

THE ESSENTIAL GUIDE TO

# YOUR 2020 BENEFITS





At Lubrizol, we are in the business of improving lives, including the lives of our employees. It is why we offer comprehensive and competitive benefits to enhance your overall well-being. These benefits are an important part of your *total rewards* from Lubrizol.

*The Essential Guide to Your 2020 Benefits* describes many of the programs and resources Lubrizol offers to support your health, financial wellness and life balance. Along with an overview of key benefit features, it includes tips and resources to help you use your benefits wisely.

Please review this guide carefully so you understand your options and are able to enroll in the benefits that are right for you and your family. You will see there is much more than meets the eye. It is up to you to take full advantage of your benefits throughout the year.

Thank you for choosing and using your benefits wisely so you can be your best *and* bring your best to all that you do.

Cassie Leiby  
Senior Manager, Global Benefits

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# Enrolling for Benefits



You have the opportunity to enroll for Lubrizol benefits when you first become eligible, during annual enrollment, and when you experience a qualified family status change or other qualifying event.

## 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 Flexible Spending Account.

Annual enrollment for 2020 benefits is October 21 – November 8, 2019. Your elections are effective January 1 – December 31, 2020, unless you change your coverage due to 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.





## HOW TO ENROLL

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



## BENEFIT COVERAGE ELIGIBILITY

### Employees

You are eligible to enroll in benefit coverage if you are a:

- Regular, full-time U.S. salaried or non-union hourly employee
- Regular, part-time U.S. salaried or non-union hourly employee working at least 20 hours per week
- Regular, part-time U.S. salaried or non-union hourly employee working fewer than 20 hours per week, but who worked an average of 30 hours or more per week during the prior "measurement period"; Lubrizol will notify you if this applies to you
- U.S. union employee whose collective bargaining agreement provides for the ability to enroll in benefit coverage
- U.S. employee on Long Term Disability (LTD) leave or certain other employer-approved leaves of absence
- U.S. employee participating in a phased-in retirement program
- With respect to medical and prescription drug coverage, student intern (or employed in connection with a cooperative educational program with any college, university or other post-secondary school) who is reasonably anticipated to work an average of at least 20 hours per week over a biweekly period during active employment

### Eligible Family Members

You may enroll your eligible family members, including:

- Your spouse
- Your domestic partner\*
- 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

\*Domestic partner eligibility is subject to certification and must be completed within 30 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.



### Good Idea

Call the Lubrizol Benefits  
Center at **1-844-747-1641**  
to verify your dependents'  
Social Security  
numbers.

# Paying for Your Benefits

For most benefit options, you and Lubrizol share in the cost of your coverage.

Like many large companies, Lubrizol is self-insured. That means Lubrizol pays for employees' medical, dental and vision claims — not an insurance company. 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.

## 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

## Medical Surcharge for Working Spouses/Domestic Partners

It is Lubrizol's goal 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 the Smokeless® program isn't right for you, contact Corporate Benefits at **440-347-5358** or [benefits@lubrizol.com](mailto:benefits@lubrizol.com). 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.

# Helpful Resources for Your Health and Well-Being





Take advantage of these programs and resources to help manage your health and well-being.

