DENSO
Crafting the Core

2025 DENSO BENEFITS GUIDE

Find your place on DStreet

ExpressWay MainStreet OpenRoad Surest

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Summary of Benefits

DENSO offers many benefits and resources that are competitive, diverse, and flexible to help meet your health and wellness needs. This guide provides a general overview of the health plan options and well-being programs available for you and your family. It also describes the tax savings and protection plans along with benefits automatically provided by the company and those you can elect voluntarily.

DENSO Associates have the option to enroll in the following pre- and after-tax plans:

Plan	Options	Vendor	Page
Medical and Prescription	MainStreet OpenRoad ExpressWay Surest	**Medical and Prescription**: UnitedHealthcare **Mental Health and Substance Abuse**: Behavioral Health Systems, UnitedHealthcare (Surest)	12-18 21
Dental	Dental Core	Delta Dental of Tennessee	17
	Dental Plus		
Vision	Vision	Superior Vision by MetLife	18
Health Care Flexible Spending Account	Refer to IRS.gov for most current guidelines on FSA contribution maximum	Businessolver: MyChoice Accounts	22
Day Care Flexible Spending Account			
Health Savings Account (HSA)	Must be enrolled in OpenRoad, the high deductible health plan option	Businessolver: MyChoice Accounts	23
Optional Life Insurance	1x-5x Annual Base Pay	Reliance Matrix	25
Spouse Life Insurance	$25,000 - $300,000 (in $25,000 increments)		
Child Life Insurance	$10,000 on each child		
Voluntary Critical Illness	$10,000 benefit at diagnosis for covered illness	Allstate	27
Voluntary Accident	Payment based on schedule of benefits		
Voluntary Hospital Indemnity	Payment based on schedule of benefits due to hospital confinement	Reliance Matrix	28
Voluntary Identity Theft Protection	Monitors personal, social, and credit information, and provides restoration services	Identity Force	27
PTO Cash-out	Voluntary, taxed at time of payment	DENSO	26

Below are the company-paid benefits provided to associates automatically with no action required to enroll:

Program	Description	Vendor	Page
Healthy Horizons	Wellness program	HealthbyDesign (HbD)	19-20
Employee Assistance Program (EAP)	Confidential advice/support	Behavioral Health Systems	
Diabetes Management Program* **Hypertension Management Program***	Personalized education and support for chronic condition *(Note: must be enrolled in a DENSO medical plan, available to all associates and covered dependents over 18 years of age)*	Teladoc Health	
Musculoskeletal (MSK) Program*		Hinge Health	
Digestive Management Program*		Cylinder (formerly GIThrive)	
Medical Second Opinion*	Medical review of diagnoses, medications, etc.	2nd.MD	
Surgical Concierge*	Surgical coordination	Carrum Health	
Weight Management Support*	Weight loss and mood support	Noom	
DENSO Retirement Savings Plan	Associate contributions, company match, annual discretionary company contribution	Empower Retirement	24
Basic Life**	1.5x annual base pay	Reliance Matrix	25
Basic AD&D**	1.5x annual base pay		
Business Travel Accident	$250,000	ACE/Chubb	
Short-Term Disability (STD)	60% to 100% of weekly base pay, dependent upon position and length of disability	Reliance Matrix	26
Long-Term Disability (LTD)	60% of monthly base earnings		
Paid Time Off (PTO)	13 paid holidays (annual schedules vary). Go to *Well-being & Other Benefits* on DENSOBenefits.com to view the annual holiday and PTO schedules		26

*Must be enrolled in a medical plan and over age 18 to enroll

**Beneficiary information must be entered into Benefitsolver

When, Where, and How to Enroll in Your Benefits

Open Enrollment for the 2025 Plan Year[1]

Open Enrollment is an opportunity to review your current benefit plan elections and determine if you want to make changes for the upcoming year to better meet the needs of you and your family. After Open Enrollment ends some changes are allowed for certain benefits only through December 15 each year: FSA contributions, dependent coverage, and PTO cash-out election.

DENSO's Open Enrollment dates to elect benefits for the 2025 calendar year are:

Open Enrollment Dates
October 22 – November 7, 2024

Selections made during Open Enrollment are effective **January 1, 2025 through December 31, 2025**.

