



**Lubrizol**

THE ESSENTIAL GUIDE TO

# YOUR 2024 BENEFITS

Live Well. Be Well.





# LIVE WELL. BE WELL.

At Lubrizol, we understand that you want to live well and be well — physically, mentally and financially. We also know it is easier to take care of your health and well-being when you have the right tools. That's where your Lubrizol benefits come in.

*The Essential Guide to Your 2024 Benefits* provides an overview of the many benefits available to you. Review it carefully so you can be sure you have the coverage that is right for you and your family in 2024. Please take time to understand how to use your benefits to get the care you need and save money.

## Need Help with Your Health Care Benefits? Start with Included Health.

Health care can be confusing. Whenever you have questions or need help with your Lubrizol benefits, Included Health can provide:

- **Enrollment support services**  
Get help to understand your choices and make confident enrollment decisions.
- **Top-rated doctors**  
Get matched to carefully vetted care in your network.
- **24/7 virtual care**  
See a doctor in minutes on your phone from anywhere.
- **Insurance specialists**  
Find out what's covered by your plan.
- **Billing experts**  
Have your bills checked for errors before you pay.
- **Expert second opinions**  
Obtain a medical opinion from one of the country's top specialists for your condition.

### Included Health is available 24/7:



1-855-431-5532



[includedhealth.com/Lubrizol](https://includedhealth.com/Lubrizol)



Download the mobile app for health care support on the go. It's free 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.



# What's Inside



Enrolling for Benefits	4
Paying for Your Benefits	6
Resources to Help You Live Well and Be Well	7
Right Care, Right Place, Right Time	9
Your 2024 Benefit Choices	10

## HEALTH

Medical and Prescription Drug Coverage	11
How a Consumer-Driven Health Plan (CDHP) Works	12
Save with a Health Savings Account (HSA)	13
Prescription Drug Coverage Details	15
Dental Coverage	16
Vision Coverage	17

## FINANCIAL WELLBEING

Dependent Care Account (DCA)	18
Retirement Savings	19
Life Insurance	20
Other Financial Benefits	20

## DID YOU KNOW LUBRIZOL ALSO OFFERS

Support for Your Mental Health	21
Parent and Family Resources	21
Vacation Buy Program	21

## RESOURCES

Important Benefits Contact Information	22
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# Enrolling for Benefits



## WHEN TO ENROLL

### When You Are First Eligible

**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 or other qualifying event.

**If you do not enroll for benefits within 30 days of your hire date, you will not have medical, dental or vision coverage during the current plan year;** you will receive Long Term Disability coverage equal to 60% of eligible base pay; and you will receive basic life insurance coverage of two times your eligible pay.

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.

### During Annual Enrollment

Annual enrollment is your once-a-year opportunity to review and select your benefits for the coming year, add or cancel dependent coverage, and enroll in the Dependent Care Account and Vacation Buy Program, and set your HSA contributions. This is also a good time to review your beneficiaries for your HSA, Lubrizol Profit Sharing and Savings Plan, and life insurance plans.

Annual enrollment is October 16 – October 27, 2023, for benefits effective January 1 – December 31, 2024.

If you decline coverage, you may enroll during the next annual enrollment period or during the year 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

All regular, full-time U.S. salaried and non-union hourly employees are eligible to enroll in benefits. Regular part-time employees working at least 20 hours per week and those employees participating in a phased-in retirement program are also eligible.

U.S. wage employees whose collective bargaining agreement establishes eligibility for this program may participate.

### 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

<sup>1</sup> 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.



## 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, dental or vision 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.

Contributions for certain benefits (for example, Supplemental and Dependent Life Insurance) are made on a post-tax basis.

Visit the Benefits website at [benefits.lubrizol.com](https://benefits.lubrizol.com) for contribution amounts or **pages 11 and 16** in this guide.



## 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

Lubrizol strives 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 send a benefits request in MyHR. 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 Well and Be Well

## INCLUDED HEALTH

Included Health is your all-in-one guide and resource for benefits and health care related needs. Lubrizol provides this service to you and your eligible dependents so you have access to the best care possible. Use Included Health to:



### NAVIGATE

#### Navigate Your Benefits and Health Care

- **Navigate complex health conditions.** Included Health provides personalized care for complex and chronic health conditions. Join the Connected Care Program and partner with a dedicated clinician, nurse care manager, and care coordinator for personalized support and guidance.
- **Obtain prescription drug support** such as finding lower-cost alternative drugs.
- **Get quick answers to medical questions.** Included Health can provide over-the-phone guidance and support from an Included Health clinician.
- **Understand the details of your health plan.**
- **Get answers to your billing questions.** Get a billing expert to check health care bills for errors before you pay.
- **Determine which of your benefits you should use.** Included Health will help you explore the different health benefits available to you and when to use them.
- **Find a primary care physician or specialist** for an in-person visit. Included Health will help you find trusted and experienced doctors within your insurance network.
- **Access your insurance plan information and ID card** such as claims history and other important information.

