOR STUDENT INTERNS AND CO-OP EMPLOYEES**

***Lubrizol***



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## Included Health: Great Health Care Starts Here

We know health care can be confusing. To help you and your family members navigate the health care system and get the most from your Lubrizol benefits, we provide access to Included Health. Included Health can make health care easier for you by providing:

- **Top-rated doctors** — Get matched to carefully vetted care in your network.
- **24/7 urgent care** — See a doctor in minutes on your phone from anywhere.
- **Insurance specialists** — Find out what's covered by your plan.
- **Billing experts** — Get bills checked for errors before you pay.
- **Specialty care** — Get a second opinion from allergists to urologists.

Included Health is available 24/7 at **1-855-431-5532** or [includedhealth.com/Lubrizol](https://includedhealth.com/Lubrizol). Activate your account online at [includedhealth.com/Lubrizol](https://includedhealth.com/Lubrizol) and download Included Health's mobile app for health care support on the go. The app is free and available on the App Store and Google Play.

To better direct you to resources, Included Health will ask you questions related to your preferences. You can opt out of these questions. Included Health does not share your preferences with Lubrizol.



# Enrolling for Benefits



## WHEN TO ENROLL

### When Your Internship or Co-op Begins

**You have 30 days from your hire date to elect your Lubrizol benefits.** Your elections are effective from your hire date through the end of the plan year, unless you have a qualified family status change, other qualifying event or your internship/co-op ends.

**If you do not enroll for benefits within 30 days of your hire date, you will not have medical coverage during the current plan year.**

Special enrollment rules apply under the Affordable Care Act for part-time employees who are expected to work fewer than 20 hours per week, but actually work an average of at least 30 hours per week over a measurement period. Refer to the *Employee Benefits Resource Guide* for more details.

If you decline coverage, you may enroll during the next annual enrollment period for 2024 benefits or during the year for 2023 benefits if you have a qualified family status change or other qualifying event.

### If Your Family Status Changes

You can make changes to your benefit elections during the year if you have a qualified family status change. The IRS considers the following events qualified family status changes:

- Your marital or domestic partnership status changes.
- You or your spouse/domestic partner gives birth to or legally adopts a child.
- You become the legal guardian of a child.
- Your spouse/domestic partner or child dies.
- Your spouse/domestic partner or child loses or gains coverage from another source (for example, your spouse/domestic partner stops working and loses coverage under his/her employer-sponsored medical plan).
- Your child is no longer eligible for coverage (for example, your child turns age 26).
- You lose other coverage involuntarily.

Family status changes must be made within 30 days of the qualifying event. The birth or adoption of a child allows 60 days to make the family status change. Any change you make in coverage must be consistent with your status change. For example, if you and your spouse/domestic partner have a baby, you can add the newborn to the medical plan, but you cannot take your spouse/domestic partner off the plan. See a full list of qualified family status changes in the *Employee Benefits Resource Guide*.

### Other Qualifying Events

You can make changes to your benefit elections during the year under other limited circumstances, including:

- You experience a significant premium cost change upon changing employment status from full-time to part-time or from part-time to full-time.
- You gain coverage under another group health plan.
- You transfer to another location where the coverage you previously elected is not offered.

You have 60 days after the loss or gain of Medicaid/CHIP to make changes to your benefit elections. Contact the Lubrizol Benefits Center at **1-844-747-1641** if you have questions or to make changes to your benefits.



## BENEFIT COVERAGE ELIGIBILITY

### Employees

### Eligible Family Members

You may enroll your eligible family members, including:

- Your spouse
- Your domestic partner<sup>1</sup>
- Your children to age 26
- Your domestic partner's children to age 26
- Dependent children over the age of 26 who are incapable of earning a living because of a disability that was in existence at the time they would have no longer been eligible for coverage under the plan

### Eligible children include:

- Natural children
- Adopted children
- Stepchildren
- Foster children
- Children for whom you are responsible for providing health care coverage by court order
- Children for whom you are legal guardian
- Domestic partner's children

1 Domestic partner eligibility is subject to certification and must be completed within 60 days of domestic partner eligibility date in order for your eligible domestic partner and his/her eligible children to receive coverage. For more information about certification and eligibility requirements, visit [benefits.lubrizol.com](https://benefits.lubrizol.com). Annual recertification may be required.

