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The Carnegie Institution for Science is committed to providing high-quality benefits to serve the diverse and changing needs of the Carnegie community. Please review this guide in its entirety to understand and maximize the array of benefits available to you and your dependents. This guide, along with other informational materials, will also be housed on the Human Resources website hr.carnegiescience.edu for your reference.
All benefit-eligible employees are eligible to enroll in the benefits included in this guide.
OPEN
ENROLLMENT

2023 Open Enrollment will be a passive enrollment. What this means:

☑️ If you have NO changes to make to your benefit elections, you do not need to take any action. Your current elections will roll over for 2023.

It will become an ACTIVE enrollment if:

☑️ you have a spending account (FSA Health & FSA Dependent Care). This is an active enrollment and you must re-enroll for 2023 coverage.

☑️ you update your Life, AD&D and/or LTD beneficiaries. This will become an active enrollment and you must re-enroll for all of your 2023 coverages.

As always, Open Enrollment is your opportunity to elect new benefits, drop and/or modify your current benefit elections. This includes, but is not limited to:

☑️ Adding or removing eligible dependents
☑️ Changing medical or dental plan options
☑️ Enrolling in health or dependent care savings accounts

Remember:

If you log into the Open Enrollment section in Dayforce and actively click on ANY of the available benefits, your enrollment will no longer be passive. You will then have to actively update ALL of your benefit elections for 2023.

Elect your 2023 benefits online by logging in to your Dayforce account at https://dayforce.carnegiescience.edu between November 1-18.
GET TO KNOW
YOUR MEDICAL OPTIONS

All plans offered through Carnegie provide care through a network of doctors, dentists, hospitals, pharmacies, laboratories, and other providers.

The Aetna Choice network is large and comprehensive. It consists of primary care physicians and specialists ranging from cardiologists, podiatrists, and OB/GYNs to oncologists, ophthalmologists, and orthopedists. Facilities such as hospitals, urgent care centers, and labs also belong to the network.

The key to saving money and choosing the best plan for you and your family is to understand how the plans work and become an informed healthcare consumer. Make the most of your coverage and savings opportunities.

**Out-of-pocket Maximum:** Includes copays, coinsurance, deductibles. Claims are covered at 100% once the out-of-pocket maximum has been met.

**Deductibles:** This is the amount of covered expenses that you must pay before the plan pays for most benefits.

**Coinsurance:** A percentage of the cost of covered expenses you must pay after you have met your plan deductible.

**Copays:** A flat dollar amount that you pay for certain services. Please see the plan document for details.

---

**YOUR 2023 AETNA MEDICAL PLAN OPTIONS:**

**PLATINUM PLUS**
- Are willing to pay a higher monthly premium, with lower out-of-pocket costs when you utilize services
- You or a covered family member expects to need extensive care throughout the year
- Prefer to only pay a small deductible and the lowest copays for In-Network services

**PLATINUM**
- Want great protection but do not want to pay the highest monthly premium
- Are willing to pay modest copays for most services
- Are willing to pay the deductible and coinsurance for more expensive services like hospitalization and MRI's

**GOLD**
- Would like the lowest monthly premium in exchange for higher out-of-pocket costs when you use your benefits
- Prefer to manage your healthcare expenses through a triple tax-advantaged Health Savings Account (HSA)
Each Aetna plan covers the same services and utilizes the same Choice POS II network of providers, but differs in the amount deducted from your paycheck, your cost when you receive care, and how care is covered in-network versus out-of-network.

<table>
<thead>
<tr>
<th>aetna Medical Benefits</th>
<th>PLATINUM PLUS</th>
<th>PLATINUM</th>
<th>GOLD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$250</td>
<td>$1,000</td>
<td>$500</td>
</tr>
<tr>
<td>Family</td>
<td>$500</td>
<td>$2,000</td>
<td>$1,000</td>
</tr>
<tr>
<td>Out-of-Pocket Maximum</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$3,000</td>
<td>$6,000</td>
<td>$4,000</td>
</tr>
<tr>
<td>Family</td>
<td>$6,000</td>
<td>$12,000</td>
<td>$8,000</td>
</tr>
<tr>
<td>Plan Responsibility</td>
<td>The plan pays % shown</td>
<td>90%</td>
<td>70%</td>
</tr>
</tbody>
</table>

Amounts shown below are the amounts that Employee pays

**Hospital / Inpatient Services**
- Deductible then 10%
- Deductible then 30%
- Deductible then 20%
- Deductible then 30%
- Deductible then 10%
- Deductible then 30%

**Outpatient Facility Services**
- Deductible then $200 copay
- Deductible then $200 copay
- Deductible then $200 copay
- Deductible then $200 copay
- Deductible then $200 copay
- Deductible then $200 copay

**Primary Care**
- $10 copay per visit
- $20 copay per visit
- Deductible then 30%
- Deductible then 30%
- Deductible then 10%
- Deductible then 30%

**Specialist**
- $20 copay per visit
- $20 copay per visit
- $40 copay per visit
- $40 copay per visit
- Deductible then 10%
- Deductible then 30%

**Emergency Room**
- $150 copay
- Treated as in-network
- $150 copay
- Treated as in-network
- Deductible then 10%
- Deductible then 30%

**Urgent Care**
- $20 copay per visit
- Deductible then 30%
- $50 copay per visit
- Deductible then 30%
- Deductible then 10%
- Deductible then 30%

**Express Scripts Rx 30-day Retail (90-day Mail Order Supply)**

<table>
<thead>
<tr>
<th>Rx Copays</th>
<th>Medical Deductible Applies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$7 copay ($14 copay)</td>
</tr>
<tr>
<td>Preferred</td>
<td>$7 copay ($14 copay)</td>
</tr>
<tr>
<td>Non-Preferred</td>
<td>$30 copay ($60 copay)</td>
</tr>
<tr>
<td>Specialty</td>
<td>$30 copay ($60 copay)</td>
</tr>
<tr>
<td></td>
<td>$55 copay ($110 copay)</td>
</tr>
<tr>
<td></td>
<td>$55 copay ($110 copay)</td>
</tr>
<tr>
<td></td>
<td>20% up to a max of $100</td>
</tr>
<tr>
<td></td>
<td>20% up to a max of $100</td>
</tr>
<tr>
<td></td>
<td>$7 copay ($14 copay)</td>
</tr>
<tr>
<td></td>
<td>$7 copay ($14 copay)</td>
</tr>
<tr>
<td></td>
<td>$30 copay ($60 copay)</td>
</tr>
<tr>
<td></td>
<td>$30 copay ($60 copay)</td>
</tr>
<tr>
<td></td>
<td>$55 copay ($110 copay)</td>
</tr>
<tr>
<td></td>
<td>$55 copay ($110 copay)</td>
</tr>
<tr>
<td></td>
<td>20% up to a max of $100</td>
</tr>
<tr>
<td></td>
<td>20% up to a max of $100</td>
</tr>
</tbody>
</table>

