




Introducing
Via Benefits

**Your Guide to
Individual and Family
Health Plan Options**



Make your coverage
decisions before
January 1, 2025

Lubrizol

We're Here To Assist You

Via Benefits makes it easy to use our services to find coverage. We've helped over 2.3 million people review, choose, and enroll in new coverage and we're ready to help you, too.

Our services and website are built to help you:

- Assess your health insurance needs
- Understand your choices
- Shop and enroll in new coverage

You can use our website, speak to the Via Benefits Care Team over the phone, or do a little of both. You decide what works best for you.

To get started, follow these steps:

1. Sign up with Via Benefits at marketplace.viabenefits.com/lubrizon.
2. Call 1-866-356-8150 to conduct a Pre-Enrollment Assessment.

You are welcome to call us if you have questions, don't use a computer, or would like to enroll in any of our Protection plans (more information on page 16).

Here's how to contact us:



Visit: marketplace.viabenefits.com/lubrizon



Call: 1-866-356-8150 | (TTY: 711)

Monday through Friday

8:00 a.m. to 7:00 p.m. Eastern Time

Access our Privacy Policy at marketplace.viabenefits.com/about/privacy-policy. Contact us if you have questions or concerns about our Privacy Policy.

We Work for You and Your Family

Navigating insurance options is our super power. Via Benefits helps you find a health plan that meets your specific needs, covers your prescription drugs, and works within your budget. Our decision-support tools, personalized customer support, and quality plan options help you review, choose, and enroll in coverage.

No matter what type of plans you are seeking, Via Benefits can guide you through the process. We're here to answer your questions and help you make the right choice for you and your family.

Knowledgeable assistance

Via Benefits Care Team are health insurance specialists and will guide you through your options.

Quality plan options

The Via Benefits marketplace includes plans on **healthcare.gov**, private stand-alone plans, and plans offered through state-based exchanges. **We also have Protection plans to shield you from unexpected health costs.**

We look forward to helping you.



Via Benefits Overview



Pre-Enrollment Checklist

- Create a Via Benefits Profile.
marketplace.viabenefits.com/lubrizol
 - Include providers, prescriptions, pharmacies.
 - Add email address and update preferences.
- Complete your Pre-Enrollment Assessment by calling 1-866-356-8150.
 - Schedule your enrollment appointment during the call.

Visit: marketplace.viabenefits.com/ford

Under the headline of **Videos**, select **Start Watching** and view the videos in the **Pre-Enrollment** tab.



Enrollment Checklist

- Call us at your scheduled appointment time.
- Or, enroll using the Via Benefits website.

Visit: marketplace.viabenefits.com/lubrizol

Under the headline of **Videos**, select **Start Watching** and view the videos in the **Enrollment** tab.



Post-Enrollment Checklist

- Watch for communications from the carrier about your new coverage.

Visit: marketplace.viabenefits.com/lubrizol

Under the headline of **Videos**, select **Start Watching** and view the videos in the **Post-Enrollment** tab.



Lowering Your Costs

As you consider your new coverage, you may have more than one option to help with your health insurance costs.

Federal Subsidies

Subsidies in the forms of a Premium Tax Credit (PTC) or Cost-Sharing Reduction (CSR) help eligible individuals and families cover the premiums for health insurance purchased through the Health Insurance Marketplace. To receive the federal subsidy, you need to meet federal income guidelines, and depending on your income level, you may have the option to take advantage of the subsidy.

Reimbursement Arrangement

A Reimbursement Arrangement is an account you can use to request reimbursement for any eligible post-tax expenses you and your eligible dependents incur. Your former employer or benefits provider will set up the arrangement and determine what rules govern it. **This choice won't apply to everyone, but there are some critical considerations if it does apply to you.**

Your Funding Decision

If you have the choice between a Reimbursement Arrangement or a federal subsidy, you'll need to decide whether it is more advantageous to accept one over the other. **By law, you are not allowed to have both a Reimbursement Arrangement and a federal subsidy at the same time.**

Via Benefits can help you understand your funding options and help you make your selection. If a funding arrangement is available to you and you choose it over a federal subsidy, you'll need to accept the funding arrangement on our website or speak with a Care Team member.

Funding types



Premium Tax Credit (PTC)

This federal subsidy lowers your monthly premium. It is based on household income and family size and is paid by the government directly to the health insurance carrier.