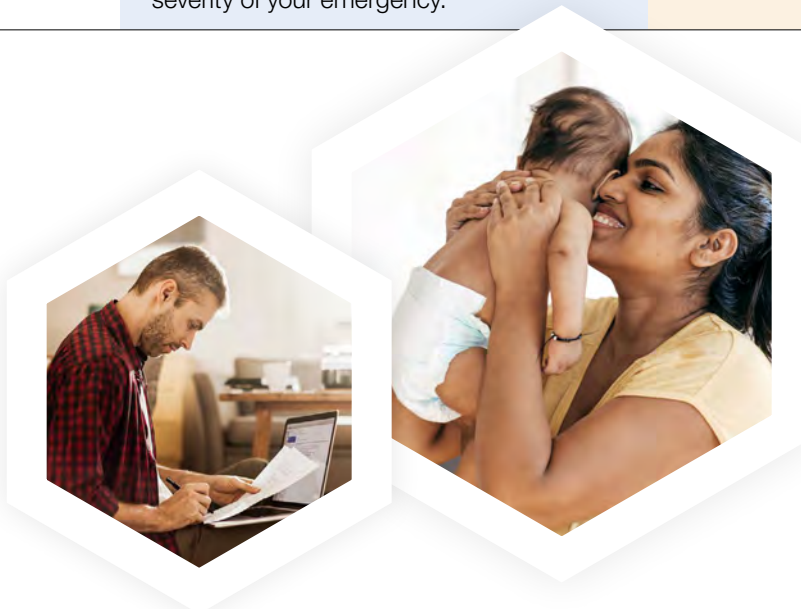
Health Advocate		Contact Health Advocate for all your benefit-related questions. A Personal Health Advocate can help you understand your benefits, access services, resolve insurance-related issues, find network providers, and more. Available to benefit-eligible employees and their eligible family members. Visit <a href="https://healthadvocate.com/Lubrizon">healthadvocate.com/Lubrizon</a> or call <b>1-866-799-2731</b> , 8 a.m. to midnight ET.
UnitedHealthcare Virtual Visits		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 Lubrizon health coverage. Learn more and access virtual visits at <a href="https://myuhc.com">myuhc.com</a> .
Essentials Balance Program		The Essentials Balance Program offers resources to help you live well, be well and work well. Administered by OptumHealth, the program covers three counseling sessions per year per problem. Resources are free, confidential and available 24 hours a day, seven days a week. Visit <a href="https://liveandworkwell.com">liveandworkwell.com</a> or call <b>1-866-248-4094</b> to learn more. Access code: Lubrizon.
UnitedHealth Premium Program		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 <a href="https://myuhc.com">myuhc.com</a> .
Real Appeal		Real Appeal is an online weight-loss program available at no cost to you and your dependents enrolled in a Lubrizon 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 <a href="https://lubrizon.realappeal.com">lubrizon.realappeal.com</a> .
The Berkshire Hathaway Pension Service Center		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 <b>1-877-459-2403</b> , Monday through Friday, 9 a.m. to 6 p.m. ET (excluding major holidays).
<a href="https://benefits.lubrizon.com/resources">benefits.lubrizon.com/resources</a>		This is your one stop for all your benefit resources, including enrollment tools, contacts, support documents, and much more.
Voya Financial Services		Use the Voya Participant website at <a href="https://lzs401k.voya.com">lzs401k.voya.com</a> to access and manage your Lubrizon 401(k) account, make transactions, get professional investment advice, and more. To talk with a Voya customer service associate, call the Voya Information Line at <b>1-866-LZs-401k (1-866-597-4015)</b> , Monday through Friday, 8 a.m. to 8 p.m. ET.



# Where to Go When You Need Care

There are many places you can go when you need medical care. Your cost for medical services often depends on where you go. Here are your most common options:

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 Health Advocate at <b>1-866-799-2731</b> or <a href="https://healthadvocate.com/Lubrizol">healthadvocate.com/Lubrizol</a> to find a PCP in your plan's network.
<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 Health Advocate at <b>1-866-799-2731</b> or <a href="https://healthadvocate.com/Lubrizol">healthadvocate.com/Lubrizol</a> to find a network location near you.
 <b>UnitedHealthcare Virtual Visits</b>	Diagnosis and treatment of non-emergency medical conditions 24/7.	See a doctor using your mobile device or computer at <a href="https://myuhc.com">myuhc.com</a> .
<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 Health Advocate at <b>1-866-799-2731</b> or <a href="https://healthadvocate.com/Lubrizol">healthadvocate.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.





# Your 2020 Benefit Choices

Your Lubrizol benefits include programs to support your health, financial well-being and life balance. The chart below lists your benefit options for 2020. Certain employees (for example, those covered by a collective bargaining agreement) may have different options.



Benefit Program		Benefit Options
HEALTH	Medical and Prescription Drug	<ul style="list-style-type: none"> <li>Core</li> <li>Standard</li> <li>Plus</li> <li>Lubrizol OOA</li> <li>No coverage</li> </ul>
	Dental	<ul style="list-style-type: none"> <li>Comprehensive</li> <li>Network PPO</li> <li>No coverage</li> </ul>
	Vision	<ul style="list-style-type: none"> <li>Comprehensive</li> <li>No coverage</li> </ul>
	Dependent Care Account (DCA)	<ul style="list-style-type: none"> <li>Contribute to the DCA</li> <li>No participation</li> </ul>
FINANCIAL	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"> <li>Supplemental coverage for you from one to eight times your eligible pay, up to \$2 million</li> <li>Coverage for your spouse/domestic partner in \$10,000 increments, 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>
	Income Protection (or Disability)	<ul style="list-style-type: none"> <li>Lubrizol provides STD coverage</li> <li>Lubrizol provides LTD 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>
	Vacation Buy Program – Where Applicable	<ul style="list-style-type: none"> <li>Buy up to five days (1 day = 8 hours)</li> <li>No participation</li> </ul>
BALANCE		

All plans use the  
UnitedHealthcare Choice  
Plus Network

# Medical and Prescription Drug Coverage

You have a choice of three Consumer-Driven Health Plans (CDHPs). A CDHP is designed to give you more flexibility in managing your health care and your costs.