**Medical Benefit Costs (These costs are per pay period)**

<table>
<thead>
<tr>
<th></th>
<th>Employee Only</th>
<th>Two-Party</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$127.09</td>
<td>$234.02</td>
<td>$299.87</td>
</tr>
<tr>
<td></td>
<td>$266.95</td>
<td>$207.61</td>
<td>$266.03</td>
</tr>
<tr>
<td></td>
<td>$342.08</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Accredo®

The Accredo® specialty team provides specialized medication and care, and profound empathy, to patients with complex and chronic conditions, working with physicians toward positive outcomes.

Express Scripts Home Delivery℠

Do you take maintenance drugs?
These are drugs used to treat long-term conditions, such as high blood pressure or diabetes. You can use our home delivery service to get up to a 90-day supply of medicine by mail.

Care Continuum

Care Continuum® offers the most comprehensive solution for managing medically billed specialty drugs, helping clients and their patients reduce spending.

Prescription Drug Benefits are offered under Express Scripts.

When you enroll in one of the Aetna medical plan options, you'll automatically have prescription drug coverage through Express Scripts. You will receive a prescription drug card, separate from your medical ID card. This program uses a "four-tier" co-payment approach to covered drugs and is designed to control cost for you and the plan.

<table>
<thead>
<tr>
<th>FEATURE</th>
<th>PLATINUM PLUS</th>
<th>PLATINUM</th>
<th>GOLD (HSA)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1 copay</td>
<td>$7</td>
<td>$7</td>
<td>$7</td>
</tr>
<tr>
<td>Tier 2 copay</td>
<td>$30</td>
<td>$30</td>
<td>$30</td>
</tr>
<tr>
<td>Tier 3 copay</td>
<td>$55</td>
<td>$55</td>
<td>$55</td>
</tr>
<tr>
<td>Tier 4 copay</td>
<td>20% up to a max of $100</td>
<td>20% up to a max of $100</td>
<td>20% up to a max of $100</td>
</tr>
<tr>
<td>90-day mail order</td>
<td>$14/$60/$110</td>
<td>$14/$60/$110</td>
<td>$14/$60/$110</td>
</tr>
</tbody>
</table>

*Medical deductible applies
Carnegie offers two dental plans through Delta Dental, each with different coverage levels and maximum benefits. The plans are the Dental HMO and the Dental PPO.

The Dental PPO has 3 tiers of coverage with the best level being with Delta PPO providers. There is a separate Delta Premier PPO network, but the patient responsibility may be higher due to a different allowable fee. On out-of-network dentists, the member is responsible up to the full charge.

<table>
<thead>
<tr>
<th>Delta Dental HMO</th>
<th>Delta Dental PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coverage Level</td>
<td>Delta PPO</td>
</tr>
<tr>
<td>DHMO In-network Only</td>
<td></td>
</tr>
<tr>
<td>Plan Highlights</td>
<td>• In-Network dentists only</td>
</tr>
<tr>
<td></td>
<td>• Basic fee-for-service plan</td>
</tr>
<tr>
<td></td>
<td>• A dentist must be selected, either by you or by Delta Dental</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Plan Year Deductible</td>
<td>None</td>
</tr>
<tr>
<td>Annual Plan Year Maximum Benefit</td>
<td>None</td>
</tr>
</tbody>
</table>

Amounts shown are the coinsurance amounts the plan pays:

<table>
<thead>
<tr>
<th>Preventive Care (cleanings, exams and X-rays)</th>
<th>DHMO In-network Only</th>
<th>Delta PPO</th>
<th>Delta Premier PPO</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>N/A</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

| Regular Restorative Care (fillings and root canals) | Fee Schedule | N/A | 80% | 80% | 80% |
|Major Restorative Care (dentures, bridgework, and crowns) | Fee Schedule | N/A | 60% | 60% | 60% |

| Orthodontia (braces and retainers) | Fee Schedule | 50% Lifetime maximum of $1,500 per person | Not Covered |

Dental Benefit Costs (These costs are per pay period):

<table>
<thead>
<tr>
<th></th>
<th>Employee Only</th>
<th>Two-Party</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$9.62</td>
<td>$15.93</td>
<td>$23.52</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$17.32</td>
<td>$30.95</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$53.33</td>
</tr>
</tbody>
</table>
Healthcare Elections

VISION

COVERAGE

Carnegie offers vision coverage through EyeMed. EyeMed offers coverage for many of your vision care needs. This includes in-network annual eye exams, glasses, and contact lenses. It also offers coverage for scratch-resistant coating, anti-reflective coating, and polycarbonate and progressive multi-functional lenses. This plan also provides discounts for a second pair of glasses and other services.

<table>
<thead>
<tr>
<th></th>
<th>In-network</th>
<th>Out-of-network</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Eye Exam</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(once every 12 months)</td>
<td>$10 copay</td>
<td>Member reimbursed up to $40</td>
</tr>
<tr>
<td><strong>Lenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(one pair every 12 months)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single Vision - $25 copay</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bifocal - $25 copay</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trifocal - $25 copay</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standard Progressive - $90 copay</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Frames</strong></td>
<td>$0 copay, $130 allowance, 20% off balance over $130</td>
<td>Member reimbursed up to $91</td>
</tr>
<tr>
<td>(once every 12 months)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Contact Lenses</strong></td>
<td>Conventional: $0 copay, $110 allowance, 15% off balance over $110</td>
<td>Conventional: Member reimbursed up to $88</td>
</tr>
<tr>
<td></td>
<td>Disposable: $0 copay, $110 Allowance, plus balance over $110</td>
<td>Disposable: Member reimbursed up to $88</td>
</tr>
<tr>
<td></td>
<td>Medically Necessary: $0 copay, paid in full</td>
<td>Medically Necessary: Member reimbursed up to $210</td>
</tr>
</tbody>
</table>