### ACCESS + CONNECT

#### Access Included Health Virtual Medical and Behavioral Health Care

Connect face-to-face with a top-rated doctor in as little as five minutes. Common medical conditions include:

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

Connect with a board-certified provider at any time of day or night.

See a top therapist or psychiatrist right on your phone with Included Health. Find the perfect match for a real connection with a provider you can see again and again. Included Health makes it easy to find the right mental health care, right away:

- **Connect face-to-face** with your therapist or psychiatrist from your phone, tablet or computer.
- **Find the right therapist or psychiatrist** for you from a diverse network of providers and specialists.
- **Stop waiting days or weeks for an appointment** and connect with an Included Health provider that is available every day of the year.

It's easy to get started. Just download the Included Health app and click "Get Care."

Activate your account at [go.lubrizol.com/includedhealth](https://go.lubrizol.com/includedhealth) or call **1-855-431-5532** for 24/7 support from Included Health's top medical professionals, insurance experts and care coordinators.

# Resources to Help You Live Well and Be Well



## MORE RESOURCES

### GET SUPPORT FOR LIFE'S CHALLENGES

#### Essentials Balance, Your Employee Assistance Program

The *Essentials Balance* Program, your employee assistance program administered by Optum, offers resources to help you live well, be well and work well. Services are available to you at no cost, including 24/7 confidential access over the phone and online. You and your family members can each get up to six in-network counseling visits per event, per calendar year.

You can call to speak with master's-level employee assistance specialists who provide consultation, risk screening, advocacy, legal counseling, adult care and eldercare support, child and family support, and convenience services. Or you can use Optum's web services, which are available in English and Spanish.

Visit [liveandworkwell.com](https://liveandworkwell.com) or call **1-866-248-4094** to learn more. Access code: Lubrizol.

#### Talkspace

Reach out to a licensed, in-network employee assistance provider 24/7 (no appointment necessary) or choose real-time video visits by appointment. Call **1-866-248-4094** for an authorization code before registering, and then download the Talkspace app.

#### Self Care

Access a variety of tools to help reduce symptoms of stress and depression. Download the app at [liveandworkwell.com](https://liveandworkwell.com). Access code: Lubrizol.

### QUIT TOBACCO

#### 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).

### LIVE HEALTHIER AND LOSE WEIGHT

#### Real Appeal

Real Appeal is a 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 that includes additional weight-loss tools. Learn more and join at [lubrizol.realappeal.com](https://lubrizol.realappeal.com).

### PREPARE FOR RETIREMENT

#### The Berkshire Hathaway Pension Service Center

The Pension Service Center is your contact for benefit estimates and modeling, retirement packet requests, and answers to pension benefit questions. Call **1-877-459-2403**, Monday through Friday, 9 a.m. to 6 p.m. ET (excluding major holidays).

#### Empower Retirement

Access and manage your retirement savings accounts, make transactions, get professional investment advice and more at [mylubrizolretirement.com](https://mylubrizolretirement.com). To talk with a customer service associate, call **1-833-698-0797**, Monday through Friday, 8 a.m. to 10 p.m. ET and Saturday, 9 a.m. to 5:30 p.m. ET.



# 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. Not sure where to go? Contact Included Health at **1-855-431-5532** for 24/7 support.

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/lubrizol">includedhealth.com/lubrizol</a> to find a PCP in your plan's network.
<b>Included Health 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/lubrizol">includedhealth.com/lubrizol</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/lubrizol">includedhealth.com/lubrizol</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.



## Preventive Care is Essential Care

Preventive care is vital to maintaining good health, managing risk factors and detecting health issues early. Your medical, dental and vision benefits include in-network preventive care that's 100% covered without a deductible. Some preventive medications are covered at 100%. For more information, refer to prescription drug coverage details on [page 15](#).