A CDHP also qualifies you for a health savings account (HSA), which you can use to save and pay for eligible health care expenses tax-free.

The CDHPs use the UnitedHealthcare Choice Plus network. 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 [Lubrizol.BenefitsNow.com](https://Lubrizol.BenefitsNow.com).

## Find a Network Provider

To locate a provider in the UnitedHealthcare Choice Plus network, contact Health Advocate at [healthadvocate.com/Lubrizol](https://healthadvocate.com/Lubrizol) or 1-866-799-2731, or visit [myuhc.com](https://myuhc.com).



## PRESCRIPTION DRUG COVERAGE DETAILS

Your prescription drug coverage is provided through CVS/caremark and is included with your medical election. Your coverage includes designated generic preventive drugs at no cost to you.

### Filling Prescriptions

You have three ways to fill your prescription:

**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.

### Ways to Save on Your Prescription Drugs

- Use the Mail Order or Maintenance Choice Program for your maintenance medications. (These programs are mandatory for maintenance medications after the first two fills at a retail network pharmacy.)
- 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.)
- Use the CVS/caremark app to check drug costs, search for lower-cost alternatives, and more. Download it on the Apple App Store or Google Play.





## COMPARISON OF 2020 MEDICAL AND PRESCRIPTION DRUG BENEFITS

	Core	Standard	Plus	Lubrizol OOA <sup>3</sup>
FEATURE	Individual • 2-person • Family	Individual • 2-person • Family	Individual • 2-person • Family	Individual • 2-person • Family
<b>Annual Deductible<sup>1</sup></b>				
Network	\$4,000 • \$6,000 • \$8,000	\$3,000 • \$4,500 • \$6,000	\$2,000 • \$3,000 • \$4,000	\$3,000 • \$4,500 • \$6,000
Non-network	\$4,000 • \$6,000 • \$8,000	\$3,000 • \$4,500 • \$6,000	\$2,000 • \$3,000 • \$4,000	\$3,000 • \$4,500 • \$6,000
<b>Lubrizol's Annual HSA Contribution</b>	N/A	\$500 • \$750 • \$1,000	\$1,000 • \$1,500 • \$2,000	\$500 • \$750 • \$1,000
	<b>You Pay</b>	<b>You Pay</b>	<b>You Pay</b>	<b>You Pay</b>
<b>Medical Coinsurance</b>				
Network	20%	20%	20%	20%
Non-network	40%	40%	40%	20%
<b>Emergency Room Visits</b>	20%	20%	20%	20%
<b>Hearing</b>	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	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</b>	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%	Preventive Maintenance: 0% Generic: 10% Brand Formulary: 20% Brand Non-formulary: 30% Biotech/Specialty (available only through Mail Order): 35%
<b>Annual Out-of-Pocket Maximum<sup>2</sup></b>				
Network	\$5,500 • \$7,500 • \$9,500	\$4,500 • \$6,000 • \$7,500	\$3,500 • \$4,500 • \$5,500	\$4,500 • \$6,000 • \$7,500
Non-network	\$5,500 • \$7,500 • \$9,500	\$4,500 • \$6,000 • \$7,500	\$3,500 • \$4,500 • \$5,500	\$4,500 • \$6,000 • \$7,500
<b>Surcharges</b>	Medical: \$45 Tobacco: \$35	Medical: \$45 Tobacco: \$35	Medical: \$45 Tobacco: \$35	Medical: \$45 Tobacco: \$35

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 \$5,500. Once any one family member reaches the individual cap of \$5,500, 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.



# 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 maintenance medications, as well as coverage for behavioral health and substance abuse treatment.

Turn the page to learn more about the HSA and how it works with a CDHP.



2



#### BIWEEKLY CONTRIBUTIONS

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

Generally, a CDHP has lower contributions than other types of health plans.



3



#### ANNUAL DEDUCTIBLE

Your in-network preventive care and specified preventive maintenance 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.

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.

A CDHP has a higher out-of-pocket maximum than other types of health plans, but you can let the money in your HSA grow tax-free year after year to help cover potential expenses.





