



Your 2022 Benefits

Annual Enrollment

MOVE CLEANER
CREATE SMARTER
LIVE BETTER



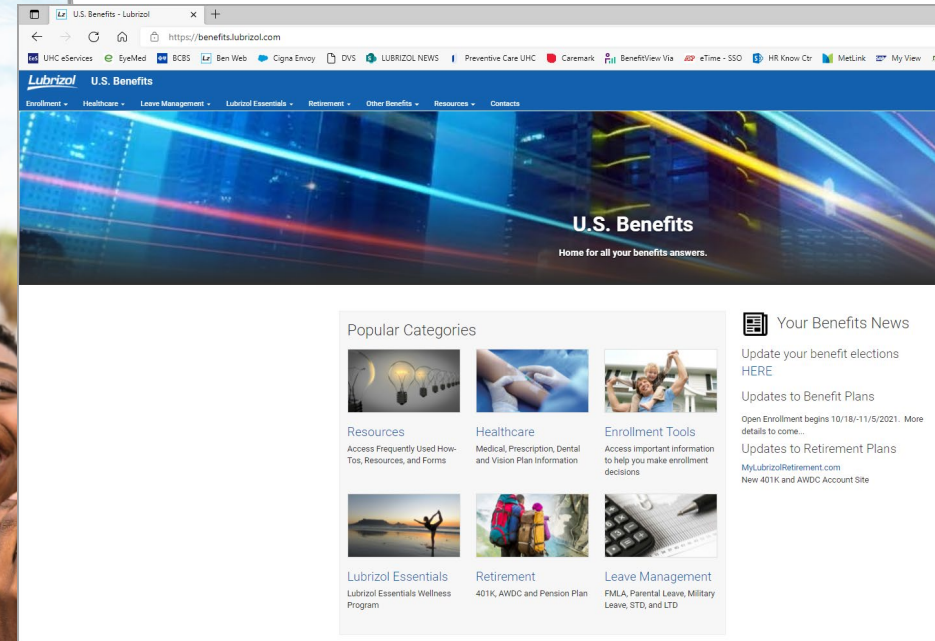
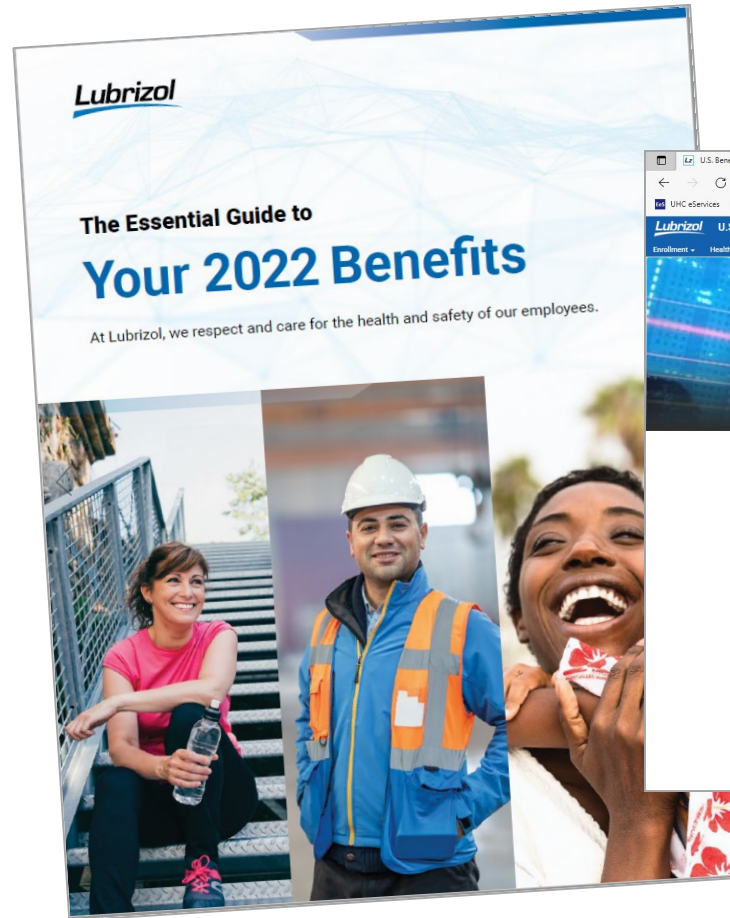
What we'll be talking about today...