# Your 2024 Benefit Choices

Live well and be well with benefits designed to help support your physical and mental health, financial wellbeing and life balance.

The chart below lists your benefit options for 2024. Certain employees (for example, those covered by a collective bargaining agreement) may have different options.

Lubrizol offers competitive benefits that rank above the median of what our chemical industry peers offer and well above what Fortune 500 companies offer.

Benefit Program	Benefit Options
<b>HEALTH</b>	
<b>Medical and Prescription Drug</b>	<ul style="list-style-type: none"> <li>• Core</li> <li>• Standard</li> <li>• Plus</li> <li>• Lubrizol OOA</li> <li>• No coverage</li> </ul> <p><b>All plans use the UnitedHealthcare Choice Plus Network</b></p>
<b>Dental</b>	<ul style="list-style-type: none"> <li>• Comprehensive</li> <li>• Network PPO</li> <li>• No coverage</li> </ul> <p><b>All plans use MetLife's PDP Network</b></p>
<b>Vision</b>	<ul style="list-style-type: none"> <li>• Comprehensive</li> <li>• No coverage</li> </ul> <p><b>The vision plan uses EyeMed's Access Network</b></p>
<b>FINANCIAL</b>	
<b>Dependent Care Account (DCA)</b>	<ul style="list-style-type: none"> <li>• Contribute up to \$5,000</li> <li>• No participation</li> </ul>
<b>Basic Life Insurance</b>	<p>Lubrizol provides coverage equal to \$50,000 or two times your eligible pay, up to \$1 million</p>
<b>Supplemental Life Insurance<sup>1</sup></b>	<p>Term Life Insurance</p> <ul style="list-style-type: none"> <li>• Supplemental coverage for you up to eight times your base annual earnings</li> <li>• Coverage for your spouse/eligible domestic partner up to \$250,000</li> <li>• Coverage for your child(ren) of \$5,000 or \$10,000 per eligible child</li> <li>• No coverage</li> </ul>
<b>Income Protection (or Disability)</b>	<ul style="list-style-type: none"> <li>• Lubrizol provides Short Term Disability coverage</li> <li>• Lubrizol provides Long Term Disability coverage equal to 60% of your eligible base pay</li> <li>• You can increase your coverage to 70% of your eligible base pay</li> </ul>
<b>BALANCE</b>	
<b>Vacation Buy Program – Where Applicable</b>	<ul style="list-style-type: none"> <li>• Buy up to five days (1 day = 8 hours)</li> <li>• No participation</li> </ul>

<sup>1</sup> Certain criteria must be met for children to be considered eligible dependents for supplemental life insurance. Please refer to criteria posted at [benefits.lubrizol.com](https://benefits.lubrizol.com).

# Medical and Prescription Drug Coverage

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

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://www.includedhealth.com/lubrizol) or **1-855-431-5532**.

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).

## COMPARE YOUR MEDICAL AND PRESCRIPTION DRUG BENEFITS

FEATURE	Core <sup>1</sup>	Standard	Plus
	<i>Individual • 2-person • Family</i>	<i>Individual • 2-person • Family</i>	<i>Individual • 2-person • Family</i>
<b>Lubrizol's Annual HSA Contribution</b>	N/A	\$500 • \$750 • \$1,000	\$1,000 • \$1,500 • \$2,000
	<b>You Pay</b>	<b>You Pay</b>	<b>You Pay</b>
<b>Preventive Care</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	\$74.12 • \$176.34 • \$253.28
<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<sup>4</sup></b>	Preventive: 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, refer to Lubrizol Biweekly Contributions at [go.lubrizol.com/ae](https://go.lubrizol.com/ae).

4 Please refer to the benefits website for the most current drug lists.



# 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



#### COMPREHENSIVE COVERAGE

A CDHP provides comprehensive health care coverage, including 100% coverage for preventive care and specified preventive medications, as well as coverage for behavioral health and substance abuse treatment.

2



#### BIWEEKLY CONTRIBUTIONS

Depending on the coverage you elect, you pay a contribution toward the cost of your coverage each biweekly pay period.

3



#### ANNUAL DEDUCTIBLE

Your in-network preventive care and specified preventive 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.

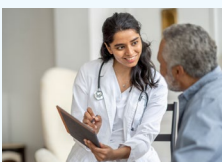
4



#### COINSURANCE

Once you meet your deductible, you pay coinsurance (a percentage of the cost) for covered services and Lubrizol pays the rest.