Cost-Sharing Reduction (CSR)

Specific plans include this federal subsidy, and it lowers what you pay in out-of-pocket costs such as deductibles, copays, and coinsurance. These extra savings are available only if you enroll in a plan from the Silver category if you qualify.



Reimbursement Arrangement (when offered)

This is a tax-free account you can use to request reimbursement for any qualified post-tax expenses incurred. Your former employer or benefits provider creates the reimbursement arrangement and decides what expenses, including premiums, qualify for reimbursement.



Qualifying for a federal subsidy

The following table outlines the annual household income levels required to qualify for a PTC or CSR in 2024. The chart below is an average for all 50 states. Qualifying income levels differ for different states; contact Via Benefits for your state's specific ranges.

- Between \$14,580 and \$58,320 for individuals
- Between \$19,720 and \$78,880 for a family of two
- Between \$30,000 and \$120,000 for a family of four

If your income is:	Then:
Higher than these amounts...	You will probably not qualify for a PTC or CSR.
Within these amounts...	You may qualify for a PTC or CSR.
Lower than these amounts...	Your or your children may be eligible for other government programs, such as Medicaid or Children's Health Insurance Program (CHIP). Call Via Benefits to discuss your options.



The Inflation Reduction Act has temporarily, until 2025, expanded eligibility for Premium Tax Credits, so if your income is higher than the ranges shown above, you may still qualify.



Pre-Enrollment

Take time to consider:



Your medical needs – Do you or someone in your family have a chronic condition, such as asthma, diabetes, or heart disease? Understanding what services and care you might need for the coming year will help you decide which plan type is right. It's important to know you won't be denied coverage based on any preexisting condition due to the Affordable Care Act.



Your doctors – Do you or your family have a primary care physician or specialist you'd like to continue seeing? Do you have any upcoming treatments or surgeries planned? If you have specific providers or facilities, you'll want to check if they're in the network of the plan you select.



Your prescription drugs – Are there prescription drugs you take regularly? Do you take any specialty drugs? You'll want to check if the plan's preferred drug list includes your drugs if you do. Finding plans with no or a low prescription drug deductible may be necessary. Via Benefits can help you factor these considerations into your new plan selection.

Gather your information

After you consider your needs, gather the following information to have on hand for the next two steps: creating your Profile on the Via Benefits website and conducting your Pre-Enrollment Assessment. These items will help to narrow your options as you learn more about the health insurance marketplace:

- Social Security numbers (or immigration document numbers) for all family members
- A list of prescription drugs, including dosage and frequency
- Names of doctors and facilities you wish to continue using
- An estimate of your annual household income



Create a Via Benefits Profile

Creating a Profile on our website helps you review, choose, and enroll in a plan based on your preferences. To set up your profile, sign into the Via Benefits website **marketplace.viabenefits.com/lubrizol** and Select **Go to Profile** and enter in your personal and health information.

When you sign into Via Benefits, we request you add a phone number to receive a code to ensure your identity. Once signed in, you may see that your former employer or benefits provider shared some of your information with us.

Conduct a Pre-Enrollment Assessment

We recommend contacting Via Benefits before Open Enrollment to start evaluating your options. You can conduct a Pre-Enrollment Assessment by speaking with our Care Team. During this assessment, you will review:

- How plans share costs, e.g., deductibles, copays, coinsurance
- How Protection plans can protect you from unexpected costs
- If you qualify for funding options to lower your costs

Conduct your assessment by calling the Via Benefits Care Team at 1-866-356-8150, Monday through Friday, 8:00 a.m. to 7:00 p.m. Eastern Time.

Insurance carriers update plans and pricing annually. Prices for plans will be available after insurance carriers make their updates.

Reviewing Individual and Family Plan Options

Getting to know the characteristics of each plan type will help you narrow your choices.

Health plans will:

- **Cover essential health benefits required by law.** These include preventive care, emergency care, outpatient care, hospitalization, mental health care, and prescription drugs.
- **Have a provider network that includes doctors and other health care providers.** These doctors and providers have agreed to see members under specific rules, including billing at lower rates. Almost all available plans will require you to use in-network providers for the service to be covered (most available plans won't cover out-of-network services, except in emergencies).
- **Pay different amounts of your medical expenses.** A plan that pays a smaller percentage of your costs will have a lower monthly premium, while a plan that pays more of your expenses will have a higher monthly premium.
- **Require a deductible.** Like your car insurance, most plans require you to pay a set dollar amount before the plan makes payments.
- **Require cost-sharing.** Once you've met your deductible, you'll likely be required to pay a portion of the cost of services through coinsurance or copay.