- Enrollment Basics
- Items to Elect
- Benefit Resources



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Enrolling for Your 2022 Benefits



benefits.lubrizol.com

Who's Eligible?





MAKE
SMART
CHOICES

Annual Enrollment

October 18 - November 5

2021



MAKE
SMART
CHOICES



HOW TO ENROLL

Enroll online at
Lubrizol.BenefitsNow.com
or call the Lubrizol Benefits
Center at **1-844-747-1641.**



MAKE
SMART
CHOICES

What to Know and Do

Elections Default to 2021 Coverage

NO ACTION REQUIRED

- Medical/Prescription Drug, Dental and Vision
- Life Insurance (Basic & Supplemental) and LTD
- Medical & Tobacco Surcharges

Elections Default to No Coverage

ACTION REQUIRED

- Health Savings Account
- Employee Contribution
- Dependent Care Account
- Employee Contribution
- Vacation Buy



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Dependent Verification

Your 2022 Benefit Choices

Benefit Program		Benefit Options	
HEALTH	Medical and Prescription Drug	<ul style="list-style-type: none"> • Core • Standard • Plus • No coverage 	All plans use the UnitedHealthcare Choice Plus Network
	Dental	<ul style="list-style-type: none"> • Comprehensive • Network PPO • No coverage 	
	Vision	<ul style="list-style-type: none"> • Comprehensive • No coverage 	
FINANCIAL	Dependent Care Account (DCA)	<ul style="list-style-type: none"> • Contribute to the DCA • No participation 	
	Basic Life Insurance	Lubrizol provides coverage equal to \$50,000 or two times your eligible pay (whichever is greater), up to \$1 million	
	Supplemental Life Insurance	Term Life Insurance – The Hartford <ul style="list-style-type: none"> • Supplemental coverage for you from one to eight times your eligible pay, up to \$2 million • Coverage for your spouse/domestic partner in \$10,000 increments, up to \$250,000 • Coverage for your child(ren) of \$5,000 or \$10,000 per eligible child • No coverage 	
	Income Protection (or Disability)	<ul style="list-style-type: none"> • Lubrizol provides STD coverage • Lubrizol provides LTD coverage equal to 60% of your eligible base pay • You can increase your coverage to 70% of your eligible base pay 	
BALANCE	Vacation Buy Program – Where Applicable	<ul style="list-style-type: none"> • Buy up to five days (1 day = 8 hours) • No participation 	





2022 Benefit Highlights



Vision plan benefits will improve to cover frames every 12 months (instead of every 24 months).



Health Savings Account (HSA) contribution limits will increase, which means you can save more money to pay for eligible health care costs tax-free.



Contributions for your medical/prescription drug and vision plans will remain unchanged. Dental contributions will increase slightly.

No changes to annual deductible or out-of-pocket maximums for all three medical plans!



Medical & Prescription Drug Coverage

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

**NO ACTION
REQUIRED**
Elections Default
to 2021 Coverage

Compare plans at
benefits.lubrizol.com

¹ All covered expenses, including medical, prescription drug, behavioral health and substance abuse treatment expenses, will be applied to the annual deductible and annual out-of-pocket maximum.

² For the Core plan only, 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.

³ Members of the Lubrizol OOA will pay 20% for network or non-network providers. If a network provider is used, network discounts will apply.



Considerations in Choosing a Plan

- Are you eligible to participate in a Health Savings Account?
- What were your medical and prescription expenses in 2021?
- What are your anticipated expenses for 2022?
- Are you planning to change providers?
- What will your HSA balance be on December 31, 2021?

HEALTH



ACTION REQUIRED
Update Your Contribution Level

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 or optumbank.com.

IRS Annual Contribution Limit
\$3,650 Single | \$7,300 Family

Your Health Savings Account

HSAs are individually-owned bank accounts

- The account belongs to you.
- Unspent money in your account carries over from year to year.
- It remains yours even if you change jobs or retire.

HSAs are used to help pay for both current and/or future health care expenses

- You can withdraw money tax-free for qualified health expenses for you, your spouse and your eligible dependents.
- Or you can save funds to pay for future expenses.
- You can continue to use funds even if you stop contributing.