5



#### ANNUAL OUT-OF-POCKET MAXIMUM

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

	Lubrizol Contributes <sup>1</sup>	You Can Contribute	IRS Annual Limits <sup>2</sup>	Catch-Up Contribution
<b>COVERAGE</b>	<i>Individual • 2-person • Family</i>	<i>Individual • 2-person • Family</i>	<i>Individual • 2-person • Family</i>	
<b>Core</b>	\$0 • \$0 • \$0	\$4,150 • \$8,300 • \$8,300	\$4,150 • \$8,300 • \$8,300	Contribute an additional \$1,000 if you are age 55 or older in 2024
<b>Standard/OOA</b>	\$500 • \$750 • \$1,000	\$3,650 • \$7,550 • \$7,300	\$4,150 • \$8,300 • \$8,300	
<b>Plus</b>	\$1,000 • \$1,500 • \$2,000	\$3,150 • \$6,800 • \$6,300	\$4,150 • \$8,300 • \$8,300	

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

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

## HOW AN HSA WORKS

3



### USE IT OR LET IT GROW

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 [irs.gov](https://www.irs.gov).

4



### INVEST IT

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.

5



### ROLL IT OVER

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.

HSA contributions and earnings are not subject to federal taxes and not subject to state taxes in most states. California and New Jersey impose state tax on HSA contributions and earnings; New Hampshire and Tennessee, which do not have a state income tax, tax HSA earnings upon a taxable withdrawal. 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**.





# Prescription Drug Coverage Details

Your benefit plan provides you with prescription drug coverage administered by CVS Caremark.

Ask your doctor to consider prescribing, when medically appropriate, a preferred medicine from the most current Advanced Control Formulary List. Take this list the next time you or a covered family member sees a doctor. Access the most up-to-date Advanced Control Formulary List on the benefits website at [benefits.lubrizol.com](https://benefits.lubrizol.com).

Prescription drug costs apply toward your annual deductible, and designated generic preventive drugs are included at no cost to you.

## Brand Versus Generic Drugs

If a generic drug is available and you choose a brand name instead, you will pay the generic coinsurance, plus the difference between the cost of the brand and the generic. If you request a generic drug and no generic is available, you will pay the brand coinsurance.

## How to Fill Your Prescriptions

You have three ways to fill your prescription:

<b>Retail Pharmacy</b>	<b>1</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).
<b>Mail Order Program</b>	<b>2</b>	The mail order option allows you to purchase up to a 90-day supply of your medication (with up to three refills per year).
<b>Maintenance Choice Program (90-day Supply)</b>	<b>3</b>	You can purchase a 90-day maintenance prescription at a CVS retail pharmacy or a 90-day prescription through mail order. For maintenance drugs, the Mail Order Program or the Maintenance Choice Program is mandatory after your initial fill plus one refill at a retail pharmacy. 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>	<p><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.</p> <p>Generics Only Preventive Therapy Drugs include generic preventive drugs, most of which are covered at 100%. Please refer to the Advanced Control Formulary List, which may supersede the Generics Only Preventive Therapy Drug List for brand name drugs when no generic drug is available.</p>
<b>Maintenance Choice Program (90-day Supply)</b>	<p><b>Save big with Maintenance Choice.</b> Fill your 90-day maintenance prescription at a CVS retail pharmacy OR through mail order for the cost of a 60-day maintenance prescription. Not all prescriptions written for 90 days are classified as maintenance drugs. Call CVS/caremark at <b>1-844-742-5087</b> to see if your prescription is on the maintenance list.</p>



Download and use the CVS/caremark app to check drug costs, search for lower-cost alternatives, and more.

# Dental Coverage

Choose between two dental plan options administered by MetLife.

Both dental plan options — Comprehensive and Network PPO — cover preventive care at 100%, including oral exams, cleanings and X-rays. Fillings, crowns, dentures, braces and orthodontia are also covered. You may receive care from any provider you choose, but you can stretch your benefit and save money by choosing dental providers in MetLife’s PDP network.

The dental plans use MetLife’s PDP network. To find a network provider, contact MetLife at [metlife.com/dental](https://www.metlife.com/dental) or **1-800-942-0854**.