This Open Enrollment is a passive enrollment, meaning associates do not need to log into the system and take action to enroll in certain benefits. Use the Open Enrollment Checklist on page 7 to guide you through the process.

[1]This information does not apply to anyone hired in 2025.

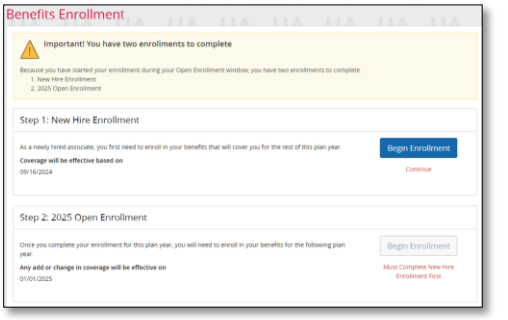
New Hires

Newly hired associates are eligible for health benefits the first day of the month following 30 days from your date of hire. Eligibility for short-term disability and long-term disability is 6 months after your date of hire. Register for an account and enroll in benefits at myDENSObenefits.com.

Important Note: If you do not make your health benefit elections within 30 days from your hire date, you will be opted out of all electable benefits.

Remember: Once you enroll or miss your enrollment deadline, your benefit elections cannot be changed until the next annual enrollment period or within 30 days of an eligible family status change (see *Making Changes During the Year* on page 11).

If you are hired in 2024 but after Open Enrollment closes: You must complete two enrollments – one for your 2024 benefits and one for your 2025 benefits. Benefitsolver will guide you through both. See image on right.



Benefitsolver: DENSO's Benefits Administration Platform

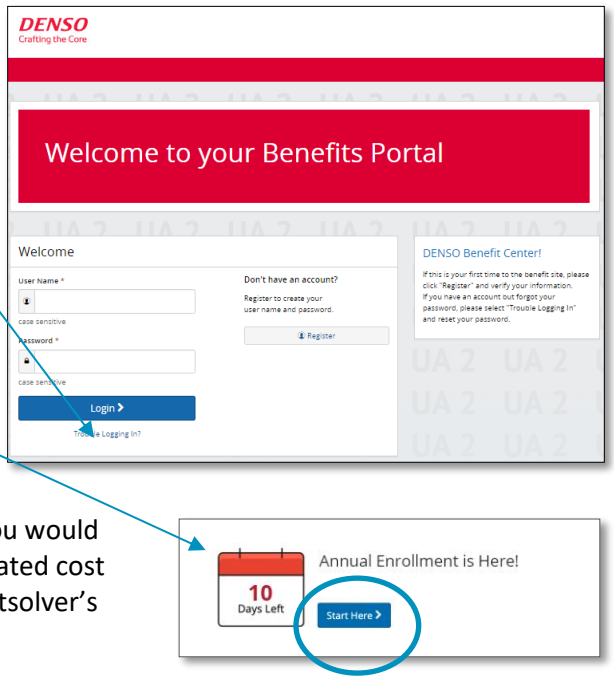
DENSO uses Benefitsolver as our online benefits administration platform. If you do not have an account you must register before you can review your benefit selections and make elections during Open Enrollment or to make changes during the year.

Note: Oracle is DENSO's Human Resource system of record. Benefitsolver was added in 2023 to increase ease of use and administration while centralizing all health benefits into one space, myDENSObenefits.com.

What's the Difference?

ORACLE	DENSO Benefits.com	benefitsolver myDENSObenefits.com
Houses DENSO career history, job postings, training, performance reviews, and personal contact information	Library of benefits resources, vendor contacts, plan documents, and links to vendor sites, also accessible to dependents (public area only)	Home to personal benefits information, HSA/FSA, beneficiaries, dependents, Open Enrollment, PTO cash out elections, and changes to benefits