## WHEN YOUR INTERNSHIP OR CO-OP ENDS

Your coverage ends on the last day of the month you cease to be employed by Lubrizol. COBRA continuation coverage information will be sent to your home following your termination. You do not need to "turn off" your benefits in the system; the system will automatically terminate your benefits when your internship or co-op assignment ends.

## CO-OPS ON RECURRING ASSIGNMENTS

If you are a co-op on a rotating/recurring assignment, you will be subject to the process outlined in this guide each time you are hired by Lubrizol and terminated by Lubrizol. If you are rehired as a co-op within 30 days, you will return to the same coverage you had at the time of your most recent termination in accordance with our plan rules.



## HOW TO ENROLL



Enroll online at [go.lubrizol.com/BenefitsEnrollment](https://go.lubrizol.com/BenefitsEnrollment) (or [Lubrizol.BenefitsNow.com](https://Lubrizol.BenefitsNow.com) from outside the Lubrizol network) or call the Lubrizol Benefits Center at **1-844-747-1641**.



## Enrolling a spouse or other dependents for medical coverage?

If verification is required, instructions and a unique ID will be mailed to your home by Alight, our benefits administration vendor.



# Paying for Your Benefits

You and Lubrizol share in the cost of your coverage for most benefit options.

**Lubrizol is self-insured, which means Lubrizol — not an insurance company — pays for our employees' and their covered family members' medical and dental claims. When you elect health care coverage through Lubrizol, you and Lubrizol share the cost of that coverage, with Lubrizol paying the majority of the cost.**

Your contributions toward the cost of your coverage are deducted each biweekly pay period. Most contributions are deducted from your pay on a pre-tax basis, which means you save on taxes because your federal, state and local income taxes (in most cases) and Social Security taxes are calculated after your contributions have been deducted from your pay.



Visit the Benefits website at [benefits.lubrizol.com](https://benefits.lubrizol.com) for contribution amounts.



## FEDERAL AND STATE TAX IMPLICATIONS

COST OF COVERAGE FOR ...	Your contributions are generally deducted from your pay ...	Lubrizol's contribution to the cost of coverage is generally ...
You and your legal dependents	Pre-tax for both state and federal taxes	Not taxed
Your domestic partner and your domestic partner's children	Post-tax for federal taxes; state taxes vary by state	Taxed as imputed income; please consult with a financial advisor about the impact of imputed income

### Medical Surcharge for Working Spouses/Domestic Partners

It is Lubrizol's goal to provide affordable health care for our employees and their eligible family members. The surcharge helps keep the cost of coverage lower for everyone in the plan, while also providing coverage for spouses/domestic partners who don't work or don't have access to another employer's health insurance plan.

If your spouse or eligible domestic partner is eligible for coverage through another employer but you choose to enroll him/her only in Lubrizol coverage, you will pay a medical surcharge of \$45 biweekly. This amount will be deducted from your pay on a pre-tax basis.

The medical surcharge does not apply if:

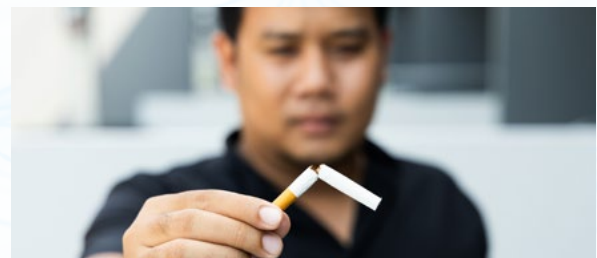
- Your spouse/domestic partner enrolls in both his/her other available coverage and Lubrizol coverage, or
- Your spouse/domestic partner doesn't have access to other employer coverage.

You might be required to show proof of your spouse's/domestic partner's other coverage or lack of access to coverage.

### Tobacco Surcharge

If you enroll in a Lubrizol medical plan and you or a covered family member (18 or older) uses tobacco, you will pay a \$35 tobacco surcharge every biweekly pay period. The surcharge is meant to help offset the significant health care costs associated with tobacco use and to encourage employees and their family members to be tobacco free.

You can avoid the surcharge by completing a smoking cessation program. See [benefits.lubrizol.com](https://benefits.lubrizol.com) for more details. If your doctor says HealthyLife® QuitWell™ isn't right for you, contact Corporate Benefits at **440-347-5358** or [benefits@lubrizol.com](mailto:benefits@lubrizol.com). We will work with you (and your doctor) to come up with an alternative for avoiding the tobacco surcharge that is right for your circumstances.