## COMPARE YOUR DENTAL BENEFITS

FEATURE	Lubrizon Comprehensive Dental Option	Lubrizon Network PPO Dental Option
<b>Annual Maximum Benefit</b>	\$2,000	\$1,000
<b>Orthodontia Lifetime Maximum Benefit</b>	\$1,500 per child	\$1,000 per child
	<b>You Pay</b>	<b>You Pay</b>
<b>Annual Deductible</b>	\$25 Individual • \$75 Family	\$50 Individual • \$150 Family
<b>Biweekly Contribution</b>	Individual \$7.86 2-person \$15.71 Family \$22.44	Individual \$3.36 2-person \$7.83 Family \$14.55
<b>Preventive Care</b> • Oral exams (two per calendar year) • Cleanings (two per calendar year) • X-rays	\$0 (annual deductible does not apply)	
<b>Basic Restorative</b> • Fillings • Simple extractions	20% after annual deductible	Network: 20% after annual deductible  Non-Network: 50% after annual deductible
<b>Major Restorative</b> • Crowns • Inlays • Dentures	50% after annual deductible	
<b>Orthodontia</b> • Children under age 26	50%	

Certain limitations and exclusions may apply. Refer to the detailed benefits coverage information at [benefits.lubrizon.com](https://benefits.lubrizon.com).



Keep your teeth and gums healthy — and your smile bright — with \$0 preventive care included in your dental coverage.

# Vision Coverage

Your vision plan option is insured by EyeMed. The plan helps you pay for vision expenses, including routine eye exams and eye care purchases.

You can use this benefit at thousands of private practices and retail providers across the country, but your benefits are better when you use EyeMed's Access network providers. Eye exams due to medical conditions are covered under your medical plan.

The vision plan uses EyeMed's Access network. Find more detailed coverage information at [benefits.lubrizol.com](https://benefits.lubrizol.com).



## YOUR VISION BENEFITS AT A GLANCE

FEATURE	Network Member Cost (What You Pay)	Out-of-Network Benefit (What the Plan Will Reimburse You)
<b>Biweekly Contribution</b>	Individual \$3.75 2-person \$6.56 Family \$10.26	
<b>Exam with Dilation as Necessary</b> Once every calendar year	\$0 copay	Up to \$35
<b>Retinal Imaging</b>	Up to \$39	\$0
<b>Standard Contact Lens Fit and Follow-up</b>	Up to \$55	\$0
<b>Premium Contact Lens Fit and Follow-up</b>	90% of retail price	\$0
<b>Eyeglass Frames</b> Once every calendar year	\$0 copay, 80% of charge over \$150	Up to \$75
<b>Standard Plastic Lenses<sup>1</sup></b> Once every 12 months instead of contact lenses <ul style="list-style-type: none"> <li>• Single vision</li> <li>• Bifocal</li> <li>• Trifocal</li> <li>• Standard progressive</li> <li>• Premium progressive</li> </ul>	\$15 copay \$15 copay \$15 copay \$15 copay \$15 copay, 80% of charge over \$120	Up to \$25 Up to \$40 Up to \$55 Up to \$55 Up to \$55
<b>Lens Options</b> Paid by member and added to the base price of the lenses <ul style="list-style-type: none"> <li>• Tint (solid and gradient)</li> <li>• UV coating</li> <li>• Standard scratch resistance</li> <li>• Standard polycarbonate</li> <li>• Standard anti-reflective</li> <li>• Polarized</li> <li>• Other add-ons and services</li> </ul>	\$15 \$0 \$0 \$0 \$45 80% of retail price 80% of retail price	\$0 Up to \$5 Up to \$5 Up to \$5 \$0 \$0 \$0
<b>Contact Lenses (Materials Only)<sup>2</sup></b> Once every calendar year instead of standard plastic lenses <ul style="list-style-type: none"> <li>• Conventional</li> <li>• Disposable</li> <li>• Medically necessary<sup>1</sup></li> </ul>	\$0 copay, 85% of charge over \$150 \$0 copay, 100% of charge over \$150 \$0 copay, paid in full	Up to \$120 Up to \$120 Up to \$200
<b>Lasik and PRK Vision Procedures</b>	85% of retail price or 95% of promotional pricing; call <b>1-800-988-4221</b>	\$0

1 Plan allows the member to receive either contacts and frames, or frames and lens services.

2 Contact lenses are defined as medically necessary if the patient is diagnosed with specific medical conditions where the patient's vision cannot be corrected using standard spectacle lenses. Contact EyeMed at **1-866-723-0513** for additional information.



# Dependent Care Account (DCA)

Use the DCA (administered by UMR) to pay for eligible dependent care-related expenses, such as day care for your child, elderly parent or disabled spouse, with pre-tax dollars.