HSAs are triple tax-advantaged

- Contributions are made pre-tax, Funds can grow tax free and withdrawals for qualified medical expenses are tax-free.

Right Care, Right Place, Right Time

WHERE TO GO FOR CARE		
TYPE OF PROVIDER	Reasons to Go	How to Contact
Primary Care Physician (PCP)	Routine care, preventive care and help managing chronic conditions.	Contact Health Advocate at 1-866-799-2731 or healthadvocate.com/Lubrizon to find a PCP in your plan's network.
UnitedHealthcare Virtual Visits	Diagnosis and treatment of non-emergency medical conditions 24/7.	See a doctor using your mobile device or computer at myuhc.com .
Convenient Care Clinic	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 Health Advocate at 1-866-799-2731 or healthadvocate.com/Lubrizon to find a network location near you.
Urgent Care	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 Health Advocate at 1-866-799-2731 or healthadvocate.com/Lubrizon to find a network location near you.
Emergency Room (ER)	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.



How to Fill Your Prescriptions

Retail Pharmacy	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).
Mail Order Program	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).
Maintenance Choice Program	You can purchase a 90-day maintenance prescription at a CVS retail pharmacy for the same cost as mail order. Call CVS/caremark at 1-844-742-5087 to see if your prescription is on the maintenance list.



Save on Your Prescription Drugs

Generics	Save big with generics. 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.)
Mail Order or Maintenance Choice Program	Use mail order or the Maintenance Choice Program for your maintenance medications. These programs are mandatory for maintenance medications after the first two fills at a retail network pharmacy.
CVS/caremark App	Download and use the CVS/caremark app to check drug costs, search for lower-cost alternatives, and more.



Dental Coverage


COMPARE YOUR DENTAL BENEFITS

FEATURE	Lubrizol Comprehensive Dental Option	Lubrizol Network PPO Dental Option
Annual Deductible	\$25 per person • \$75 per family	\$50 per person • \$150 per family
Annual Maximum Benefit	\$2,000	\$1,000
Orthodontia Lifetime Maximum Benefit	\$1,500 per child	\$1,000 per child
	You Pay	You Pay
Preventive Care <ul style="list-style-type: none"> • Oral exams (two per year) • Cleanings • X-rays 	\$0 (annual deductible does not apply)	\$0 (annual deductible does not apply)
Basic <ul style="list-style-type: none"> • Fillings • Extractions 	20% after annual deductible	Network: 20% after annual deductible Non-Network: 50% after annual deductible
Major Restorative <ul style="list-style-type: none"> • Crowns • Inlays • Dentures 	50% after annual deductible	50% after annual deductible
Orthodontia <ul style="list-style-type: none"> • Children under age 26 	50%	50%



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Vision Coverage

FEATURE	Network Member Cost (What You Pay)	Out-of-Network Benefit (What the Plan Will Reimburse You)
Exam with Dilation as Necessary Once every 12 months	\$0 copay	Up to \$35
Retinal Imaging	Up to \$39	\$0
Standard Contact Lens Fit and Follow-up	Up to \$55	\$0
Premium Contact Lens Fit and Follow-up	90% of retail price	\$0
Eyeglass Frames  Once every 12 months	\$0 copay, 80% of charge over \$150	Up to \$75
Standard Plastic Lenses Once every 12 months instead of contact lenses <ul style="list-style-type: none"> • Single vision • Bifocal • Trifocal • Standard progressive • Premium progressive 	\$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
Lens Options Paid by member and added to the base price of the lenses <ul style="list-style-type: none"> • Tint (solid and gradient) • UV coating • Standard scratch resistance • Standard polycarbonate • Standard anti-reflective • Polarized • Other add-ons and services 	\$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
Contact Lenses (Materials Only) Once every 12 months instead of standard plastic lenses <ul style="list-style-type: none"> • Conventional • Disposable • Medically necessary* 	\$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
Lasik and PRK Vision Procedures	85% of retail price or 95% of promotional pricing	\$0



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**ACTION
REQUIRED**

Update Your
Contribution
Level

Dependent Care Account

Eligible Dependents

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 incapable of caring for himself/herself and lives with you for more than one-half of the taxable year