# Resources to Help You Live Better



## Included Health

Need help navigating your health care? You have Included Health to help! Turn to a team of Care Coordinators for help finding a top doctor, getting a second opinion and understanding your health benefits.

Included Health can help with finding high-quality, in-network doctors; scheduling appointments; getting a remote second opinion; understanding your health care benefits and medical bills; and more! Visit [includedhealth.com/lubrizol](https://includedhealth.com/lubrizol) or call **1-855-431-5532** for 24/7 help with all your health care needs.

## Included Health Virtual Everyday & Urgent Care

Included Health's multidisciplinary team of licensed clinicians provides on-demand care for a wide range of common medical conditions. Some common conditions include:

- Allergies
- Asthma
- Cold or flu symptoms
- Ear infection
- Sore throat

Connect with a board-certified provider at any time of day or night. To take advantage, download the Included Health app and click "Get Care."

## HealthyLife® QuitWell™

You and your family members can quit tobacco for good with support from the HealthyLife® coaching program. Enroll at [corehealthylife.com/healthcoaching](https://corehealthylife.com/healthcoaching).

## Real Appeal

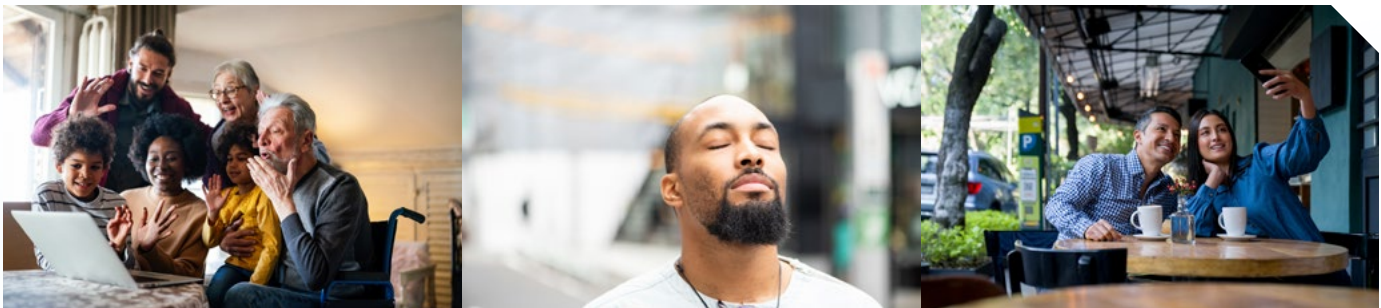
Real Appeal is an online weight-loss program available at no cost to you and your dependents enrolled in a Lubrizol medical plan. You get a coach for support and guidance; online tools to help you track your food, activity and progress; and a success kit with recipes, scales and more shipped to your door. Learn more and join at [lubrizol.realappeal.com](https://lubrizol.realappeal.com).



# Right Care, Right Place, Right Time

You have choices when you need medical care. Knowing where to go for the care you need when you need it can save you time and money. Here are your most common options:

WHERE TO GO FOR CARE		
TYPE OF PROVIDER	Reasons to Go	How to Contact
<b>Primary Care Physician (PCP)</b>	Routine care, preventive care and help managing chronic conditions.	Contact Included Health at <b>1-855-431-5532</b> or <a href="https://includedhealth.com/lubrizon">includedhealth.com/lubrizon</a> to find a PCP in your plan's network.
<b>Included Health Everyday &amp; Urgent Care Virtual Visits</b>	Diagnosis and treatment of non-emergency conditions 24/7.	See a doctor using your mobile device by downloading the Included Health app and clicking "Get Care."
<b>Convenient Care Clinic</b>	Treatment for minor illnesses, as well as preventive or routine care such as health screenings, immunizations and physical exams.	Walk-in clinics are located in retail stores, supermarkets and pharmacies. Examples include CVS Pharmacy®, Walgreens® and Target®. Contact Included Health at <b>1-855-431-5532</b> or <a href="https://includedhealth.com/lubrizon">includedhealth.com/lubrizon</a> to find a network location near you.
<b>Urgent Care</b>	Care for an illness, injury or condition serious enough to seek care right away but not so severe it requires ER care.	Walk-in appointments are available during business hours. Contact Included Health at <b>1-855-431-5532</b> or <a href="https://includedhealth.com/lubrizon">includedhealth.com/lubrizon</a> to find a network location near you.
<b>Emergency Room (ER)</b>	True medical emergencies that are life threatening. No appointment required, but wait times may vary depending on the severity of your emergency.	Dial 911 from any phone in an emergency.