The most you can contribute to the DCA in 2024 is \$5,000. If you and your spouse/domestic partner both elect a DCA, the maximum total annual contribution per couple is \$5,000 if you file a joint tax return or \$2,500 each if you are married and file separately.

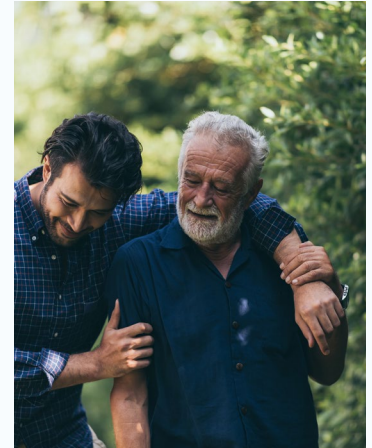
## You may use the DCA for:

- A dependent under federal tax law who is a child under the age of 13
- Your spouse or dependent under federal tax law who is physically or mentally incapable of caring for himself/herself and lives with you for more than one-half of the taxable year

## Reimbursable Expenses

Go to [irs.gov](https://www.irs.gov) for information about expenses that may be reimbursed through the DCA: IRS Publication 503, Child & Dependent Care Expenses.

You must enroll if you want to participate in the DCA.



## Use It or Lose It

You must use your DCA contributions for eligible expenses during the calendar year for which the election is made. Because of tax laws, any amount remaining in your account at year-end is forfeited. You must submit all claims for reimbursement by March 31 of the next plan year. If you leave Lubrizol during the year, only eligible expenses incurred through the date of termination and submitted for reimbursement within 90 days of termination will be reimbursed.

## QUESTIONS?

Contact Included Health for assistance at **1-855-431-5532** or [includedhealth.com/lubrizol](https://includedhealth.com/lubrizol). To access your DCA, visit [umr.com](https://umr.com).

# Retirement Savings

Lubrizol offers a robust defined contribution program for its U.S. employees.

The Lubrizol Corporation Profit Sharing and Savings Plan (PSSP) offers a traditional 401(k) with a generous Lubrizol match, as well as an age-weighted defined contribution component funded entirely by Lubrizol. The plan is administered by Empower Retirement. Learn more, enroll and access your retirement savings account at [mylubrizolretirement.com](https://mylubrizolretirement.com) or by phone at **1-833-698-0797**, Monday through Friday, 8 a.m. to 10 p.m. ET and Saturday, 9 a.m. to 5:30 p.m. ET.



	401(k)	AWDC																
<b>Two great features</b>	The 401(k) <b>combines Lubrizol and employee contributions</b> to provide tax-advantaged retirement savings.	The AWDC is <b>funded entirely by Lubrizol</b> . It is a generous benefit that few companies offer.																
<b>Enrollment made easy</b>	You are <b>automatically enrolled within 30 days</b> of your hire date at 6% of eligible pay.  Lubrizol automatically increases your contribution by 1% each July until you reach 10%. This is called auto-escalation. You may change your contribution rate at any time.	You are <b>automatically enrolled</b> upon your hire date.																
<b>Generous Lubrizol contributions</b>	Lubrizol <b>matches 401(k) contributions dollar for dollar</b> , up to 6% of eligible pay (subject to IRS limits). That is an automatic 100% return on investment, plus any earnings realized. You can maximize your savings by contributing at least 6% to get the 100% matching contribution from Lubrizol.  You may contribute up to 75% of your eligible pay on a <b>before-tax, Roth or after-tax basis, up to annual IRS limits</b> . If you are age 50 or older at the end of the calendar year, you may also make catch-up contributions.	Lubrizol makes an <b>annual contribution of 3% to 7.5%</b> of eligible pay based on your age as of December 31 of each year. <table border="1" data-bbox="932 1115 1487 1419"> <thead> <tr> <th>Age (as of Dec. 31)</th> <th>Lubrizol Contributions (% of eligible pay)</th> </tr> </thead> <tbody> <tr> <td>35 and younger</td> <td>3.00%</td> </tr> <tr> <td>36 – 40</td> <td>3.75%</td> </tr> <tr> <td>41 – 45</td> <td>4.50%</td> </tr> <tr> <td>46 – 50</td> <td>5.25%</td> </tr> <tr> <td>51 – 55</td> <td>6.00%</td> </tr> <tr> <td>56 – 60</td> <td>6.75%</td> </tr> <tr> <td>61 and older</td> <td>7.50%</td> </tr> </tbody> </table> Contributions are generally deposited by March 15 of the following year.	Age (as of Dec. 31)	Lubrizol Contributions (% of eligible pay)	35 and younger	3.00%	36 – 40	3.75%	41 – 45	4.50%	46 – 50	5.25%	51 – 55	6.00%	56 – 60	6.75%	61 and older	7.50%
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<b>It's your money</b>	You are <b>automatically 100% vested</b> in your contributions, Lubrizol's matching contributions and any investment earnings.	You <b>vest based on years of service</b> – 34% after one year, 67% after two years, and 100% after three years.																
<b>Invest your way</b>	You can invest your funds in <b>a variety of investment options</b> available through Empower, and you may change your investments at any time.																	