AND either Glasses...

|                                |                     |                                     |
|                                |                     |                                     |
| **Frames**                     | $0 copay, $130 allowance, 20% off balance over $130 | Member reimbursed up to $91 |
| (once every 12 months)         |                     |                                     |

OR Lens Fitting/Evaluation Exam and Contacts

<p>| | | |
|                                |                     |                                     |
|                                |                     |                                     |
| <strong>Benefit Costs (These costs are per pay period)</strong> |                     |                                     |
| <strong>Employee Only</strong>              | $2.85               |                                     |
| <strong>Two-Party</strong>                  | $5.41               |                                     |
| <strong>Family</strong>                     | $7.94               |                                     |</p>
<table>
<thead>
<tr>
<th></th>
<th>Semi-Monthly Employee Contribution</th>
<th>Monthly Employee Contribution</th>
<th>Monthly Carnegie Contribution</th>
<th>Monthly Total Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AETNA Platinum Plus</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>$127.09</td>
<td>$254.17</td>
<td>$687.21</td>
<td>$941.38</td>
</tr>
<tr>
<td>Two-Party</td>
<td>$266.95</td>
<td>$533.90</td>
<td>$1,339.44</td>
<td>$1,873.34</td>
</tr>
<tr>
<td>Family</td>
<td>$342.08</td>
<td>$684.15</td>
<td>$1,716.37</td>
<td>$2,400.52</td>
</tr>
<tr>
<td><strong>AETNA Platinum</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>$108.55</td>
<td>$217.10</td>
<td>$687.47</td>
<td>$904.57</td>
</tr>
<tr>
<td>Two-Party</td>
<td>$234.02</td>
<td>$468.03</td>
<td>$1,332.07</td>
<td>$1,800.10</td>
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<tr>
<td>Family</td>
<td>$299.87</td>
<td>$599.73</td>
<td>$1,706.93</td>
<td>$2,306.66</td>
</tr>
<tr>
<td><strong>AETNA Gold</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>$95.63</td>
<td>$191.26</td>
<td>$678.10</td>
<td>$869.36</td>
</tr>
<tr>
<td>Two-Party</td>
<td>$207.61</td>
<td>$415.21</td>
<td>$1,314.82</td>
<td>$1,730.03</td>
</tr>
<tr>
<td>Family</td>
<td>$266.03</td>
<td>$532.05</td>
<td>$1,684.83</td>
<td>$2,216.88</td>
</tr>
<tr>
<td><strong>Delta Dental HMO</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>$9.62</td>
<td>$19.24</td>
<td>$6.42</td>
<td>$25.66</td>
</tr>
<tr>
<td>Two-Party</td>
<td>$15.93</td>
<td>$31.85</td>
<td>$10.62</td>
<td>$42.47</td>
</tr>
<tr>
<td>Family</td>
<td>$23.52</td>
<td>$47.04</td>
<td>$15.68</td>
<td>$62.72</td>
</tr>
<tr>
<td><strong>Delta Dental PPO</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>$17.32</td>
<td>$34.64</td>
<td>$11.55</td>
<td>$46.19</td>
</tr>
<tr>
<td>Two-Party</td>
<td>$30.95</td>
<td>$61.90</td>
<td>$20.63</td>
<td>$82.53</td>
</tr>
<tr>
<td>Family</td>
<td>$53.33</td>
<td>$106.65</td>
<td>$35.56</td>
<td>$142.21</td>
</tr>
<tr>
<td><strong>EyeMed</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>$2.85</td>
<td>$5.69</td>
<td>$1.42</td>
<td>$7.11</td>
</tr>
<tr>
<td>Two-Party</td>
<td>$5.41</td>
<td>$10.82</td>
<td>$2.70</td>
<td>$13.52</td>
</tr>
<tr>
<td>Family</td>
<td>$7.94</td>
<td>$15.88</td>
<td>$3.97</td>
<td>$19.85</td>
</tr>
</tbody>
</table>
You can participate in the Health Care, Limited Purpose, and/or Dependent Care Spending Accounts, enabling you to pay for eligible expenses with tax-free dollars.

FLEXIBLE SPENDING ACCOUNT (FSA)

Flexible Spending Account (FSA)

An FSA is a pre-tax benefit account used to pay for eligible medical, dental, and vision care expenses that aren’t covered by your insurance plan. It’s a smart, simple way to save money while keeping you and your family healthy and protected.

The money comes out of your paycheck over the course of the year. The amount you contribute to the FSA is not subject to Social Security (FICA), federal, state, or local income taxes; effectively adjusting your annual taxable salary.

Health Care Account

You may pay for certain IRS approved medical care expenses not covered by your insurance plan, e.g., co-pays, deductibles, and other out-of-pocket expenses with pre-tax dollars.

Under the FSA, the maximum you may contribute each plan year is $3,050.

Use It or Lose It

Consider your expenses carefully before you decide how much to contribute to each FSA account. Carnegie’s FSA plan has a GRACE PERIOD that allows you an additional 2 1/2 months after the plan year (until March 15th) to incur expenses from your healthcare spending account only, that can be applied to any remaining balance in the previous FSA plan year. Claims must be submitted on or before the 90th day after December 31st. After 90 days funds will be forfeited.

Dependent Care Account

The Dependent Care FSA lets you use pre-tax dollars toward qualified dependent care. The annual maximum amount you may contribute to the Dependent Care FSA per calendar year is $5,000 or $2,500 if married and filing separate tax returns.

The IRS defines an eligible dependent as:

• A child under the age of 13
• A dependent over the age of 13 who is incapable of self-care, claimed as a dependent on your income tax return

Dependent Care Eligible Expenses

• Care for your child who is under age 13
• Before and after school care
• Babysitting and nanny expenses
• Daycare, nursery school, and preschool
• Summer day Camp

Life Event Change

Federal regulation prohibits you from changing your enrollment or the amount of your election during the plan year. You are only eligible to change your elections during the year if you have a status change. Only benefit changes consistent with the change in status are permitted.

