## The Lubrizol Corporation Employee Benefits Plan Summary of Material Modifications

#### October 2017

The following is a Summary of Material Modifications (SMM) and amends the Summary Plan Description (SPD) for The Lubrizol Corporation Employee Benefits Plan (the Plan) contained in your UnitedHealthcare Summary Plan Description and Employee Resource Guide. This is a required communication and you should keep this SMM with your SPD for future reference. Copies of the Plan's SPD may also be found on the Benefits website at <a href="http://benefits.lubrizol.com">http://benefits.lubrizol.com</a>. Except as noted below, he changes to the Plan described below are effective January 1, 2018.

The following is only a summary. In the case of a conflict between the information presented below and the Plan, the Plan provisions will govern.

#### Prior Authorization for Certain Covered Services (Applies to Lubrizol medical plans as noted)

UnitedHealthcare requires prior authorization for certain Covered Health Services. When prior authorization for a Covered Health Service is sought, United Healthcare will undertake a utilization review process, consisting of a set of formal techniques designed to monitor the use of, or evaluate the clinical necessity, appropriateness, efficacy, or efficiency of, health care services, procedures or settings. Such techniques may include ambulatory review, prospective review, second opinion, certification, concurrent review, case management, discharge planning, retrospective review or similar programs.

Physicians and other health care professionals who participate in a UnitedHealthcare network (networks vary by plan) are responsible for obtaining prior authorization. However, if you choose to receive covered health services from a non-network provider, <u>you</u> are responsible for obtaining prior authorization before you receive the services. Failure to seek prior authorization for the non-network services listed below and on the following page will result in a \$500 reduction in benefits.

Non-Network Services for which prior authorization is required are identified below. (applies to Lubrizol CDHP and Lubrizol OOA):

- Ambulance non-emergent air;
- Autism Spectrum Disorder Services -inpatient services (including Partial Hospitalization/Day treatment and services at a Residential Treatment facility). Intensive outpatient program treatment; outpatient electro-convulsive treatment; psychological testing; extended outpatient treatment visits beyond 45 50 minutes in duration, with or without medication management; Intensive Behavioral Therapy, including Applied Behavior Analysis (ABA) †;
- Clinical trials;
- Congenital heart disease surgery;
- Durable medical equipment for items that will cost more than \$1,000 to purchase or rent, including diabetes equipment for the management and treatment of diabetes;
- Genetic Testing (BRCA);
- Gender dysphoria<sup>†</sup>;

- Home health care for nutritional foods and skilled nursing<sup>†</sup>;
- Hospice care inpatient;
- Hospital inpatient stay all scheduled admissions and maternity stays exceeding 48 hours for normal vaginal delivery or 96 hours for a cesarean section delivery<sup>†</sup>;
- Lab, X-Ray and Diagnostics Outpatient sleep studies;
- Mental health services inpatient services (including partial hospitalization/day treatment and services at a residential treatment facility); intensive outpatient program treatment; outpatient electro-convulsive treatment; psychological testing; transcranial magnetic stimulation; extended outpatient treatment visits beyond 45 - 50 minutes in duration, with or without medication management<sup>†</sup>;
- Obesity surgery<sup>†</sup>;
- Prosthetic Devices for items that will cost more than \$1,000 to purchase or rent<sup>†</sup>;
- Therapeutics dialysis, IV infusion, radiation oncology, intensity modulated radiation therapy and MR-guided focused ultrasound<sup>†</sup>;
- Reconstructive procedures, including breast reconstruction surgery following mastectomy and breast reduction surgery<sup>†</sup>;
- Skilled nursing facility/inpatient rehabilitation facility services;
- Substance-related and addictive disorder services inpatient services (including partial
  hospitalization/day treatment and services at a residential treatment facility); intensive
  outpatient program treatment; outpatient electro-convulsive treatment; psychological testing;
  extended outpatient treatment visits beyond 45 50 minutes in duration, with or without
  medication management;
- Surgery sleep apnea surgeries, cochlear implant and orthognathic surgeries<sup>†</sup>;
- Transplants.

Please remember for Non-Network Benefits, you must obtain prior authorization from UnitedHealthcare (1-877-706-1735). If you fail to obtain prior authorization as required, benefits will be subject to a \$500 reduction. The prior authorization process for non-urgent services noted with a (†) above typically takes five business days for completion. Your Non-Network provider may postpone or refuse to provide these services without prior authorization. If you receive non-network services before obtaining prior authorization and prior authorization is not granted, the \$500 reduction in Benefits will apply.