Instructions for 2025 Open Enrollment



- Go to **myDENSObenefits.com**.
  - If you need to create an account, click "Register" and follow the prompts. You can go to **DENSObenefits.com** for detailed instructions.
  - If you lost your password, click on the **"Trouble Logging In?"** link on the home screen. A link to reset your password will be sent to your preferred email address.
  - Once logged in, find the Open Enrollment banner near the top of the screen. Click the **"Start Here"** button to begin the enrollment process.
  - Benefitsolver will guide you step by step, asking if you would like to enroll, who to cover, and shows you an estimated cost after each election. If you get stuck ask **Sofia**, Benefitsolver's chatbot, for help.
  - After you make your elections, you will be asked to review and approve your choices.
    - **"Looks Good**" confirms what you elected or waived.
    - **"Approve"** means you made all the elections you want and selected your family members to cover. **You're not done yet!**
    - **"I Agree"** means you understand the cost for the elections you've made and agree to pay the fees for the coverage. Click **"I agree"** to complete your enrollment.
    - You can go back and make changes at any time during Open Enrollment, but you must click **"Approve"** and **"I Agree"** to save your changes.
  - At the end of the enrollment process you may also be required to provide documentation to prove your relationship to each dependent. Visit the Benefitsolver site anytime you want to view your benefits, update your HSA election, change your beneficiaries, or make a change to your coverage (if you experience a qualifying life event).

Important Reminders if You Take No Action

- Your health plan elections and covered family members will remain the same.
- Your Health Care and Day Care FSA will reset to $0 for 2025.
- Your HSA contributions will default to $0 for 2025, however, you may make changes to your contributions at any time during the year at **mydensobenefits.com**.
- Your PTO Cash Out election will default to 0 (zero) hours in 2025.

Even if you do not have changes to make during Open Enrollment you should access Benefitsolver to review your plan elections, confirm the coverage for you and your dependents is correct, elect 2025 PTO cash out, enroll or re-enroll in FSA or HSA, and add beneficiaries to your applicable benefit elections.

Open Enrollment Checklist

☐ **Read this guide** to learn about your benefit options and how to enroll or make changes to your benefits.

Also review the **DENSO Benefit Changes Newsletter**, which was sent to every associate home and is available for download at DENSObenefits.com. Discuss the benefit options with your family.

☐ **Explore resources** offered to help make your benefit decisions (refer to page 29 of this guide), including the Decision-Making Tool by Benefitsolver.

☐ **Have your documentation ready** before you start Open Enrollment.

- To add beneficiaries, you will need their first and last name. You may also add their date of birth, Social Security Number, home address, and phone number.
- To add dependents, you will need supportive documentation to prove your relationship. Such documents include:
    - Marriage Certificate
    - Birth or Adoption Certificate
    - Court Order
    - Take a picture of the document with your phone or scan it to a computer. Then upload the image into Benefitsolver or on the MyChoice mobile app.
- If enrolling or re-enrolling in a tax-savings program like HSA or FSA, calculate how much you want to contribute from each paycheck. Follow the links below for helpful tools and information:

businessolver.com/mychoice-accounts/participants/flexible-spending-account

businessolver.com/mychoice-accounts/participants/health-savings-account

☐ **Complete Open Enrollment for 2025 benefits through Benefitsolver at myDENSObenefits.com between October 22 – November 7.** You will access Benefitsolver to:

• Change plans (medical, dental, vision, optional life)	• Enroll or re-enroll in a Health Care or Day Care Flexible Spending Account
• Change tier coverage	• Enroll or elect contributions in a Health Savings Account
• Add or remove dependents	• Enroll in voluntary benefits
• Update beneficiaries	• Elect to cash out Paid Time Off (PTO) in 2025[1]

[1] If you elect to cash out PTO during Open Enrollment in 2024, PTO Cash Out payments will be in December 2025. All affiliates have common payout timing.

Learn More: Self-funded Plans

Self-funded means the company pays the majority of the cost for their employee's medical and healthcare claims. The remaining cost is transferred to the employee through premiums and copays. Often the company contracts with an independent third-party administrator (TPA) for plan administration. DENSO is self-funded.

Being self-funded means DENSO can tailor our benefits to fit our unique population's needs. A fully-insured or traditional group healthcare coverage pays a pre-determined premium to an insurance carrier and is limited in what benefits are offered to employees.

What to Do After Enrolling

My, Oh MyChoices!