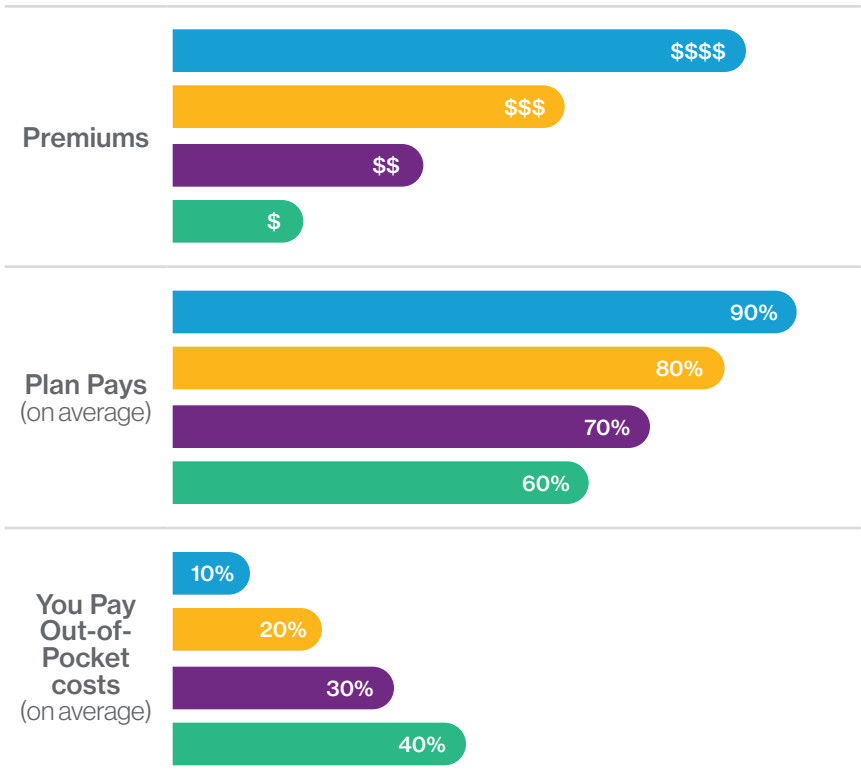




Plan categories

There are four categories of Individual and Family Plans: Platinum, Gold, Silver, and Bronze. These plans differ based on how you and the plan share the costs of your care, but not on the amount or quality of care you receive. Not all plan levels are available in every area. Via Benefits will help you discover what plans are available in your location.

 **Platinum** |  **Gold** |  **Silver** |  **Bronze**



\$\$\$\$ = Higher costs \$ = Lower costs

Types of health plan networks

Not all network types are available in every area.



Health Maintenance Organizations (HMOs)

This type of plan usually only pays for the care you receive within its network of doctors and hospitals. HMOs require a primary care physician (PCP) for treatment, coordination of care, and specialist referrals.



Point of Service (POS)

This type of plan allows you to get care inside and outside the network. You pay less if you use in-network doctors, hospitals, and other health care professionals. POS plans also require a referral from your PCP to see a specialist.





Exclusive Provider Organizations (EPOs)

This type of managed care plan requires the use of in-network services only, except for emergency care. You don't need a PCP or a referral from a PCP as long as you use in-network services.



Preferred Provider Organizations (PPOs)

PPOs allow you to get care both inside and outside your network. But when you use out-of-network health care professionals or facilities, you pay more than when you stay in-network. You don't need to get a referral from your PCP.



Deductible types

If you select a family plan, there are two ways the deductible could be calculated:

- **Embedded approach:** Each family member has an individual deductible to meet. If any one of you meets the individual deductible, the plan starts paying coinsurance for that person. If expenses for two or more of you reach the family deductible, all are considered to have met the limit, and then the plan will begin paying its share of eligible expenses for the whole family for the rest of the year.
- **Aggregate approach:** As a family, one family deductible applies to all of you. When one, or a combination, of you has expenses that meet the family deductible, it is considered to be met for all of you. Then, the plan will begin paying coinsurance for the whole family for the rest of the year.

Pro Tip

You may want to look for a plan with a specific deductible type based on your particular situation and needs. Contact Via Benefits to help you understand which approach may be best for you.





