



Lubrizol

### THE ESSENTIAL GUIDE TO

# YOUR 2024 BENEFITS

Live Well. Be Well.

For s

FOR STUDENT INTERNS AND CO-OP EMPLOYEES



## 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

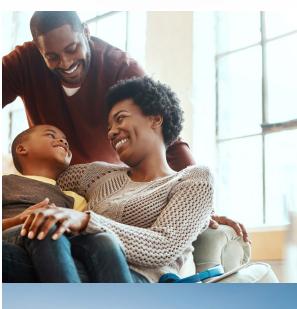
Get help to understand your choices and make confident enrollment decisions.

- **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.



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.





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## **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 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**

#### **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. 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 (or 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. Visit the Benefits website at **benefits.lubrizol.com** for contribution amounts or **page 10** 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** for more details. If your doctor says HealthyLife® QuitWell<sup>™</sup> 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	<ul> <li>and chronic health conditions clinician, nurse care manager,</li> <li>Obtain prescription drug sup</li> <li>Get quick answers to medica and support from an Included</li> <li>Understand the details of you</li> <li>Get answers to your billing of before you pay.</li> <li>Determine which of your bern different health benefits availa</li> <li>Find a primary care physicial find trusted and experienced of</li> </ul>	
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.	<ul> <li>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:</li> <li>Connect face-to-face with your therapist or psychiatrist from your phone, tablet or computer.</li> <li>Find the right therapist or psychiatrist for you from a diverse network of providers and specialists.</li> <li>Stop waiting days or weeks for an appointment and connect with an Included Health provider that is available every day of the year.</li> <li>It's easy to get started. Just download the Included Health app and click "Get Care."</li> </ul>

Activate your account at **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** or call **1-866-248-4094** to learn more. Access code: Lubrizol.

coaching program. Enroll at corehealthylife.com/healthcoaching.

#### 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**. Access code: Lubrizol.

QUIT TOBACCO

**HEALTHIER** 

AND LOSE

WEIGHT

LIVE

#### Real Appeal

HealthyLife<sup>®</sup> QuitWell<sup>™</sup>

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**.

You and your family members can guit tobacco for good with support from the HealthyLife®

## 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	
Primary Care Physician (PCP)	Routine care, preventive care and help managing chronic conditions.	Contact Included Health at <b>1-855-431-5532</b> or <b>includedhealth.com/lubrizol</b> to find a PCP in your plan's network.	
Included Health Virtual Visits	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."	
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 Included Health at <b>1-855-431-5532</b> or <b>includedhealth.com/lubrizol</b> 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 Included Health at <b>1-855-431-5532</b> or <b>includedhealth.com/lubrizol</b> 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.	



#### **Preventive Care is Essential Care**

Preventive care is vital to maintaining good health, managing risk factors and detecting health issues early. Your medical 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 14**.

## 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** 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**.

#### **COMPARE YOUR MEDICAL AND PRESCRIPTION DRUG BENEFITS**

FEATURE	Core <sup>1</sup>	Standard	Plus		
FEATORE	Individual • 2-person • Family	Individual • 2-person • Family	Individual • 2-person • Family		
Lubrizol's Annual HSA Contribution	N/A	\$500 • \$750 • \$1,000	\$1,000 • \$1,500 • \$2,000		
	You Pay	You Pay	You Pay		
Preventive Care		\$0			
Annual Deductible <sup>2</sup>	\$4,250 • \$6,375 • \$8,500	\$3,250 • \$4,875 • \$6,500	\$2,250 • \$3,375 • \$4,500		
Annual Out-of-Pocket Maximum	\$5,750 • \$7,875 • \$10,000	\$4,750 • \$6,375 • \$8,000	\$3,750 • \$4,875 • \$6,000		
Biweekly Contribution <sup>3</sup>	\$0•\$17•\$25	\$31 • \$86 • \$122	\$74.12 • \$176.34 • \$253.28		
Surcharges	Medical: \$45 Tobacco: \$35				
<b>Medical Coinsurance</b> Network Non-network	20% 40%				
Emergency Room Visits	20%				
Hearing	Hearing aid, hearing aid exams and diagnostic hearing care (not preventive) have \$500 limit, payable every two years				
		Preventive: 0%			
Prescription Drug –	Generic: 10%				
Retail and Mail Order <sup>4</sup>	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**.

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	<b>COMPREHENSIVE COVERAGE</b> 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	<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 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**



#### 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.



#### **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.

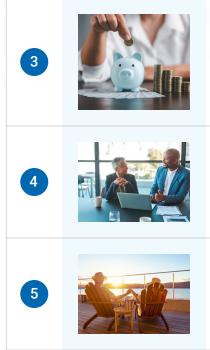
#### **HSA CONTRIBUTION AMOUNTS**

	Lubrizol Contributes <sup>1</sup>	You Can Contribute	IRS Annual Limits <sup>2</sup>	Catch-Up Contribution
COVERAGE	Individual • 2-person • Family	Individual • 2-person • Family	Individual • 2-person • Family	
Core	\$0•\$0•\$0	\$4,150 • \$8,300 • \$8,300	\$4,150 • \$8,300 • \$8,300	Contribute en additional
Standard/00A	\$500•\$750•\$1,000	\$3,650 • \$7,550 • \$7,300	\$4,150 • \$8,300 • \$8,300	Contribute an additional \$1,000 if you are age 55
Plus	\$1,000 • \$1,500 • \$2,000	\$3,150 • \$6,800 • \$6,300	\$4,150 • \$8,300 • \$8,300	or older in 2024

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



#### **USE IT OR LET IT GROW**

Use your HSA to help manage your deductible and to pay for eligible expenses taxfree 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**.

#### 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.

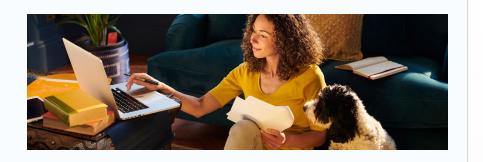
#### **ROLL IT OVER**

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** or **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**.

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:

Retail Pharmacy	1	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	2	The mail order option allows you to purchase up to a 90-day supply of your medication (with up to three refills per year).
Maintenance Choice Program (90-day Supply)	3	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

Generics	<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.
Generics	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.
Maintenance Choice Program (90-day Supply)	<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.



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





#### **QUESTIONS?**

To enroll or ask benefit questions, call **1-844-747-1641** 10 a.m. – 7 p.m. ET or visit **go.lubrizol.com/BenefitsEnrollment** (or **Lubrizol.BenefitsNow.com** from outside the Lubrizol 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	
HEALTH			
Included Health Your first call for all benefits-related questions	1-855-431-5532	includedhealth.com/lubrizol	
<b>Medical</b> UMR, Utilizing UnitedHealthcare Choice Plus Network	1-855-431-5532 Included Health will assist you.	includedhealth.com/lubrizol	
Health Savings Account Optum Bank	1-866-234-8913	<b>umr.com</b> for single sign-on to Optum Bank or <b>optumbank.com</b>	
Prescription Drug CVS/caremark	1-844-742-5087	caremark.com	
Essentials Balance Program and EAP	1-866-248-4094	liveandworkwell.com	
HealthyLife® QuitWell™ tobacco cessation program	1-800-345-2476	corehealthylife.com/healthcoaching	
Included Health Virtual Medical and Behavioral Health Care	e Download the Included Health app and click "Get Care."		
Real Appeal Weight-loss program	1-844-924-7325	lubrizol.realappeal.com	

**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 Lubrizol. While it is Lubrizol'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 Lubrizol 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.