If You Leave the Company

Your participation in the Flexible Spending Accounts will end on the date of your termination of employment. This means that you may submit for reimbursement any qualified expenses incurred on or before the date of your termination.
# FLEXIBLE SPENDING ACCOUNT (FSA)

<table>
<thead>
<tr>
<th>Healthcare FSA</th>
<th>Limited-Purpose FSA</th>
<th>Dependent Care FSA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What it Pays For</strong></td>
<td>Eligible medical, prescription, drug, dental, and vision expenses that are not covered by your healthcare plans, including deductibles and copays, eyeglasses and contact lenses, and hearing aids.</td>
<td>Eligible dental and vision expenses.</td>
</tr>
<tr>
<td><strong>How it Works</strong></td>
<td>Use your FSA debit card to pay for eligible expenses at your local pharmacy or doctor’s office. When you use your FSA debit card, eligible expenses are deducted directly from your FSA, so there’s no need to file a claim; however, always save your receipts in case you do need to verify an expense. If you don’t use your FSA debit card, you’ll need to pay for services using another method, and then submit a claim form for reimbursement.</td>
<td>Submit a claim form for reimbursement after services have been received and paid. In order for your Dependent Care FSA contributions to be considered eligible for reimbursement, your provider must claim your payments as taxable income. Because the tax rules are complex and are based on calendar year expenses, you may want to consult a tax advisor for assistance.</td>
</tr>
</tbody>
</table>
Healthcare Elections

FSA PROVIDER

Wex is an industry leader, putting employees in the driver’s seat when planning and managing healthcare expenses. Enroll in a WEX spending or reimbursement plan today.

Benefits debit card

The benefits debit card is the fastest and most convenient way to pay for eligible expenses. Just one debit card is all you need for your benefits regardless of how many plans you have with us.

Benefits eligible expenses

There are thousands of eligible procedures, items and expenses based on your plan. View our interactive list of eligible expenses at www.wexinc.com/insights/benefits-toolkit/eligible-expenses/

Knowledgebase

Once you’re enrolled, check out the knowledge-base to quickly search for answers to your questions. The knowledge-base boasts millions of views of our micro-videos, articles and step-by-step how-to’s empowering you to get the most out of your benefits. Have a question? Visit any time of day or night by logging in to your online account on www.wexinc.com

Benefits mobile app & participant portal

Access your benefits 24/7 with the WEX mobile app. Our app is free, convenient and offers real-time access to all your benefits accounts. With our benefits mobile app you can:

• Get instant updates on the status of your claims.
• File a claim and upload documentation in seconds using your phone’s camera.
• Scan an item’s bar code to determine if it’s an IRS Code Section 213(d) eligible expense.
• Report a card as lost or stolen, which cancels the card and ships you a new one.
• Log in through face recognition or fingerprint (depending on your phone).
• Check your balance and view account activity.
• Reset login credentials.

Questions when enrolled: 1-866-451-3399
Questions before you enroll: 1-844-561-1337
Email a question: customerservice@discoverybenefits.com
Submit a form: forms@discoverybenefits.com
Live chat: go to www.wexinc.com, hover over Solutions and select Participants/Employees.
Healthcare Elections

HEALTH SAVINGS ACCOUNT (HSA)

Aetna Gold Plan Only - Deposit, Grow, Save, and Pay. Extend Your Health Care Dollars.

When you elect medical coverage under the Gold Plan, a Health Savings Account (HSA is created on your behalf. An HSA is a pre-tax benefit account used to pay for eligible medical, dental, and vision care expenses that aren't covered by your insurance plan, or items that apply towards your deductible, copays, and coinsurance. It's a smart, simple way to save money while keeping you and your family healthy and protected.

The money comes out of your paycheck over the course of the year. The amount you contribute to the HSA is not subject to Social Security (FICA, federal, state, or local income taxes—effectively adjusting your annual taxable salary.

Deposit your health care dollars

Payroll Deduction: Make pre-tax payroll deductions
Deposits: Additional deposits can be made with deposit forms, website and online transfers from your bank.
Contribution limits: The IRS sets guidelines for how much you can contribute to an HSA each year. See below for individual, family and catch-up amounts.

Grow your savings

Earnings: Deposits to your HSA can eventually be invested and could earn income tax-free interest.
Carry-over: There is no "use it or lose it" - un-spent funds remain in your account if you change jobs or retire.

Pay for health care, now or later

Qualified medical expenses: Pay for current and future medical, dental, and vision expenses for you, your spouse and your eligible dependents. You can continue to use the funds in your account even if you stop participating in a high-deductible health plan (although you cannot contribute more to it).
Payment methods: Use your debit card to pay pharmacies, doctors, clinics and other health care providers on the spot. Or, withdraw funds to reimburse yourself for out-of-pocket expenses.
Tax implications: Keep your receipts! Funds used for non-qualified expenses will be taxed as income and subject to a 20% penalty. If you are 65 and older, the 20% penalty does not apply.

Save on taxes

Contributions: Contributions to your HSA are tax-deductible up to the annual limit.
Distributions: HSA funds used to pay for qualified medical expenses are tax-free.
Earnings: Interest you may earn on your HSA grows income tax free.
ANNUAL HSA CONTRIBUTION LIMITS

The IRS sets HSA contribution limits for each calendar year. These limits include Carnegie’s contributions as well as any contributions you make through payroll deductions.

When you are age 55 or older, you’re also eligible to make “catch-up” contributions which allow employees closer to retirement to save more for post-retirement medical expenses.

The HSA catch-up contribution limit is $1,000.

### Calendar Year 2023 HSA Contribution Limits*

<table>
<thead>
<tr>
<th>If you...</th>
<th>You &amp; Carnegie combined may contribute up to...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have Employee only coverage</td>
<td>$3,850</td>
</tr>
<tr>
<td>Cover dependents</td>
<td>$7,750</td>
</tr>
<tr>
<td>Are age 55+ and have and have employee only coverage**</td>
<td>$4,850</td>
</tr>
<tr>
<td>Are age 55+ and cover dependents**</td>
<td>$8,750</td>
</tr>
</tbody>
</table>

**HSA Contribution Reminders**

- Married couples with HSA-eligible family coverage will share one family HSA contribution limit of $7,750 in 2023. If both spouses have eligible self-only coverage, each spouse may contribute up to $3,850 in separate accounts.