#### Comprehensive Kidney Solution Program (Apples to all Lubrizol medical plans)

The Comprehensive Kidney Solution (CKS) program seeks to improve health outcomes for members with both late stage kidney disease and end-stage renal disease. The program assists affected members early in their diagnosis stage and at critical phases across the disease continuum. The program uses evidence-based approaches and nurse-led interventions to help slow the progression of kidney disease and prepares members for renal replacement therapy, if that becomes medically necessary. Optum, a subsidiary of UnitedHealthcare, will reach out to eligible participants (this is an opt-in program). There is no member cost to participate in the Comprehensive Kidney Solution program, but regular medical cost-

sharing (deductible, copays, coinsurance, as applicable) will apply for medical services received.

#### Spine and Joint Solution (Applies to all Lubrizol medical plans)

The Spine and Joint Solution gives members participants access to surgeons and facilities that qualify as UnitedHealthcare Centers of Excellence and accept bundled case rates for the following surgical procedures: knee and hip replacement, spinal fusion and spinal disc repair. The bundled payment method reimburses a care provider or hospital for a defined episode of care, such as knee or hip replacement, under a single fee or payment. Members utilizing the Spine and Joint Solution will have access to 10% coinsurance for these services. Members looking for more information about the program should call 1-877-706-1735 after January 1, 2018.

#### **Cancer Support Program (Applies to all Lubrizol medical plans)**

This program provides patients with individualized, comprehensive coaching and education from experienced oncology nurses. The goals of the program are as follows:

- Support and reinforce patient adherence to treatment plan;
- Provide information to encourage patients' active participation in their care;
- Help reduce complications related to the cancer diagnosis and treatments through targeted and timely interventions;
- Ensure that patients understand when and how to take their medications and provide self-care;
- Increase awareness and informed choices about hospice and palliative care at the end of life;
   and
- Assist in coordination of care and benefit issues.

Optum, a subsidiary of UnitedHealthcare, will reach out to eligible participants (this is an opt-in program). There is no member cost to participate in the Cancer Support Program, but regular medical cost-sharing (deductible, copays, coinsurance, as applicable) will apply for medical services received.

#### Removal of Methadone Exclusion (Applies to all Lubrizol medical plans)

The Lubrizol medical programs previously excluded methadone from coverage.. Coverage will be available for methadone prescribed as part of a Medication Assisted Treatment (MAT) for opioid dependency.

#### Real Appeal Weight Management Program (Applies to all Lubrizol medical plans)

Real Appeal helps eligible members lose weight and reduce their risks of developing certain diseases like diabetes and cardiovascular disease. Enrollment in the program includes:

- 52 weeks of access to a Transformation Coach. Transformation coaches guide members through the program and develop simple, customized plans that fit members' needs, preferences and goals.
- 24/7 access to digital tools and dashboards that help members track food, activity, and weight.
- A success kit full of healthy weight management tools including fitness guides, a recipe book (with quick family meal ideas and fast-food eating tips), weight scale and more.

 Support from weekly online group classes to learn healthy ideas from coach and other members.

Real Appeal is available at no additional cost to eligible employees, spouses and dependents 18 years with a BMI of 23 or higher and older enrolled in Lubrizol's medical program (Lubrizol EPO, Lubrizol OOA, or Lubrizol CDHP). Look for more information about the program and enrollment in January.

## Lidocaine Quantity Limit and Post-Limit Prior Authorization (Applies to all Lubrizol medical plans – prescription drug benefit)

FDA-approved products that are lidocaine or lidocaine-containing formulations will be subject to a quantity limit<sup>1</sup> with a post-limit prior authorization requirement. The intent of the criteria is to provide coverage consistent with product labeling, FDA guidance, standards of medical practice and evidence based drug information to help ensure patient safety and appropriate utilization. CVS Caremark will provide targeted communications explaining the changes to affected members and prescribers.

#### Generic Step Therapy (Applies to all Lubrizol medical plans – prescription drug benefit)

Members will be required to try a cost-effective generic before non-preferred single source brands are covered. Certain drug classes will require members to try more than one cost-effective generic before the non-preferred single source brands are covered. CVS Caremark will provide targeted communications explaining the changes to affected members and prescribers.