# Advantages of a Health Savings Account (HSA)

An HSA is a tax-advantaged account that lets you save money to pay for eligible health care expenses now and in the future. 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.

An HSA is one of the best opportunities Lubrizol offers to help you manage your health care dollars. OptumHealth 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. You may contribute via pre-tax payroll deductions and/or a post-tax lump sum contribution to OptumHealth 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 in January 2020. Keep in mind that Lubrizol's contribution is also included in the IRS limit.

Coverage	Lubrizol Contributes <sup>1</sup>	You Can Contribute	IRS Annual Limits <sup>2</sup>	Catch-Up Contribution
	Individual • 2-person • Family	Individual • 2-person • Family	Individual • 2-person • Family	
<b>Core</b>	\$0 • \$0 • \$0	\$3,550 • \$7,100 • \$7,100	\$3,550 • \$7,100 • \$7,100	Contribute an additional \$1,000 if you are age 55 or older in 2020
<b>Standard/OOA</b>	\$500 • \$750 • \$1,000	\$3,050 • \$6,350 • \$6,100	\$3,550 • \$7,100 • \$7,100	
<b>Plus</b>	\$1,000 • \$1,500 • \$2,000	\$2,550 • \$5,600 • \$5,100	\$3,550 • \$7,100 • \$7,100	

<sup>1</sup> Lubrizol's contribution is pro-rated for mid-year hires.

<sup>2</sup> IRS limits include your contribution plus any contribution from Lubrizol.



Continued on page 14



## HOW AN HSA WORKS

*Continued from page 13*

3

**USE IT OR LET IT GROW**

You can use your HSA to pay for eligible expenses tax-free now — or you can 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. And 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**

Any 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. A few states, including Alabama, California, New Hampshire, New Jersey and Tennessee, do not allow pre-tax treatment of contributions or earnings. Consult your tax professional or state department of revenue for more information.

**LEARN MORE  
ABOUT AN HSA**

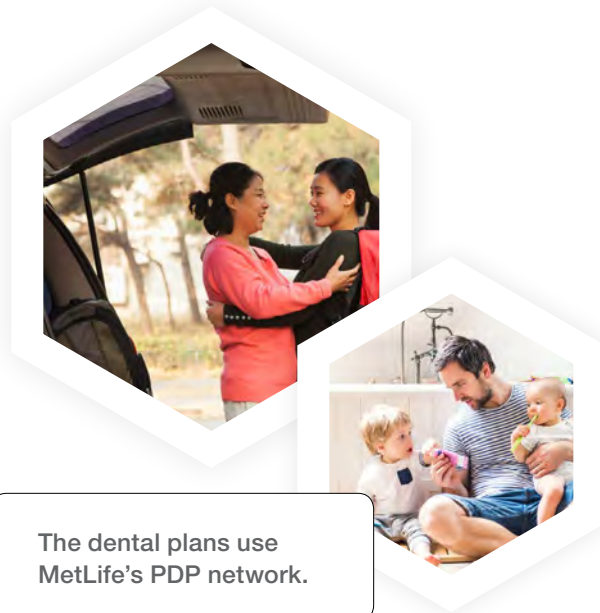
For more information about the advantages of an HSA and how it works with a CDHP, visit [benefits.lubrizol.com](https://benefits.lubrizol.com) or [optumbank.com](https://optumbank.com).



# Dental Coverage

Choose between two dental plan options administered by MetLife or decline dental coverage. 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.

Both dental plan options — Comprehensive and Network PPO — cover preventive care at 100%. 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.



## COMPARISON OF 2020 DENTAL BENEFITS

FEATURE	Lubrizol Comprehensive Dental Option	Lubrizol Network PPO Dental Option
<b>Annual Deductible</b>	\$25 per person • \$75 per family	\$50 per person • \$150 per family
<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>Preventive Care</b> • Oral exams (two per year) • Cleanings • X-rays	\$0 (annual deductible does not apply)	\$0 (annual deductible does not apply)
<b>Basic</b> • Fillings • 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	50% after annual deductible
<b>Orthodontia</b> • Children under age 26	50%	50%

# Vision Coverage

You have one vision plan option, administered 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.

You may also decline vision coverage. 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.

The vision plan uses EyeMed's Access network.