# Medical and Prescription Drug Coverage

You have access to three Consumer-Driven Health Plans (CDHPs) designed to give you flexibility in managing your health care and your costs.

A CDHP qualifies you for a health savings account (HSA), which you can use to save and pay for eligible health care expenses tax-free.

The CDHPs use the UnitedHealthcare Choice Plus network. If you live in an area where network coverage is limited, you also have an out-of-area option – the Lubrizol OOA. If you are eligible for this option, it will be displayed when you enroll online at [go.lubrizol.com/BenefitsEnrollment](https://go.lubrizol.com/BenefitsEnrollment).

CDHPs use the UHC Choice Plus network. UMR, a subsidiary of UnitedHealthcare, is the claims administrator. To locate a provider, contact Included Health at [includedhealth.com/lubrizol](https://includedhealth.com/lubrizol) or **1-855-431-5532**.

## PRESCRIPTION DRUG COVERAGE DETAILS

Your medical election includes prescription drug coverage through CVS/caremark. Prescription drug costs apply toward your annual deductible, and designated generic preventive drugs are included at no cost to you.



## How to Fill Your Prescriptions

You have three ways to fill your prescription:

1	<b>Retail Pharmacy</b>	Fill your prescription at any pharmacy participating in CVS/caremark's retail network. This is your best option for short-term prescriptions that you need right away (for example, a 10-day supply of antibiotics for an ear infection). You may purchase prescriptions for 30 days or less (with one refill).
2	<b>Mail Order Program</b>	The mail order option allows you to purchase up to a 90-day supply of your maintenance medication (with up to three refills per year).
3	<b>Maintenance Choice Program</b>	You can purchase a 90-day maintenance prescription at a CVS retail pharmacy for the same cost as mail order. Call CVS/caremark at <b>1-844-742-5087</b> to see if your prescription is on the maintenance list.

## How to Save on Your Prescription Drugs

<b>Generics</b>	<b>Save big with generics.</b> Generic medications are just as safe and effective as their brand-name counterparts. If you choose a brand name drug when a generic is available, you pay the generic coinsurance plus the difference between the cost of the brand name and generic drug.
<b>Mail Order or Maintenance Choice Program</b>	<b>Use mail order or the Maintenance Choice Program for your maintenance medications.</b> These programs are mandatory for maintenance medications after the first two fills at a retail network pharmacy.
<b>CVS/caremark App</b>	<b>Download and use the CVS/caremark app</b> to check drug costs, search for lower-cost alternatives, and more.





# How a Consumer-Driven Health Plan (CDHP) Works

A CDHP provides complete health care coverage and important protection against significant health care expenses. You also get a health savings account (HSA) that lets you save and pay for eligible health care expenses tax-free.

## Look At All Your Options

If you have access to other medical coverage (through a spouse's plan, for example), you might want to compare your options to see which plan provides the coverage you need at the lowest cost.

### HOW A CDHP WORKS

1		<b>COMPREHENSIVE COVERAGE</b> A CDHP provides comprehensive health care coverage, including 100% coverage for preventive care and specified preventive maintenance medications, as well as coverage for behavioral health and substance abuse treatment.
2		<b>BIWEEKLY CONTRIBUTIONS</b> Depending on the coverage you elect, you pay a contribution toward the cost of your coverage each biweekly pay period.
3		<b>ANNUAL DEDUCTIBLE</b> Your in-network preventive care and specified preventive maintenance medications are 100% covered — even before you meet the deductible. For all other covered services, you must meet the deductible before Lubrizol begins to pay a share of the costs. What you pay toward your annual deductible counts toward your annual out-of-pocket maximum.
4		<b>COINSURANCE</b> Once you meet your deductible, you pay coinsurance (a percentage of the cost) for covered services and Lubrizol pays the rest.
5		<b>ANNUAL OUT-OF-POCKET MAXIMUM</b> The annual out-of-pocket maximum is the most you pay for covered services before Lubrizol begins paying 100% of your covered expenses for the rest of the plan year.



# Save with a Health Savings Account (HSA)

An HSA is a smart way to save and pay for your health care.

You are generally eligible for an HSA if you enroll in a CDHP or other high-deductible health plan coverage, and you do not have disqualifying medical coverage such as Medicare. You can fund your HSA with pre-tax contributions and – depending on which CDHP you choose – with financial contributions from Lubrizol. Optum Bank administers your account.