In partnership with Empower, at no cost to you, Lubrizol is sponsoring financial planning sessions. Access this valuable resource anytime by contacting Empower at **1-833-301-9355** or scheduling an appointment at [lubrizolcfp.empowermytime.com](https://lubrizolcfp.empowermytime.com).

# Life Insurance

## COMPANY-PROVIDED LIFE INSURANCE

Lubrizon pays the full cost of basic life insurance for you. Your coverage is the greater of \$50,000 or two times your eligible pay, up to \$1 million. Coverage is provided through Securian.

If your eligible pay is more than \$25,000, the premiums Lubrizon pays for your coverage in excess of \$50,000 are treated as taxable income to you. During enrollment, you have the option to limit your coverage to \$50,000 to avoid this tax. If your eligible pay is \$25,000 or less, taxes do not apply to any portion of the Lubrizon-paid premiums.

## SUPPLEMENTAL LIFE INSURANCE

You may purchase supplemental life insurance coverage (Term Life) for yourself and your dependents through Securian. You pay the cost for this coverage through payroll deductions.



SUPPLEMENTAL LIFE INSURANCE			
COVERAGE FOR	Coverage Options	Cost of Coverage	Evidence of Insurability (EOI) Requirements
<b>You</b>	1 to 8 times your eligible pay, up to \$2 million benefit	Depends on your age and the amount of coverage you choose	New elections and additional coverage amounts may require you to provide EOI that is satisfactory to Securian before the coverage can become effective.
<b>Your Spouse/Eligible Domestic Partner</b>	\$10,000 increments, up to \$250,000	Depends on your spouse's or domestic partner's age and the amount of coverage you choose	New elections and additional coverage amounts may require you to provide EOI that is satisfactory to Securian before the coverage can become effective.
<b>Your/Your Domestic Partner's Eligible Child(ren)<sup>1</sup></b>	\$5,000 or \$10,000 per child between the age of 14 days and 26 years	Depends on the amount of coverage you choose	Not required for child coverage.

<sup>1</sup> Certain criteria must be met for children to be considered eligible dependents for supplemental life insurance. Please refer to criteria posted at [benefits.lubrizon.com](https://benefits.lubrizon.com).

# Other Financial Benefits

Lubrizon provides income protection if you are unable to work due to illness or injury.

## SHORT TERM DISABILITY

You might be eligible to receive Short Term Disability benefits (based on your location's policies) if you are unable to work for a period of time because of illness or injury.

## LONG TERM DISABILITY

Lubrizon provides basic Long Term Disability coverage equal to 60% of eligible base pay at no cost to you. You can choose to increase your coverage to 70% of eligible base pay. You pay the cost of additional coverage through pre-tax payroll deductions. The estimated cost for additional coverage is available at [go.lubrizon.com/BenefitsEnrollment](https://go.lubrizon.com/BenefitsEnrollment) (or [Lubrizon.BenefitsNow.com](https://Lubrizon.BenefitsNow.com) from outside the Lubrizon network) or by calling the Lubrizon Benefits Center. Coverage is provided by The Hartford.



# Did You Know Lubrizol Also Offers

Lubrizol is proud to be a great place to work and build a career, and we continually seek better benefits and policies that will enhance our workplace and make it easier to achieve high-quality results.

## SUPPORT FOR YOUR MENTAL HEALTH

The *Essentials* Balance Program, your employee assistance program through Optum, offers you and your family members free and confidential access to counseling services, financial and legal advice, family and relationship support, and more. You and your family members can each get up to six in-network counseling visits per event, per calendar year.