## OVERVIEW OF 2020 VISION BENEFITS

FEATURE	Network Member Cost (What You Pay)	Out-of-Network Benefit (What the Plan Will Reimburse You)
<b>Exam with Dilation as Necessary</b> Once every 12 months	\$0 copay	Up to \$35
<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 24 months	\$0 copay, 80% of charge over \$150	Up to \$75
<b>Standard Plastic Lenses</b> Once every 12 months instead of contact lenses		
• Single vision	\$15 copay	Up to \$25
• Bifocal	\$15 copay	Up to \$40
• Trifocal	\$15 copay	Up to \$55
• Standard progressive	\$15 copay	Up to \$55
• Premium progressive	\$15 copay, 80% of charge over \$120	Up to \$55
<b>Lens Options</b> Paid by member and added to the base price of the lenses		
• Tint (solid and gradient)	\$15	\$0
• UV coating	\$0	Up to \$5
• Standard scratch resistance	\$0	Up to \$5
• Standard polycarbonate	\$0	Up to \$5
• Standard anti-reflective	\$45	\$0
• Polarized	80% of retail price	\$0
• Other add-ons and services	80% of retail price	\$0
<b>Contact Lenses (Materials Only)</b> Once every 12 months instead of standard plastic lenses		
• Conventional	\$0 copay, 85% of charge over \$150	Up to \$120
• Disposable	\$0 copay, 100% of charge over \$150	Up to \$120
• Medically necessary*	\$0 copay, paid in full	Up to \$200
<b>Lasik and PRK Vision Procedures</b>	85% of retail price or 95% of promotional pricing	\$0

\*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 **1-866-723-0596** for additional information during annual enrollment or **1-866-9EyeMed** during the year.



# Dependent Care Account (DCA)

Use the DCA (administered by OptumHealth) 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 2020 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.

Your current DCA election does not carry over to the next year. You must enroll each year to participate.



## 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.

## 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



## Reimbursable Expenses

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



# Retirement Savings – Lubrizol's 401(k)

Prepare for a financially secure retirement with Lubrizol's 401(k) program (The Lubrizol Corporation Employees' Profit Sharing and Savings Plan).

## LUBRIZOL'S PLAN:

- Lets you save up to 75% of your pay on a pre-tax, Roth or post-tax basis, up to the annual IRS limit
- Provides a dollar-for-dollar matching contribution on the first 6% of your eligible compensation (that's an automatic 100% return on your savings)
- Grows tax-free through compounding investment earnings

Once you are enrolled in the plan, you can change your contribution rate or stop contributing at any time.

## Investing Your Account

Contributions to your 401(k) are invested in the Target Retirement Fund appropriate for your date of birth unless you make a different investment election. You can change how contributions are invested at any time.

## More Information

Learn more, enroll and access your retirement savings account:

- Online at [lzs401k.voya.com](https://lzs401k.voya.com)
- By phone at 1-866-LZs-401k (1-866-597-4015), Monday through Friday, 8 a.m. to 8 p.m. ET.

# Life Insurance

## COMPANY-PROVIDED LIFE INSURANCE

Lubrizol 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 The Hartford.

If your eligible pay is more than \$25,000, the premiums Lubrizol pays for your coverage in excess of \$50,000 are treated as taxable income to you. During annual 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 Lubrizol-paid premiums.

## SUPPLEMENTAL LIFE INSURANCE

You may purchase supplemental life insurance coverage (Term Life) for yourself and your dependents through The Hartford. You pay the cost for this coverage through payroll deductions. If you do not change your election during annual enrollment, your 2020 coverage will be the same as 2019.



### 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.	Depends on your age and the amount of coverage you choose.	<ul style="list-style-type: none"> <li>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.</li> <li>If you are electing coverage for the first time, you may elect coverage in the amount of 1 times your annual earnings, not to exceed the lesser of 3 times your annual earnings or \$600,000, without providing EOI.</li> <li>Additional coverage amounts will require EOI that is satisfactory to The Hartford before the excess can become effective.</li> </ul>
<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.	<ul style="list-style-type: none"> <li>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.</li> <li>If you are electing coverage for the first time, you may elect coverage in the amount of \$10,000 without providing EOI.</li> <li>Additional coverage amounts will require your spouse to provide EOI that is satisfactory to The Hartford before the excess can become effective.</li> </ul>
<b>Your/Your Domestic Partner's Eligible Child(ren)</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.

# Other Financial Benefits

Lubrizol 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 (LTD)

Lubrizol provides basic LTD 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 [Lubrizol.BenefitsNow.com](https://www.lubrizol.com/benefitsnow) or by calling the Lubrizol Benefits Center. Coverage is provided by The Hartford.