## HOW AN HSA WORKS

1



### ENROLL

If you elect the Core plan, you must choose to open your HSA during enrollment.

If you elect the Standard or Plus plan, your HSA will be automatically opened for you. You will be asked to confirm that you do not have disqualifying coverage such as Medicare.



2



### CONTRIBUTE TAX-FREE

You can elect to make tax-free contributions to your HSA, up to IRS limits, and you can change your contribution at any time. You may contribute via pre-tax biweekly payroll deductions and/or a post-tax lump sum contribution to Optum Bank at any time. You can claim the post-tax amount as a tax deduction when you file your income taxes.

If you enroll in the Standard or Plus plan, Lubrizol will make a tax-free contribution to your HSA. Keep in mind that Lubrizol's contribution counts toward the IRS limit.

## HSA CONTRIBUTION AMOUNTS

COVERAGE	Lubrizol Contributes <sup>1</sup>	You Can Contribute	IRS Annual Limits <sup>2</sup>	Catch-Up Contribution
	Individual • 2-person • Family	Individual • 2-person • Family	Individual • 2-person • Family	
<b>Core</b>	\$0 • \$0 • \$0	\$3,850 • \$7,750 • \$7,750	\$3,850 • \$7,750 • \$7,750	Contribute an additional \$1,000 if you are age 55 or older in 2023
<b>Standard/OOA</b>	\$500 • \$750 • \$1,000	\$3,350 • \$7,000 • \$6,750	\$3,850 • \$7,750 • \$7,750	
<b>Plus</b>	\$1,000 • \$1,500 • \$2,000	\$2,850 • \$6,250 • \$5,750	\$3,850 • \$7,750 • \$7,750	




1 Lubrizol's contribution is pro-rated for mid-year hires.

2 IRS limits include your contribution plus any contribution from Lubrizol.

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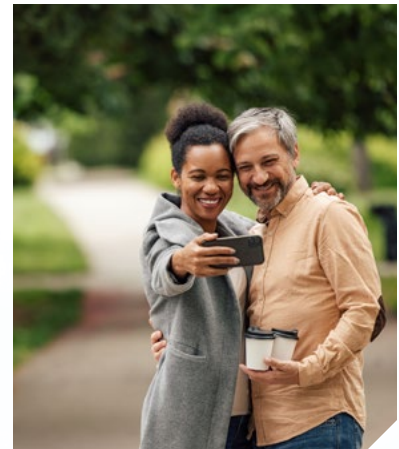
HOW AN HSA WORKS	
3	 <p><b>USE IT OR LET IT GROW</b></p> <p>Use your HSA to help manage your deductible and to pay for eligible expenses tax-free now – or let it grow to use later. Eligible expenses include most medical services, prescriptions, vision care, non-cosmetic dental care and orthodontia, COBRA coverage, qualified long-term care expenses and more. For a complete list, refer to IRS Publication 502 at <a href="https://www.irs.gov">irs.gov</a>.</p>
4	 <p><b>INVEST IT</b></p> <p>You earn tax-free interest on money in your HSA. If you choose to let your HSA grow (instead of using it now to pay for eligible health care expenses), you can invest it in a variety of investment options once your balance reaches \$2,000. Any investment earnings are tax-free.</p>
5	 <p><b>ROLL IT OVER</b></p> <p>Money in your account at the end of the year carries over for future use. Your HSA is always yours, even if you change health plans, change jobs or retire.</p>

HSA contributions and earnings are not subject to federal taxes and not subject to state taxes in most states. A few states, including Alabama, California, New Hampshire, New Jersey and Tennessee, do not allow pre-tax treatment of contributions or earnings. Consult your tax professional or state department of revenue for more information.



### Learn More about an HSA

For more information about the advantages of an HSA and how it works with a CDHP, visit [benefits.lubrizol.com](https://benefits.lubrizol.com) or [optumbank.com](https://optumbank.com), or call Optum Bank at **1-866-234-8913**.