### Advanced Control Specialty Formulary™ (Applies to all Lubrizol medical plans – prescription drug benefit)

The formulary includes both specialty generics and clinically effective brand therapies. The formulary also has drug exclusions in several classes where multiple, therapeutically equivalent products exist (similar safety and efficacy). CVS Caremark will provide targeted communications explaining the changes to affected members and prescribers.

### Opioid Management Program (Applies to all Lubrizol medical plans – prescription drug benefit – effective February 1, 2018)

To help curb abuse of opioid prescription drugs, coverage for prescription opioid drugs will be subject to restrictions under CVS/Caremark's opioid management program. These restrictions are designed to align with the "Guideline for Prescribing Opioids for Chronic Pain" issued by the Centers for Disease Control and Prevention (CDC) in March 2016. The opioid management program contains the following controls:

- The length of the first fill will be limited to seven days for immediate release, new, acute
  prescriptions for plan members with no history of prior opioid use. A physician can submit a prior
  authorization (PA) request if it is medically necessary to exceed the seven-day limit.
- The quantity of opioid products prescribed (including those that are combined with acetaminophen, ibuprofen or aspirin) will be limited up to 90 MME per day (based on a 30-day supply). Prescribers who believe their patient should exceed CDC Guideline recommendations can submit a PA request for up to 200 MME per day. Quantities higher than 200 MME per day would require an appeal.
- Opioid products containing acetaminophen, aspirin, or ibuprofen will be limited to 4 grams of

- acetaminophen or aspirin, and 3.2 grams of ibuprofen per day.
- Use of an immediate-release (IR) formulation will be required before moving to an extended-release (ER) formulation, unless the member has a previous claim for an IR or ER product, or the prescriber submits a PA.

CVS Caremark will provide targeted communications to affected members.

### Transform Diabetes™ (Applies to all Lubrizol medical plans – prescription drug benefit)

This opt-in program emphasizes tailored support for members with diabetes and incorporates both clinical care and cost management solutions (improving medication adherence, A1c control, and lifestyle management). As part of the diabetes program, members may receive:

- highly personalized support and coaching through CVS Health consumer touch points;
- comprehensive diabetes visits at Minute Clinic locations at no out-of-pocket cost, including A1c checks;
- a connected glucometer, which will share their blood glucose levels with a pharmacist-led team
  via a health cloud, enabling the team to identify potential issues and intervene with one-on-one
  coaching; and
- access to digital tools within the CVS Pharmacy mobile app, such as medication refill reminders
  and the ability to refill a prescription via two-way text messaging, to help reduce the complexity
  of daily disease management.

CVS Caremark will provide targeted communications to eligible members. There is no member cost to participate in the Transform Diabetes Program, but regular prescription drug cost-sharing (deductible, coinsurance, as applicable) will apply for prescription drugs received.

#### **Elimination of Vacation Sell**

The "sell" portion of the Vacation Buy and Sell Program will be discontinued. The vacation "buy" feature will remain.

#### **Preventive Dental Option Discontinued**

A new dental option, the Lubrizol Network PPO, will replace the Preventive Dental Option. The network PPO will offer reduced provider costs when you use a network dentist.

<sup>&</sup>lt;sup>†</sup> Updates for 2018.

<sup>&</sup>lt;sup>1</sup> Emla (30gm), Lidocaine 2% gel (30gm), Lidocaine 4% gel (30gm), Lidocaine 5% ointment (50gm), Lidocaine 4% solution (50ml), Pliaglis 7-7% cream (30gm), Synera 70-70mg patch (2).

# The Lubrizol Corporation Short Term Disability Plan Summary of Material Modifications

#### October 2017

The following is a Summary of Material Modifications (SMM) and amends the Summary Plan Description (SPD) for The Lubrizol Corporation Short Term Disability Plan (generally, applies to employees in California, Wisconsin and Washington). Copies of the Plan's SPD may also be found on the Benefits website at <a href="http://benefits.lubrizol.com">http://benefits.lubrizol.com</a>. The changes to the Plan described below are effective August 1, 2017.

The following is only a summary. In the case of a conflict between the information presented below and the Plan, the Plan provisions will govern.

#### Addition of Employees in Wisconsin

The Lubrizol Corporation Short Term Disability Plan was amended to include employees with usual work assignments in Wisconsin.