Benefitsolver's family of tools is called the MyChoice program.

mychoice Accounts

MyChoice Accounts is home to DENSO's HSA and FSA benefits.

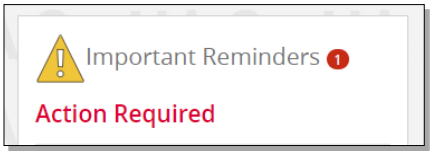
MyChoice MOBILE APP

MyChoice mobile app allows you to take your benefits on the go, upload documents, and submit claims.

OpenRoad and Health Savings Account

- If you enrolled in the high deductible medical plan option, OpenRoad, you may be eligible for a Health Savings Account (HSA). MyChoice Accounts, through UMB Bank, administers our HSA program. You can manage your balance and claims directly at **myDENSObenefits.com**.
- If you choose to elect a new HSA during Open Enrollment, you will have the option to agree to Terms and Conditions to initiate a new account with MyChoice Accounts, if you don't already have one. You will complete the eligibility attestation for the company contribution on **myDENSObenefits.com** during Open Enrollment.
- **HSA Contributions** - You may elect to start, stop, or change your contribution amount to your HSA at any time during the year by logging into Benefitsolver at **myDENSObenefits.com** and clicking "MyChoice Accounts."
    - Note: like the HSA, the Flexible Spending Accounts (FSA) vendor is Businessolver and is administered through MyChoice Accounts. See page 22 for more details about the FSA.

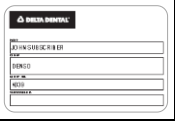
Optional Associate Life and Spouse Life Insurance



If you elect to increase life insurance coverage on yourself or your spouse during Open Enrollment, **you may need to complete an Evidence of Insurability (E of I) form by March 1, 2025.** Complete this on Benefitsolver by following the prompts on the "Action Required" section of your homepage. If you signed up for text alerts you will receive a reminder to submit your documentation.

ID Cards

- You will receive a new co-branded card for Medical/Prescription.
- Anyone newly enrolled in an FSA or HSA for 2025 will receive a new MyChoice Account card.
- **New Hires in 2025** – You will receive ID cards a few weeks after enrolling in the corresponding plans.
- See chart below for examples of insurance cards:

Plan	Medical/Prescription	Dental	Vision	Flexible Spending Accounts (FSA)	Health Savings Account (HSA)
Carrier	UnitedHealthcare, Optum Rx	Delta Dental of Tennessee	Superior Vision by MetLife	**MyChoice Accounts**	**MyChoice Accounts** through UMB Bank
Note	If you have more than 4 covered dependents you will receive multiple cards.			Access MyChoice Accounts, make changes, and submit claims through Benefitsolver at myDENSObenefits.com or MyChoice app	
Card Sample	**OE/MS/EW** **Surest**				

Need Additional ID Cards? Dependent names will appear on Medical/Rx ID cards. To order additional ID cards for any plan, call the DENSO Benefits Helpline at 1-855-311-2115 or email at denso@benefitadvocates.net.

Important Notes About Your Plans

Who Is Eligible?

Associates

DENSO Associates are eligible for health benefits on the first day of the month following 30 days from your date of hire. You are eligible for retirement benefits, basic life, accidental death & dismemberment, business travel accident, Healthy Horizons, and Employee Assistance Program on your date of hire. You are eligible for short-term and long-term disability 6 months after your date of hire.

Dependents

Eligible dependent benefits are also effective as of the first day of the month following 30 days from the covered associate's date of hire. Eligible dependents include:

- Your lawful spouse
- Your registered domestic partner (see details below)
- Your or your spouse's dependent child up to age 26, including:
  - A natural, step, or legally adopted child.
  - A child placed for adoption.
  - A child for whom legal guardianship or legal custody has been awarded to you or your spouse by a court of competent jurisdiction.
  - An unmarried child, regardless of age, provided they have been continuously incapable of self-support because of a mental or physical handicap that existed prior to age 26.
    - Proof of disability must be submitted in order to cover a dependent over age 26. Required documentation includes a copy of the Social Security benefits approval.

Note: Coverage will automatically end on the last day of the month in which your dependent child turns 26 unless disability status has been provided and approved.