# Vacation Buy Program

Need some extra time off? Lubrizol's Vacation Buy Program lets you add to your regular vacation benefits.

## PROGRAM AVAILABILITY

Program availability is based on your location's policies and whether you are covered under a collective bargaining agreement.

New hires are not eligible for this program in the year they are hired unless they began employment on January 1.



## How It 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.



# More Ways to Find Balance

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 positive workplace and make it easier to achieve high-quality results. Examples include:



## PARENTAL LEAVE

If eligible, you may take four weeks of paid parental leave for the birth, adoption or state-sponsored foster care of your child.

## FLEXIBLE WORK ARRANGEMENTS

Lubrizol's Integrated Flexible Environment (LIFE) program offers a variety of flexible work arrangements (FWA) — flextime, seasonal hours, job sharing, etc. — to help you find the work arrangement that works best for you. We encourage you to have an open discussion with your manager or supervisor about FWA possibilities based on your temporary or long-term work/life situation. Please note that FWAs will not work for every employee, every role or every department, as you and your department managers are still accountable to “get the work done.”

## DRESS FOR YOUR DAY

Our everyday dress code, called Lubrizol Casual, gives you more choice in what you wear so you can be comfortable and at ease in your workplace. As with all things, safety is our first priority. Please follow all local safety requirements when choosing your attire for the day.

For more information about these features, visit The Channel or contact your HR Partner.



The Lubrizol Corporation  
29400 Lakeland Boulevard  
Wickliffe, Ohio 44092

**LUBRIZOL  
BENEFITS CENTER**

To enroll or ask  
benefit questions

**1-844-747-1641**

10 a.m. – 7 p.m. ET

[Lubrizol.BenefitsNow.com](http://Lubrizol.BenefitsNow.com)



# Important Benefits Contact Information

Plan/Program	Phone	Online
<b>HEALTH</b>		
<b>Health Advocate</b> Your first call for all benefits-related questions	<b>1-866-799-2731</b>	<a href="http://healthadvocate.com/Lubrizol">healthadvocate.com/Lubrizol</a>
<b>Medical</b> UnitedHealthcare (Choice Plus network)	<b>1-877-706-1735</b>	<a href="http://myuhc.com">myuhc.com</a>
<b>Health Savings Account</b> UnitedHealthcare/OptumHealth Bank	<b>1-877-706-1735</b>	<a href="http://myuhc.com">myuhc.com</a>
<b>Prescription Drug</b> CVS/caremark	<b>1-844-742-5087</b>	<a href="http://caremark.com">caremark.com</a>
<b>Dental</b> MetLife (PDP network)	<b>1-800-942-0854</b>	<a href="http://metlife.com/dental">metlife.com/dental</a>
<b>Vision</b> EyeMed (Access network)	<b>1-866-723-0596</b> (during annual enrollment) <b>1-866-9EyeMed</b> (during the year)	<a href="http://eyemedvisioncare.com">eyemedvisioncare.com</a>
<b>Lubrizol Essentials Program</b> Smokeless®	<b>1-800-345-2476</b>	<a href="http://healthylife.com/LubrizolEssentialsSmokeless">healthylife.com/ LubrizolEssentialsSmokeless</a>
<b>Essentials Balance Program</b> OptumHealth	<b>1-866-248-4094</b>	<a href="http://liveandworkwell.com">liveandworkwell.com</a>
<b>UnitedHealthcare Virtual Visits</b> For non-emergency medical care and advice		<a href="http://myuhc.com">myuhc.com</a>
<b>Real Appeal</b> Online weight-loss program		<a href="http://lubrizol.realappeal.com">lubrizol.realappeal.com</a>
<b>FINANCIAL</b>		
<b>Dependent Care Account</b> UnitedHealthcare/OptumHealth	<b>1-877-706-1735</b>	<a href="http://myuhc.com">myuhc.com</a>
<b>Employees' Profit Sharing and Savings Plan (401(k) Plan)</b> Voya Financial	<b>1-866-LZs-401k</b> <b>(1-866-597-4015)</b>	<a href="http://lzs401k.voya.com">lzs401k.voya.com</a>
<b>Supplemental Life Insurance (Term Life)</b> The Hartford	<b>1-800-883-5926</b>	<a href="http://thehartford.com/benefits/lubrizol">thehartford.com/benefits/lubrizol</a>
<b>Berkshire Hathaway Pension Service Center</b>	<b>1-877-459-2403</b>	

**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 your benefits, please contact the Lubrizol Benefits Center at **1-844-747-1641**.