- If both spouses with family coverage are age 55 or older, they must have two HSA accounts in separate names if they each want to contribute an additional $1,000 catch-up contribution.

---

*Not everyone is eligible to participate in an HSA. You must be enrolled in the Gold Plan. If you are enrolled in TRICARE, Medicare Part A, or another plan that is not a high-deductible health plan, you are not eligible to enroll in an HSA.

**If you do not contribute the maximum, the catch-up contribution won’t be as meaningful because it is meant to allow you to contribute more than the annual limit.
General Healthcare Services

Convenience and Care with Teladoc®

Getting Started with Teladoc®
Teladoc’s U.S. board-certified doctors are available 24/7/365 to resolve many of your medical issues through the convenience of phone, video or mobile app consults. Set up your account today so when you need care later, a Teladoc doctor is just a call or click away.

Set Up Your Account
It’s quick and easy online. Visit the Teladoc website at Teladoc.com/Aetna, click “Set up account” and provide the required information. You can also call Teladoc for assistance over the phone.

Request a Consult
Once your account is set up, request a consult anytime you need care.

Provide Medical History
Your medical history provides Teladoc doctors with the information they need to make an accurate diagnosis.

TELADOC | AVAILABLE 24/7/365

Online
It’s quick and easy online. Visit the Teladoc website at Teladoc.com/Aetna, click “Set up account” and provide the required information. You can also call Teladoc for assistance over the phone.

Mobile app
Log into your account and complete the “My Health Record” section. Visit Teladoc.com/mobile to download the app.

Call Teladoc
Teladoc can help you complete your medical history over the phone at 1-855-Teladoc (835-2362).

Teladoc does not replace the primary care physician. Teladoc does not guarantee that a prescription will be written. Teladoc operates subject to state regulation and may not be available in certain states. Teladoc does not prescribe DEA controlled substances, non therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. Teladoc physicians reserve the right to deny care for potential misuse of services. Teladoc phone consultations are available 24 hours, 7 days a week while video consultations are available during the hours of 7am to 9pm, 7 days a week.
OPTUM EMPLOYEE ASSISTANCE PROGRAM (EAP)

Stress is a necessary part of life. And sometimes it comes from positive things such as a new baby or big job promotion. Once the excitement wears off, the worries can settle in.

**How does it work?**

Call to speak with a specialist who will listen to your needs and connect you to the appropriate resource, whether it's a clinician, counselor, mediator, lawyer or financial advisor. You can either take advantage of short-term counseling or get a referral for more extended care. And, we'll try our best to accommodate any gender, language or cultural preferences.

**What's a clinician?**

A clinician may be a psychologist, or master's-level specialist trained in social work, professional counseling or family and marriage therapy.

**How much does this cost?**

As part of your benefits, EAP services are available at no extra cost to you. This includes referrals, seeing in-network clinicians, access to liveandworkwell.com and initial consultations with mediators or financial and legal experts. **Want to retain a lawyer after your consultation?** You’ll get a 25% discount.

**What other resources are available?**

You and your family also have 24-hour private access to liveandworkwell.com. This interactive website offers tools and resources to help you enhance your work, health and life. On the site, you can:

- Check your benefit information
- Submit online service requests
- Search the online clinician directory
- Use our virtual help centers to find information and resources for hundreds of everyday work and life issues
- Access financial calculators, legal articles and other tools
- Search our databases for childcare, nursing homes and other local resources
- Participate in interactive, customizable self-improvement programs
- Any member of your household can use liveandworkwell.com, even children living away from home

If you'd like help adjusting to a "new normal". The Optum EAP offers confidential support for managing:

- Stress, anxiety & depression
- Parenting & family needs
- Workplace concerns
- Sleep issues
- Substance abuse
Talkspace is a resource for you to access personal, professional, and confidential online therapy. It is accessible through the Optum EAP. With Talkspace, you can get the extra support you need in a way that works for you. You can reach out to a licensed, in-network Optum EAP Provider, 24/7.

Here's how Talkspace can fit your life:

• Access Talkspace anytime, anywhere.
• Find an Optum EAP provider with an online matching tool.
• Start therapy within hours of choosing your provider.
• Message your provider whenever — no appointments necessary.
• Get messages back throughout the day, five days a week.
• Choose real-time face-to-face video visits by appointment, when needed.

To get started,
Call Optum at 800-468-8369 to obtain an authorization code prior to registering (first visit only), choose a provider, and message anywhere, anytime. talkspace.com/connect

After you register,
Download the Talkspace app on your mobile phone. Talkspace is supported by Chrome, Firefox, Safari or Edge browsers on your desktop computer.

Talkspace is your space. To use in your time. It's private, secure, confidential and convenient. And it’s covered under the Optum Employee Assistance Program benefits as a participating provider.
Aetna participants have access to Health Advocate’s comprehensive Health Advocacy service at no cost, courtesy of Carnegie. Health Advocate is designed to help you and your family navigate healthcare and insurance-related issues, resolving problems that you may encounter.

Coverage is also available to your spouse, dependent children, parents, and parents-in-law and is completely confidential.

The Many Ways Health Advocate Helps

Don’t Know Where to Turn? We point the way.

• Find the right doctors, dentists, specialists and other providers
• Schedule appointments; arrange for special treatments and tests
• Locate the right treatment facilities or clinical trials
• Answer questions about test results, treatments and medications
• Arrange second opinions; transfer medical records

Confused by Health Insurance?

We cut through the red tape.

• Clarify benefits
• Get to the bottom of coverage denials
• Uncover billing errors
• Get appropriate approvals for covered services
• Supply providers with information needed to pay a claim

Need Eldercare Services?

We’re there for you.

• Find in-home care, adult day care, assisted living and long-term care
• Clarify Medicare, Medicare Supplement plans and Medicaid
• Coordinate care among multiple providers
• Research transportation to appointments

Want to Save on Healthcare Costs?

We help find solutions.

• Find options for non-covered services
• Negotiate payment arrangements with providers
• Provide information about generic drug options

Health Advocate’s program is NOT health insurance and is not a replacement for healthcare coverage.

Instead, Health Advocate is designed to help you navigate the healthcare and health insurance systems. How? With your first call, you will be assigned your own Personal Health Advocate.