State of California: Registered Domestic Partner Coverage

You may enroll your registered domestic partner under the medical, dental, vision, and optional group term life insurance plans. However, the IRS does not permit pre-tax benefits to be provided for a registered domestic partner, and the "value" of the coverage for your domestic partner will appear as imputed income on your paycheck and on the W-2 at the end of the year.

Special Considerations

DENSO Associates Married to Other DENSO Associates

Benefitsolver will prevent you from making elections that may duplicate coverage. Therefore, make your elections carefully together:

- **Medical Plans, including Prescription and Behavioral Health** - You can each enroll separately and elect "Associate Only" coverage, or one of you can elect to cover the other as a dependent if the other associate has opted out. Only one of you will be able to cover your eligible dependents.
- **Dental Plans** - You can each elect to cover yourself and your dependents. Each policy will pay up to the annual or lifetime maximums without coordination of benefits.
- **Vision Plan** - You can each enroll separately and elect "Associate Only" coverage, or one of you can elect to cover the other as a dependent if the other associate has opted out. Only one of you will be able to cover your eligible dependents.

- **Optional Associate and Spouse Life** - Each associate may elect Optional Life. Associates married to another associate cannot elect Spouse Life. The life insurance company will not pay a claim for someone as both an associate and a dependent.
- **Optional Child Life** - Only one associate may elect coverage. The life insurance company will not pay a claim twice on the same child, even if both parents paid the premium.
- **Voluntary Critical Illness, Accident, and Hospital Indemnity** - Each associate may elect their own coverage and one of you can elect to cover your eligible dependents, or one associate may choose to cover the spouse and eligible dependents on one policy.

DENSO Associates with Children Who Are DENSO Associates

- The same rules above apply for medical, dental, and vision.
- DENSO does not always know when an associate is covered as the dependent of another associate although the Benefitsolver system will try to prevent this. Reach out to your HRBP if you have questions.
- **Optional Child Life** - Once a child becomes a DENSO Associate, they are no longer eligible to be covered by a child life policy. Claims will not be paid for someone as both an associate and a dependent.
- **Voluntary Critical Illness, Accident, and Hospital Indemnity** - Each associate may elect their own coverage or elect to cover their eligible dependents. Claims are not paid for someone as both an associate and a dependent.

Associates with Family Members in Other Countries Who Are Expected to Move to the U.S.

If you have eligible family members living outside the United States who are not currently covered by DENSO's plan, be sure to add them during Open Enrollment if you want to cover them at any point in the next plan year.

It is not a family status change to add them to your plan when they come to live in the United States.

Coordination of Benefits (COB)

Medical COB

If you or a family member are covered by two or more medical plans, Coordination of Benefits (COB) determines which plan pays first (primary) and which plan pays second (secondary). If DENSO's plan pays secondary, it will only pay if the primary plan paid less than DENSO's plan would have if it were primary. DENSO's plan will always be secondary to any medical or personal injury payments under an auto policy. The maximum combined payment you can expect from all plans cannot exceed 100% of the total allowable charge. Therefore, having dual coverage is not always the best choice financially. More details are available in the Summary Plan Description SPD which can be viewed/downloaded from DENSOBenefits.com.

Dental COB

Coordination of Benefits works differently for dental. DENSO's plan (even if it is secondary coverage) will pay as if it is primary, not to exceed 100% of the total allowable charges.

Coverage Verification

UnitedHealthcare (UHC) may require you to verify whether your dependents have other coverage. You will be notified by mail regarding this requirement. Respond by:

- Mailing the verification form back to UHC,
- By calling the number on the back of your UHC ID card, or
- By fax to the UHC COB update line: 801-567-5498.

Failure to respond may result in claim payment delays.