COMPARE YOUR MEDICAL AND PRESCRIPTION DRUG BENEFITS			
FEATURE	Core <sup>1</sup>	Standard	Plus
	Individual • 2-person • Family	Individual • 2-person • Family	Individual • 2-person • Family
<b>Lubrizol's Annual HSA Contribution</b>	N/A	\$500 • \$750 • \$1,000	\$1,000 • \$1,500 • \$2,000
<b>Preventive Care</b>	<b>You Pay</b>	<b>You Pay</b>	<b>You Pay</b>
	\$0		
<b>Annual Deductible<sup>2</sup></b>	\$4,250 • \$6,375 • \$8,500	\$3,250 • \$4,875 • \$6,500	\$2,250 • \$3,375 • \$4,500
<b>Annual Out-of-Pocket Maximum</b>	\$5,750 • \$7,875 • \$10,000	\$4,750 • \$6,375 • \$8,000	\$3,750 • \$4,875 • \$6,000
<b>Biweekly Contribution<sup>3</sup></b>	\$0 • \$17 • \$25	\$31 • \$86 • \$122	\$66 • \$164 • \$235
<b>Surcharges</b>	Medical: \$45 Tobacco: \$35		
<b>Medical Coinsurance</b>	Network: 20% Non-network: 40%		
<b>Emergency Room Visits</b>	20%		
<b>Hearing</b>	Hearing aid, hearing aid exams and diagnostic hearing care (not preventive) have \$500 limit, payable every two years		
<b>Prescription Drug – Retail and Mail Order</b>	Preventive Maintenance: 0% Generic: 10% Brand Formulary: 20% Brand Non-formulary: 30% Biotech/Specialty (available only through mail order): 35%		

1 For the Core plan, the annual out-of-pocket maximum for 2-person and family coverage has an individual cap of \$5,750. Once any one family member reaches the individual cap of \$5,750, Lubrizol starts paying 100% of that person's covered expenses for the rest of the plan year.

2 All covered expenses, including medical, prescription drug, behavioral health and substance abuse treatment expenses, apply to the annual deductible. The amount you pay for your annual deductible also counts toward your out-of-pocket maximum.

3 Actual amounts may vary slightly due to system rounding. For more details on your contributions for coverage, review the 2023 Lubrizol Biweekly Contributions at [benefits.lubrizol.com/ae](https://benefits.lubrizol.com/ae).

Preventive care is vital to maintaining good health, managing risk factors and detecting health issues early. Your in-network preventive care is 100% covered with no deductible.



## LUBRIZOL BENEFITS CENTER

To enroll or ask benefit questions, call **1-844-747-1641** 10 a.m. – 7 p.m. ET or visit [go.lubrizon.com/BenefitsEnrollment](https://go.lubrizon.com/BenefitsEnrollment) (or [Lubrizon.BenefitsNow.com](https://Lubrizon.BenefitsNow.com) from outside the Lubrizon network).

IMPORTANT BENEFITS CONTACT INFORMATION		
Plan/Program	Phone	Online
<b>HEALTH</b>		
<b>Included Health</b> Your first call for all benefits-related questions	<b>1-855-431-5532</b>	<a href="https://includedhealth.com/lubrizon">includedhealth.com/lubrizon</a>
<b>Medical</b> UMR, Utilizing UnitedHealthcare Choice Plus Network	<b>1-855-431-5532</b> Included Health will assist you.	<a href="https://includedhealth.com/lubrizon">includedhealth.com/lubrizon</a>
<b>Health Savings Account</b> Optum Bank	<b>1-866-234-8913</b>	<a href="https://umr.com">umr.com</a> for single sign-on to Optum Bank or <a href="https://optumbank.com">optumbank.com</a>
<b>Prescription Drug</b> CVS/caremark	<b>1-844-742-5087</b>	<a href="https://caremark.com">caremark.com</a>
<b>HealthyLife® QuitWell™</b> Tobacco cessation program	<a href="https://corehealthylife.com/healthcoaching">corehealthylife.com/healthcoaching</a>	
<b>Included Health Everyday &amp; Urgent Care Virtual Visits</b>	Download the Included Health app and click "Get Care."	
<b>Real Appeal</b> Online weight-loss program	<a href="https://lubrizon.realappeal.com">lubrizon.realappeal.com</a>	

**DISCLAIMER:** This enrollment guide is not intended to be a comprehensive description of the terms of the applicable legal plans. If there are any conflicts between the information provided in this enrollment guide and legal plan documents, the legal plan documents will govern. This guide is not intended to be relied upon for tax advice; consult your tax professional. Participation in the benefits program and eligibility for the benefits described in this enrollment guide are determined under the legal plan documents, as they may be amended from time to time, and applicable law. Participation in the benefits program does not constitute a right to continued employment with Lubrizon. While it is Lubrizon's intent to continue these programs, we reserve the right to amend or terminate them at any time for any reason. If you have any questions about your benefits, please contact the Lubrizon Benefits Center at **1-844-747-1641**.