Health Advocate’s goal is to maximize your healthcare experience without the hassles and frustrations you may typically deal with.
BurnAlong is a health and wellness platform who partners with on-site and local gyms, studios, instructors, and wellness professionals, to bring the best classes, programs, and social experience to help individuals to achieve their health and wellness goals.

BurnAlong also offers health and wellness programs in addition to fitness programs. Programs range from one week to 60-day programs.

- **Healthy Kids:** 8 Principles of Creating a Mindful Eater
- **BurnAlong Virtual Camp – Babies & Toddlers**
- **Release Fear, Anxiety & Depression Mindfulness**
- **30-Day Shred**
- **30 Days of Yoga**
- **Coping with COVID – Staying Active & Fit from Home**
- **Fit Remote 14 Day Challenge**

Take classes alone or invite friends or family to join you live. See and hear each other while taking classes together. These services are available free of charge to four (4) of your friends and/or family members.

To sign up, go to [http://mycarnegie.carnegiescience.edu/burnalong](http://mycarnegie.carnegiescience.edu/burnalong) and register today.
RETIREMENT BENEFITS

While you can update your contributions to your TIAA accounts at any time during the year. The Open Enrollment period is a good time to review your employee contributions, retirement plan options, and make any necessary updates, e.g., beneficiaries, change of address, name change, etc.

Carnegie offers you two ways to save with a 403(b) voluntary savings plan that has both pre-tax and after-tax options for you to make voluntary retirement contributions and begin saving:

403(b) Voluntary Savings Plan

Pre-Tax Option

- Contribute an amount each pay period up to the annual IRS limit. All amounts held in your retirement savings account are tax deferred. Pre-tax contributions reduce your taxable income.

Roth (after-tax) Option

- You make after-tax retirement plan contributions to a Roth account after paying current income taxes on the money you contribute.

- You can withdraw the balance and any earnings tax free if you are 59½ or older and leave the money in your designated Roth account for at least five (5) years.

Meet your savings goals faster by contributing a fixed amount each pay period, up to the IRS limit.

- Maximum employee elective contribution is $22,500 for 2023 (combined pre-tax and Roth contributions) for employees under age 50.
- Employee catch-up contribution (if age 50 or older by year end is $7,500) to a max contribution limit of $30,000 in 2023.

Carnegie does not match these contributions or contribute to this account.

Employees must register and set up their accounts directly on the TIAA website. From there you can enter your beneficiaries and select and/or adjust your contribution amounts any time throughout the year.

https://www.tiaa.org/public/tcm/carnegiescience
Creating a financial plan helps you see the big picture and set long and short-term life goals, a crucial step in mapping out your financial future. When you have a financial plan, it’s easier to make financial decisions and stay on track to meet your goals.

**Buying a home. Saving for college. Retirement planning.** We all have financial goals, but often have no idea how to make them happen. Greenspring Advisors can help you create a financial roadmap to chart the best route to achieve your financial goals.

**Greenspring Advisors provides:**

- Financial Planning Tools – including calculators to help with paying down debt, creating a budget and more
- On-demand access to a team of CERTIFIED FINANCIAL PLANNER™ Professionals
- Online resources including access to 200+ articles, videos and webinars

To learn more about Greenspring Advisors and the services they provide for the Carnegie community go to: [https://advice.greenspringadvisors.com/support/home](https://advice.greenspringadvisors.com/support/home)
Legal & Identity Protection Services

MetLife

METLIFE LEGAL PLAN

LOCATING A NETWORK ATTORNEY

1 Call Hyatt Legal Plans at 1-800-821-6400
reference your company name or group number and a Client Service Representative will assist you in locating a network attorney in your area and provide a case number

2 Call your attorney and provide your case number to make an appointment.

You're done!
When using a network attorney, no claim forms or co-payments are required — the attorney handles all the paperwork.

Covered Services

- MONEY MATTERS
- HOME & REAL ESTATE
- ESTATE PLANNING
- FAMILY & PERSONAL
- CIVIL LAWSUITS
- ELDER-CARE ISSUES
- VEHICLE & DRIVING

With a Network Attorney there are:
- No waiting periods or claim forms
- No deductibles or copayments
- No attorney fees for covered services

Cost Effective
Convenient payroll deduction
Over 14,000 attorneys to choose from
Freedom to use any attorney*

LifeLock

Eligible employees may elect coverage at their cost as a new hire, or during annual open enrollment. One in four people has their identity stolen every year. Unfortunately, free credit monitoring only alerts you to credit score changes.

LifeLock not only has proprietary technology to detect a variety of identity threats, but also, if you do have a problem, LifeLock’s U.S.-based team of specialists can fix it.

3 Levels of Service
LifeLock offers three levels of service for Carnegie employees:

LIFELOCK BENEFIT ELITE™ Designed to help protect against identity theft, plus monitor for threats to your identity and financial assets†.

LIFELOCK ADVANTAGE™ Provides enhanced protection including important notifications beyond financial and credit fraud†.

LIFELOCK ULTIMATE PLUS™ Our most comprehensive protections—enhanced services include bank account application and takeover alerts.

Semi-Monthly Plan Options

<table>
<thead>
<tr>
<th>COVERAGE LEVEL</th>
<th>LifeLock Advantage™</th>
<th>LifeLock Benefit Elite</th>
<th>LifeLock Ultimate Plus™</th>
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<tbody>
<tr>
<td>Employee Only</td>
<td>$8.50</td>
<td>$4.25</td>
<td>$12.75</td>
</tr>
<tr>
<td>Employee + Spouse/Domestic Partner</td>
<td>$16.99</td>
<td>$8.49</td>
<td>$25.49</td>
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<tr>
<td>Employee + Children</td>
<td>$12.75</td>
<td>$7.43</td>
<td>$18.06</td>
</tr>
<tr>
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</tr>
</tbody>
</table>
The Standard is Carnegie's new Life & Disability Insurance provider. You have access to additional benefits that help protect your family's financial security in the event of illness, serious injury, or death.