Making Changes During the Year

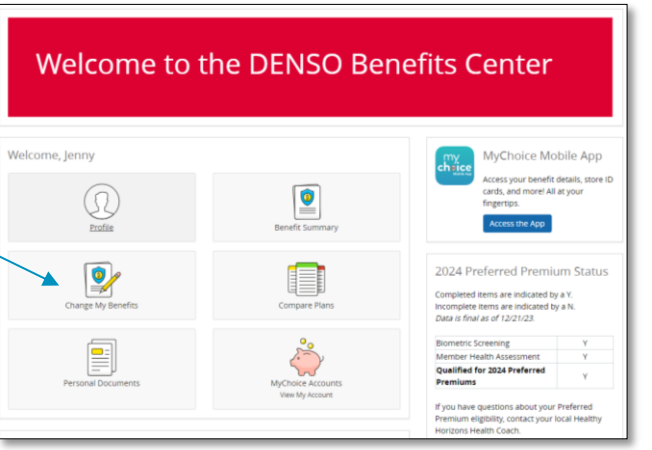
Consider your choices carefully when making benefit elections. Once you make your elections and/or choose the dependents you want to cover on the plans, they remain in effect until the next open enrollment period, unless you have a qualified family status change during the year.

Examples of qualified family status changes include:

- Your marriage or divorce
- Your child's birth or adoption
- Your, your spouse's, or your child's gain or loss of coverage due to change of employment status

Refer to your SPD for a full list of qualified events.

Important: If such an event occurs, you must make your changes within **30 days** of the family status change (or within 60 days for your child's birth or gain/loss of coverage) by logging into **myDENSObenefits.com** and clicking "Change My Benefits" then choose the appropriate Life Event.



Supportive documentation is required, which could include:

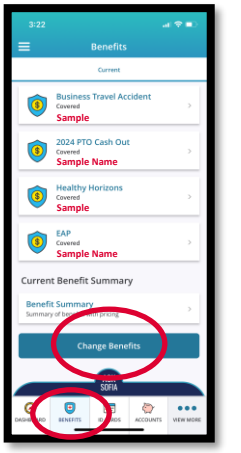
- Marriage Certificate,
- Final Divorce Decree,
- Birth or Adoption Certificate,
- Court Order, or
- Gain/Loss of Coverage Letter

Access myDENSObenefits.com within 30 days of your event to begin making your benefit changes even if you have not received the applicable supporting documentation yet. Reach out to your local HRBP if there is a delay obtaining the necessary documentation.

Only elections consistent with the status change will be allowed.

Some items can be changed or updated at any time throughout the year and do not require additional documentation:

- Change of beneficiary
- Update dependent information (Social Security Number, date of birth, or name)
- HSA contribution
- Updates to voluntary plans (remove dependents, drop coverage; you can only add or increase coverage or dependents during Open Enrollment)



For more information about Family Status Changes or to initiate the Family Status Change process, go to myDENSObenefits.com or use the mobile app.

A job aid is available at DENSOBenefits.com, or you can ask Benefitsolver's chatbot, Sofia, for assistance.

Learn More: Meet Sofia!

If you get stuck during Open Enrollment or need to ask a question, there is **a chat bot named Sofia** that can help you at any time. Sofia can also answer questions specific to your benefits elections and can even tell you a joke!

Medical and Prescription Plans

Medical Plans

DENSO's medical plans are administered by UnitedHealthcare (UHC) and Surest, and Optum Rx administers the prescription benefits. There are two sets of medical premiums within four coverage options:

- **Standard Premiums** - applies to associates who do not participate in Healthy Horizons.
- **Healthy Horizons Preferred Premiums**[1] - applies to associates who complete the requirements outlined in the 2024 Healthy Horizons Program overview and anyone hired between 10/1/2024 and 12/31/2025. Go to densohealthyhorizons.com or contact your Healthy Horizons Health Coach for details on how to qualify for the discounted premiums.