Specialists are available by phone 24/7 to assist you with a variety of issues at home, work and beyond. An experienced EAP consultant can help you take action to:

- Manage stress
- Find support for anxiety, depression or substance abuse
- Improve relationships
- Find childcare or elder care resources
- Get advice on finances
- Access legal services
- Find other resources or support

Visit [liveandworkwell.com](https://liveandworkwell.com) or call **1-866-248-4094** to learn more. Access code: Lubrizol.



**As part of the *Essentials* Balance Program**, you have free access to mobile apps and other resources for extra support. Learn more on [page 8](#).

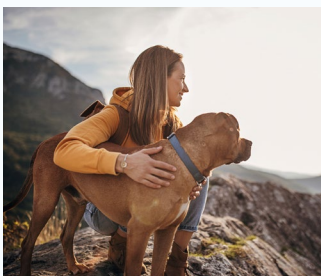
## PARENT AND FAMILY RESOURCES

Your Lubrizol benefits include programs and resources beneficial to new parents and parents-to-be, including fertility benefits, adoption assistance, parental leave, and more. You also have access to BenefitBump for help understanding and maximizing these benefits. View [The Essential Guide to Your Parent and Family Resources](#) for more information.

## VACATION BUY PROGRAM

Lubrizol's Vacation Buy Program lets you add to your regular vacation benefits. Program availability is based on your location's policies and whether you are covered under a collective bargaining agreement.

You are not eligible to participate in this program in the year you are hired unless your employment began on January 1.



### How the Vacation Buy Program Works

- You must enroll each year if you want to participate.
- You may buy up to five additional vacation days as long as your regular vacation allowance is less than the maximum allowed at your location. A vacation day is defined as eight hours.
- Pay for your additional vacation days through equal payroll deductions throughout the year. The amount deducted from your biweekly pay will change to reflect any pay change you receive throughout the year.
- Plan carefully: Generally, you lose any vacation time you do not use by year-end, even days you buy.



## QUESTIONS?

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). For all other questions related to your benefits, contact Included Health at **1-855-431-5532** or send a benefits request in MyHR.

### 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>Dental</b> MetLife (PDP network)	<b>1-800-942-0854</b>	<a href="https://metlife.com/dental">metlife.com/dental</a>
<b>Vision</b> EyeMed (Access network)	<b>1-866-723-0513</b>	<a href="https://eyemed.com">eyemed.com</a>
<b>BenefitBump</b>	<b>1-888-286-7314</b>	<a href="https://mybenefitbump.com">mybenefitbump.com</a>
<b>Essentials Balance Program and EAP</b>	<b>1-866-248-4094</b>	<a href="https://liveandworkwell.com">liveandworkwell.com</a>
<b>HealthyLife® QuitWell™ tobacco cessation program</b>	<b>1-800-345-2476</b>	<a href="https://corehealthylife.com/healthcoaching">corehealthylife.com/healthcoaching</a>
<b>Included Health Virtual Medical and Behavioral Health Care</b>	Download the Included Health app and click "Get Care."	
<b>Real Appeal</b> Weight-loss program	<b>1-844-924-7325</b>	<a href="https://lubrizon.realappeal.com">lubrizon.realappeal.com</a>
<b>FINANCIAL</b>		
<b>Dependent Care Account</b> UMR	<b>1-855-431-5532</b> Included Health will assist you.	<a href="https://umr.com">umr.com</a>
<b>Lubrizon Profit Sharing &amp; Savings Plan</b> Empower Retirement	<b>1-833-698-0797</b>	<a href="https://mylubrizonretirement.com">mylubrizonretirement.com</a>
<b>Supplemental Life Insurance (Term Life)</b> Securian	<b>1-877-491-5265</b> for customer service <b>1-888-658-0193</b> to file a claim	<a href="https://LifeBenefits.com">LifeBenefits.com</a>
<b>Short-Term &amp; Long-Term Disability</b> The Hartford	<b>1-866-712-3510</b>	<a href="https://abilityadvantage.thehartford.com">abilityadvantage.thehartford.com</a>
<b>Berkshire Hathaway Pension Service Center</b>	<b>1-877-459-2403</b>	<a href="https://eepoint.com/bhcpp">eepoint.com/bhcpp</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 enrolling in your benefits, please contact the Lubrizon Benefits Center at **1-844-747-1641**. For more information about your benefits, contact Included Health at **1-855-431-5532** and all other benefits-related questions send a benefits request in MyHR.