<table>
<thead>
<tr>
<th>Basic Life Insurance</th>
<th>Carnegie provides, at no charge*: all regular full-time employees a basic life insurance benefit in the amount of two times annual salary to a maximum of $200,000**.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Voluntary Elective Life Insurance</td>
<td>Regular full-time employees of Carnegie Science have the option to purchase additional life insurance. Employees are eligible for guaranteed issue of $200,000. For your spouse, you may purchase up to 100% of the amount you buy on your own life up to $500,000. You may purchase $10,000 of coverage for each child. The guaranteed issue amounts are $100,000 for spouse and $10,000 for each of your eligible children with no medical underwriting required for your dependent children. During this open enrollment period only, The Standard will allow employees to elect up to the guaranteed issue for their Voluntary Life Insurance with no medical underwriting. This 2023 Open Enrollment period will be the only time you will be able to take advantage of this.</td>
</tr>
<tr>
<td>Basic AD&amp;D Insurance</td>
<td>Accidental Death and Dismemberment - Carnegie provides, at no charge*: all regular full-time employees a basic AD&amp;D insurance benefit in the amount of two times annual salary to a maximum of $200,000**.</td>
</tr>
<tr>
<td>Long-Term Disability (LTD)</td>
<td>Carnegie Science provides benefit-eligible employees long-term disability income coverage should you have a qualified disability and are unable to work. The benefit is 60%*** of your monthly income to a monthly maximum of $12,500.</td>
</tr>
</tbody>
</table>

* This is a company-paid benefit
** Employees pay tax on any amount over $50,000
*** Age reductions apply – based on Social Security Normal Retirement Age (SSNRA)

For more information, tools, and resources that can help you take better advantage of your employee benefits, visit https://www.standard.com/
Carnegie provides this employee-paid benefit to help protect your family’s financial security in the event of illness, serious injury, or death.

Eligible employees may elect coverage at their cost as a new hire, or during annual open enrollment.

Short-term disability coverage offers you the following:

• Employees will receive 60% of your weekly salary up to a maximum of $2,500 per week, for up to thirteen (13) weeks, depending on the disability.

• There is a 7-day elimination period on Illness.

• There is a pre-existing condition limitation for anything you consulted with a physician on, were treated for or took prescription medications for in the three (3) months prior to electing this plan. Those pre-existing conditions would be excluded for 12 months.

**Short Term Disability Benefit Details**

<table>
<thead>
<tr>
<th>Definition of Earnings</th>
<th>Basic weekly earnings (based on annual earnings and excluding bonuses and commission)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elimination Period</td>
<td>Accident - 0 days</td>
</tr>
<tr>
<td></td>
<td>Illness - 7 days</td>
</tr>
<tr>
<td>Benefit Duration</td>
<td>13 weeks (included elimination period)</td>
</tr>
<tr>
<td>0% of Benefit</td>
<td>60% of salary</td>
</tr>
<tr>
<td>Maximum Weekly Benefit</td>
<td>$2500</td>
</tr>
<tr>
<td>Minimum Weekly Benefit</td>
<td>$25</td>
</tr>
</tbody>
</table>

**NOTE:** If you are a current employee electing coverage for the first time, either during open enrollment or due to a life event change, the cost of coverage displayed in Ceridian will show as $0.00. *Your actual cost will not be calculated until your EOI is submitted and approved.*

**California Residents:**

The state of California provides our employees with state sponsored short-term disability benefits. If you work and reside in California, you may not need to elect short-term disability benefits through Carnegie.
ELECTIVE INSURANCE

Carnegie offers valuable supplemental coverage options to complement your core coverage options. You’ll find more information about each of the plans listed below on the enrollment site, or on the HR website at: hr.carnegiescience.edu/health/elective-benefits

Group Critical Illness

Provides benefits when diagnosed with a major illness or disease. Critical illness insurance provides employees an affordable protection from the financial hardship that may accompany a critical illness. If you suffer a critical illness such as cancer, heart attack, or stroke, your financial burden may include many expenses not covered by medical insurance. The cash benefit can be used any way the employee wishes—from paying medical copays and deductibles, to covering everyday expenses such as mortgage payments, groceries, and utilities. You can elect this benefit in a choice of two amounts for yourself, as well as elect for your spouse and/or children.

Accident Insurance

Despite having medical and disability insurance, many people are simply not prepared to pay all of the expenses that come with their injuries. Supplemental accident insurance is an affordable way for you to protect yourself from costs that aren’t covered by these more traditional plans. Accident insurance provides benefits when you are injured or sick. Benefits are paid directly to you and in conjunction with coverage by your medical provider.

A $50 wellness benefit is available just by having your annual physical. Examples of other benefits include:

- Urgent Care: $75.00
- Emergency Room: $175.00
- Fracture (broken arm)- $385.00 Closed / $770.00 Open
- Testing including MRI, Ultrasound and CAT scan: $150.00
- Medical Equipment including crutches: $125.00
CARNEGIE PERKS

Carnegie offers several additional benefits that provide employees with different ways to save. From our commuter benefit program to insurance for your pets. These “Carnegie Perks” are meant to provide you with additional options to complement your core and voluntary coverage options. You’ll find more information about each of the perks listed below on the HR website.

**Employees may enroll or change your participation anytime.**

### Commuter Benefit Program

We offer employees pre-tax deductions available for Transit and Parking FSA accounts through Commuter Check Direct. Carnegie will contribute up to $135 to cover part of the cost of a transit pass for the public transit system, qualified parking, or reimbursement of bicycling costs (up to $20 per month). This benefit must be used only for your daily commute to and from work and not for personal travel. Any unused transit amount submitted by Carnegie will credit back to Carnegie’s account. The pre-tax amount you elect will roll-over to the next month. Parking and Mass Transit funds will be on the same card and elections are managed on a monthly basis.

The program is monthly program and orders must be entered by the 5th of the month for the following benefit period. For example, to receive an order for use in January, you must place your order before December 5th.

To enroll in this program, go to [https://mycarnegie.carnegiescience.edu/commuting-subsidy](https://mycarnegie.carnegiescience.edu/commuting-subsidy) for instructions on how to enroll in the program.

### TicketsatWork

TicketsatWork offers discount tickets to major attractions and events across the country. There is no charge to participate in program. TicketsatWork is a unique benefit offered exclusively to Carnegie employees that offers exclusive travel and entertainment discounts. We realize that building lasting memories with family and friends helps you return to work recharged. As a Carnegie employee you have access to up to 50% savings on thousands of these experiences.