Life Insurance





FINANCIAL

Life Insurance

SUPPLEMENTAL LIFE INSURANCE

COVERAGE FOR	Coverage Options	Cost of Coverage	Evidence of Insurability (EOI) Requirements
You	1 to 8 times your eligible pay, up to \$2 million	Depends on your age and the amount of coverage you choose	<ul style="list-style-type: none">If you are currently participating in this coverage, you may increase your coverage by 1 times your annual earnings, not to exceed the lesser of 3 times your annual earnings or \$600,000, without providing EOI.New elections and additional coverage amounts will require you to provide EOI that is satisfactory to The Hartford before the coverage can become effective.
Your Spouse/ Eligible Domestic Partner	\$10,000 increments, up to \$250,000	Depends on your spouse's or domestic partner's age and the amount of coverage you choose	<ul style="list-style-type: none">If you are currently participating in this coverage you may increase your spouse's current coverage by \$10,000, not to exceed \$30,000, without providing EOI.New elections and additional coverage amounts will require you to provide EOI that is satisfactory to The Hartford before the coverage can become effective.
Your/Your Domestic Partner's Eligible Child(ren)	\$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.

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Short & Long Term Disability





**ACTION
REQUIRED**
Update Your
Contribution
Level

Vacation Buy Program

- Must enroll each year if you want to participate.
- May buy up to five additional vacation days as long as regular vacation allowance is less than the maximum allowed at your location. A vacation day is defined as eight hours.
- Additional vacation days are paid through equal payroll deductions throughout the year. Amount deducted from biweekly pay will change to reflect any pay change received throughout the year.
- Generally lose any vacation time not used by year-end—even days bought.