Prescription drug information

All available Individual and Family Plans will provide prescription drug coverage, but there are a few things to understand before choosing your plan.

Some plans will have one combined plan deductible for medical and prescription drugs. You must meet your full medical deductible in these plans before coverage for prescription drugs begins. Other plans will have separate medical and prescription drug deductibles. This is an important consideration for those with higher prescription drug needs.

Once you meet the deductible, the amount you pay in coinsurance or copays generally depends on if the drug is classified as a generic, preferred brand drug, or non-preferred brand drug.

Most plans will only allow you to use their in-network retail pharmacies and will have a home delivery program for mail order. Make sure you pick a plan that includes pharmacies that are convenient for you.

Additional Plans to Consider

In addition to traditional medical plans available through Via Benefits, we also offer other types of plans that might be right for you, and in some cases, may help with high out-of-pocket and deductible costs. These include Protection plans and short-term medical plans.

Protection plans

Protection plans are a great way to get added peace of mind. We'd rather not think about hospital stays, accidents, and unforeseen illnesses, but life happens. It's wise to think ahead, and that's where Protection plans can help.

These plans help you save money. All medical plans have deductibles — some as high as several thousand dollars — along with copays and coinsurance that can be burdensome. Plus, there can be hidden expenses with a significant medical event, such as home care services and durable medical equipment. Protection plans are a cost-effective way to manage these often-unexpected out-of-pocket costs.

How it works

Protection plans pay you a cash benefit for covered accidents, illnesses, or if you need hospital care. They work independently of a health plan and are paid directly to you, allowing you to choose how to spend the money. This insurance can ease the financial burden of medical care and will enable you to focus on your recovery.

There are different types of Protection plans, including those that specifically provide coverage for certain accidents, critical illnesses, and hospitalizations. Some examples of what's typically covered by these plans are burns, fractures, dislocations, heart attacks, strokes, cancers, and hip or knee replacement surgeries.

Pro Tip

High-deductible health plans can be a great way to save money on premiums, especially if your expected health care needs are low. Protection plans can shield you from high out-of-pocket costs and can help make enrolling in a plan with a higher deductible (and lower premiums!) an easier choice.

Short-term medical plans

Short-term medical plans can be a good fit for some retirees between age 62 and 65 looking for lower-cost coverage. Short-term medical plans bridge the gap in health care coverage during a period of transition, including the time between retirement and Medicare eligibility for early retirees.

How it works

Short-term medical plans are customizable, allowing you to select different levels of benefits to align coverage with various needs and budgets. Just like traditional medical plans, they have coinsurance and a deductible, and they may have benefit limits. In addition to being less expensive, short-term medical plans don't have provider restrictions, so you can use any doctor and hospital.

While these plans don't meet the minimum essential benefits of the Affordable Care Act (e.g., no preventive care coverage, no unlimited lifetime maximum), short-term medical plans are considered creditable coverage under the law. In addition, these plans aren't eligible for PTCs or CSRs.

You can only enroll in short-term medical insurance and Protection plans by speaking with one of our licensed benefit advisors. You can't elect these plans on our website. If you are interested in exploring additional benefits, mention them during your pre-enrollment call.

Snowbirds take note

If you live in more than one state during the year, you'll want to keep the following in mind:

- A PPO might be your best option (if available) since you can see out-of-network providers.
- Your plan will cover care at in-network rates for true emergencies regardless of your location.
- Look for a plan in the region where your primary providers are located.

Call 1-866-356-8150 to speak to our Care Team to help determine your options.



Enrollment

Once Open Enrollment starts, you can enroll. Enroll online to save time. You also can enroll by phone with the help of a licensed benefit advisor. If you choose to enroll by phone, please schedule an appointment on our website or give us a call.

Here for you after enrollment

Via Benefits is your year-round advocate. Our Care Team is available to support you with all types of issues and questions. We're here to assist you!



Enrollment Window
November 1, 2024 to December 15, 2024



As a reminder, here are the steps to take to get ready for enrollment.

- Create your Profile by visiting marketplace.viabenefits.com/lubrizol.
- Conduct a Pre-Enrollment Assessment. (If you don't call us, we may contact you.)
- Schedule an enrollment appointment or enroll in a plan online during your enrollment period.

We look forward to assisting you!



Visit: marketplace.viabenefits.com/lubrizol



Call: 1-866-356-8150 | (TTY: 711)

Monday through Friday

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