Visit [www.ticketsatwork.com](http://www.ticketsatwork.com) to sign up, click “Become a Member” and enter our company code. It's cost-free, simple to enroll, and will provide you offers on movies, hotels, shows, concerts, theme parks, sporting events and more. Go to [https://mycarnegie.carnegiescience.edu/ticketsatwork](https://mycarnegie.carnegiescience.edu/ticketsatwork) to get the company code.

### Nationwide Pet Insurance

My Pet Protection Insurance offered through Pet insurance helps to cover the cost of veterinary treatment in the event of an insured animal falling ill or being injured in an accident. Carnegie has partnered with Nationwide to provide employees with access to discounts on pet insurance. Employees that enroll in Pet Protection Insurance through Nationwide, will enjoy group preferred pricing on your premiums. Policy premiums are paid directly by the employee and not through Carnegie.

To enroll your pet or pets, go to [https://benefits.petinsurance.com/carnegie-science](https://benefits.petinsurance.com/carnegie-science) to register and view available plans.
# MEMBER RESOURCES

## NEED HELP?

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Details</th>
<th>Website/Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aetna Medical - Network (Find a Doctor)</td>
<td>(800) 872-3862</td>
<td>aetna.com (Choice POS II Network)</td>
</tr>
<tr>
<td>WEX - FSA/HSA</td>
<td>(866) 451-3399</td>
<td><a href="http://www.wexinc.com">www.wexinc.com</a></td>
</tr>
<tr>
<td>Teladoc</td>
<td>(855) 835-2362</td>
<td>teladoc.com/aetna</td>
</tr>
<tr>
<td>Commuter Check Direct</td>
<td>(888) 235-9223</td>
<td>login.commuterbenefits.com/</td>
</tr>
<tr>
<td>Health Advocate</td>
<td>(866) 695-8622</td>
<td>healthadvocate.com/ciw</td>
</tr>
<tr>
<td>Delta Dental DHMO (DeltaCare USA)</td>
<td>(800) 422-4234</td>
<td>deltadentalins.com/deltacareusa</td>
</tr>
<tr>
<td>Delta Dental PPO</td>
<td>(800) 932-0783</td>
<td>deltadentalins.com</td>
</tr>
<tr>
<td>EyeMed Vision Care</td>
<td>(866) 939-3633</td>
<td>eyemed.com</td>
</tr>
<tr>
<td>The Standard - Life and AD&amp;D</td>
<td>(800) 525-4542</td>
<td>standard.com</td>
</tr>
<tr>
<td>The Standard – Disability</td>
<td>(800) 538-4583</td>
<td>standard.com</td>
</tr>
<tr>
<td>The Standard – Critical Illness</td>
<td>(800) 268-2525</td>
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<tr>
<td>The Standard – Accident</td>
<td>(800) 541-7846</td>
<td>standard.com</td>
</tr>
<tr>
<td>UNUM – Short Term Disability</td>
<td>(800) 538-4583</td>
<td>unum.com</td>
</tr>
<tr>
<td>Optum Health – EAP</td>
<td>(800) 468-8369</td>
<td>liveandworkwell.com (Code CIW)</td>
</tr>
<tr>
<td>MetLife Legal Plan</td>
<td>(800) 438-6388</td>
<td>metlife.com/mybenefits info.legalplans.com (Code 8210498)</td>
</tr>
<tr>
<td>LifeLock Identity Theft Protection</td>
<td>(800) 607-9174</td>
<td>lifelock.com</td>
</tr>
<tr>
<td>Nationwide Pet Insurance</td>
<td>(888) 899-4874</td>
<td>benefits.petinsurance.com/carnegie-science</td>
</tr>
<tr>
<td>Tickets at Work</td>
<td>(800) 331-6483</td>
<td>ticketsatwork.com</td>
</tr>
<tr>
<td>TIAA</td>
<td>(800) 842-2252</td>
<td><a href="https://www.tiaa.org/public/tcm/carnegiescience">https://www.tiaa.org/public/tcm/carnegiescience</a></td>
</tr>
</tbody>
</table>

## Carnegie Science Resources

- **Health Advocate**: (866) 695-8622 [healthadvocate.com/ciw](http://healthadvocate.com/ciw)

- **Human Resources | Benefits Team**
  - Yulonda White (202) 939-1110
  - Isabelle Logossou (202) 387-6400 x261
  - Lauren Gilmer (410) 246-3036 [hr@carnegiescience.edu](mailto:hr@carnegiescience.edu)

- **Employee One Benefit Advocate Team (BAT)**
  A centralized service team dedicated to providing employees and dependents with claims resolution assistance and answers to your day-to-day questions.
  - 1-877-719-EMPI (3671) [mybenefits@eonebenefits.com](mailto:mybenefits@eonebenefits.com)

- **Ceridian Dayforce Employee Self Service**
  To enroll, log on to the Employee Self Service website: [https://dayforce.carnegiescience.edu](https://dayforce.carnegiescience.edu)

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This guide is intended to give you an overview of the benefits offered by Carnegie Science. All specific plan provisions are described in the legal documents governing the plans. If there are any discrepancies between this booklet and the plan’s legal documents, the legal documents will govern. Any of the benefits offered by Carnegie Science may be evoked, suspended, or terminated at the company’s sole discretion at any time.
OPEN ENROLLMENT CHECKLIST

- Read this Benefits Guide
- Review Your Current Elections
- Review the Rate Sheet for 2023 benefit options
- Attend the Virtual Open Enrollment Information Session
- Login to Ceridian anytime between Nov 1-Nov 18 to make your 2023 benefit elections
- Verify Your Dependents & Beneficiaries
- If you had a Flexible Spending Account in 2022, you must re-enroll for 2023 coverage
- Once you have made your 2023 elections—Don’t Forget to Submit!

Remember:
If you log into the Open Enrollment section in Dayforce and actively click on ANY of the available benefits, your enrollment will no longer be passive. You will then have to actively update ALL of your benefit elections for 2023.

Have a Happy, Healthy Plan Year!

2023 OPEN ENROLLMENT VIRTUAL INFORMATION SESSIONS

<table>
<thead>
<tr>
<th>Tuesday</th>
<th>Thursday</th>
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<tbody>
<tr>
<td>October 25</td>
<td>October 27</td>
</tr>
<tr>
<td>11:00 a.m. PT/2:00 p.m. ET</td>
<td>10:30 a.m. PT/1:30 p.m. ET</td>
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