RESOURCES

Resources to Help You Live Better

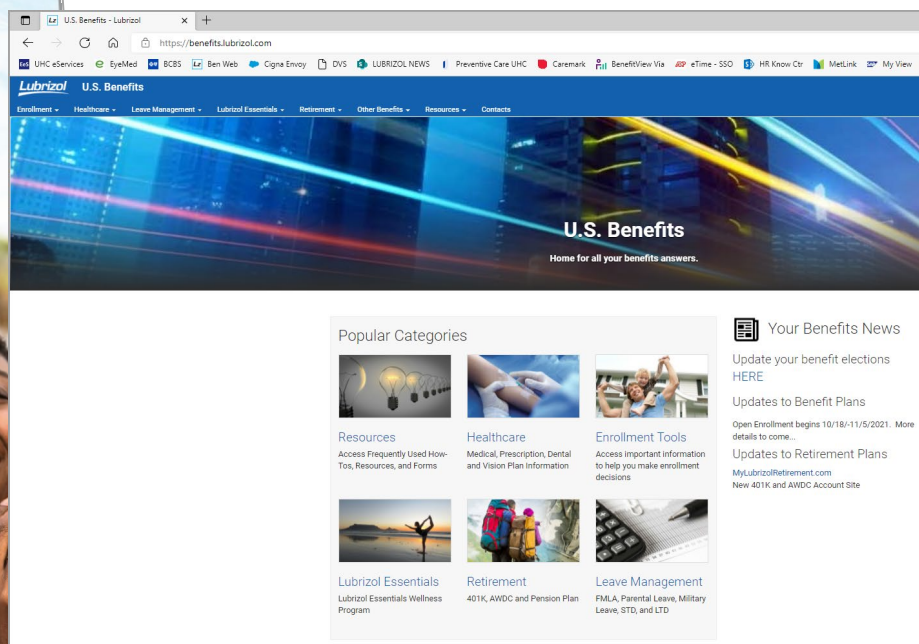
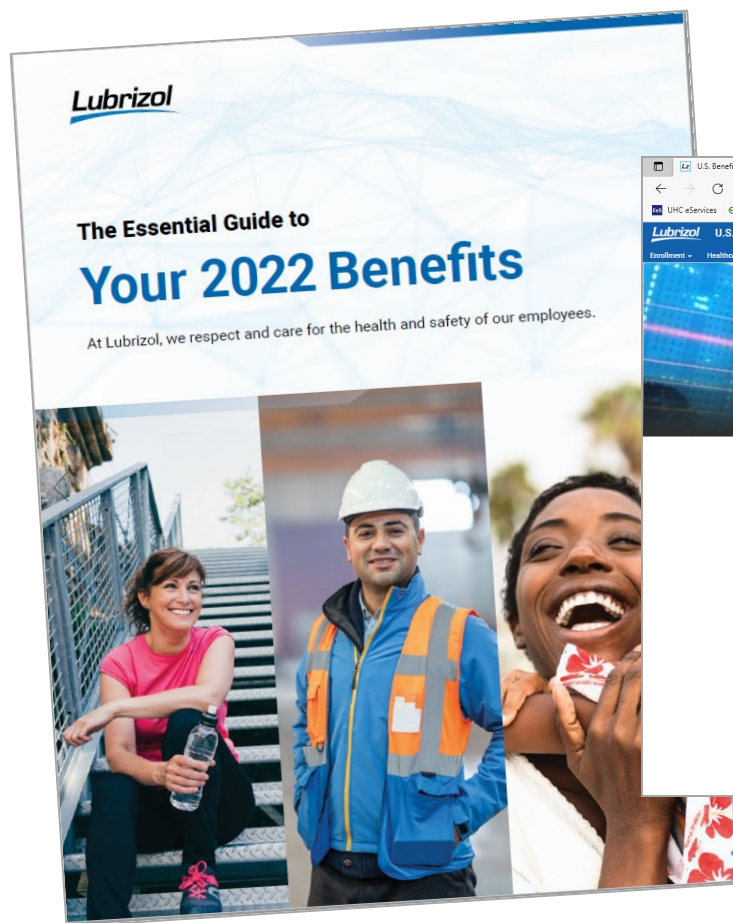
Health Advocate	UnitedHealthcare Virtual Visits	Essentials Balance (Employee Assistance Program (EAP))	Talkspace
<p>Contact Health Advocate for all your benefit-related questions. A Personal Health Advocate can help you understand your benefits, access services, resolve insurance-related issues, find network providers, and more. Available to benefit-eligible employees and their eligible family members. Visit healthadvocate.com/Lubrizol or call 1-866-799-2731, 8 a.m. to midnight ET.</p>	<p>A virtual visit lets you see and talk to a doctor from your mobile device or computer anytime without an appointment. Doctors can diagnose and treat a wide range of non-emergency medical conditions. Available to employees and dependents enrolled in Lubrizol health coverage. Learn more and access virtual visits at myuhc.com.</p>	<p>The <i>Essentials Balance</i> Program administered by OptumHealth offers resources to help you live well, be well and work well. Resources are free, confidential and available 24 hours a day, seven days a week. Visit liveandworkwell.com or call 1-866-248-4094 to learn more. Access code: Lubrizol.</p>	<p>Reach out to a licensed, in-network EAP 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.</p>
Sanvello	HealthyLife® QuitWell™	UnitedHealth Premium Program	
<p>Access a variety of tools to help reduce symptoms of stress and depression. Download the app at liveandworkwell.com (access code: Lubrizol).</p>	<p>You and your family members can quit tobacco for good with support from the HealthyLife® coaching program. Enroll at corehealthylife.com/healthcoaching.</p>	<p>Quality of care is important. To help you make informed choices about your health care, the UnitedHealth Premium program recognizes doctors who meet quality and cost efficiency guidelines. Find a doctor's Premium designation at myuhc.com.</p>	



Resources to Help You Live Better

Real Appeal	The Berkshire Hathaway Pension Service Center	benefits.lubrizol.com/ resources	Empower Retirement
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 .	Supported by Willis Towers Watson, the Pension Service Center is your contact for benefit estimates and estimate 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).	This is your one stop for all your benefit resources, including enrollment tools, contacts, support documents, and much more.	Access and manage your Lubrizol 401(k) and AWDC accounts, make transactions, get professional investment advice and more at 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.

Helpful Resources



benefits.lubrizol.com



What Questions Do You Have?



LUBRIZOL BENEFITS CENTER

To enroll or ask benefit questions, call **1-844-747-1641**
10 a.m. – 7 p.m. ET or visit
Lubrizol.BenefitsNow.com.

email: **benefits@lubrizol.com**