	ExpressWay			MainStreet			OpenRoad			Surest		
Dependent Coverage	Standard 22%	Preferred 18%	Full Biweekly Premium Cost	Standard 28%	Preferred 23%	Full Biweekly Premium Cost	Standard 14%	Preferred 7% and 11%	Full Biweekly Premium Cost	Standard 7-12%	Preferred 0-8%	Full Biweekly Premium Cost
Associate Only	$53.39	$44.85	$243.45	$90.20	$75.77	$325.60	$25.73	$12.86	$183.67	$12.86	$0	$184.16
Associate + Spouse	$146.82	$123.34	$669.49	$248.05	$208.36	$895.41	$70.75	$53.06	$505.09	$57.89	$40.20	$506.44
Associate + Child(ren)	$106.78	$89.70	$486.90	$180.40	$151.54	$651.21	$51.46	$38.59	$367.34	$38.59	$25.73	$368.32
Associate + Family	$186.87	$156.98	$852.08	$315.70	$265.19	$1,139.61	$90.05	$67.54	$642.84	$77.18	$54.67	$644.56
This option is ideal for someone who…	… values things that are quick and easy. It offers flat dollar copays for most office visits, so you are in and out with fewer billing headaches.			… likes familiarity. It offers a traditional deductible and coinsurance for most services.			… likes freedom and doesn't mind a little risk so long as they are driving. This plan has a high deductible which is required for a Health Savings Account.			… wants simplified healthcare with clear, upfront pricing and easy-to-understand choices. There is no deductible, so the price you see is what you pay for the service.		

1 Associates who complete the requirements outlined in the Healthy Horizons program brochure will qualify for Preferred Premiums; requirements may vary from year to year.

Prescription Plan

- **Network Pharmacies** - there are over 65,000 pharmacies in the Optum Rx network.
- **Formulary** - If drugs are on the Optum Rx formulary, they are preferred over drugs not listed. Drugs not listed may be excluded.
  - **Covered drugs fall into one of four tiers:** 1) Generic, 2) Preferred, 3) Non-Preferred or 4) Specialty.
  - There are typically changes to the formulary drug list twice a year – in January and July. Optum Rx sends a letter to impacted members before a drug changes tiers or is removed from the list.
  - Drugs may be added to the formulary throughout the year.
  - View the fee structure on page 16.
- **Step Therapy** - You may need to try one or more alternative drugs before being allowed to fill certain brand prescriptions.
- **Prior Authorization** - Certain drugs require your doctor to provide additional information before the pharmacist can fill the prescription; you or your doctor should contact Optum Rx if the pharmacist says this applies to you.

- **Penalties** - If you choose to take a higher cost brand name instead of the equivalent generic drug, you will have to pay the generic copay plus a penalty equal to the difference in the cost of the drugs. *Penalties do not accumulate toward out-of-pocket maximums.*
- **90-day Supply** - Available for maintenance medications through mail order, a Walgreens Pharmacy, or a DENSO Family Health Center (DFHC) Pharmacy.
- **Specialty Drugs** - Specialty drugs are high-cost medications used to treat complex, chronic conditions. All specialty medications must be filled through **Optum Rx.** Contact the specialty pharmacy at **855-427-4682** (available 24/7) to arrange filling your specialty prescription.
    - You can also arrange for a live chat or virtual visit through **Optum Connections** to speak with a clinician who is an expert in your condition.
- **Preventive Drugs** – Many preventive medications are available to OpenRoad participants at no cost. View the HDHP formulary at DENSOBenefits.com.

Go to the Medical & Prescription section on DENSOBenefits.com to view the prescription drug lists.

DENSO Family Health Center and Pharmacy (DFHC)

The DFHCs are located in Battle Creek, MI, Maryville, TN, and Athens, TN. Any DENSO Associate and eligible dependents covered under a DENSO medical plan may use the Health Center as their primary health care provider. Both Battle Creek and Maryville locations have full dispensing pharmacies. Maryville DFHC Pharmacy provides delivery services to DMAT. Premise Health staffs, manages, and operates the facilities. Visit members.premisehealth.com/denso for more details. The DFHC facilities and providers are **in-network** under UHC but won't appear in the national provider search.

The DFHC requires payment at the time of service. Reminder, fees per visit are as follows:

Medical Plan Option	Patient Type	Fee Due at Time of Visit
ExpressWay	Associates and Dependents	$10
MainStreet	Associates and Dependents	$10
OpenRoad	Associate	$30, then deductible and coinsurance
	Dependents	$10
Surest	Associates and Dependents	$10

Prescription costs at DFHC Pharmacies follow the medical plan pharmacy design on page 16.

Telemedicine

Telemedicine options include online and telephonic visits for minor illnesses and urgent care with **24/7 access**. UHC connects you to board-certified doctors using your smartphone, tablet, or computer. Visits cost less than the average cost of a regular office visit.

Medical Plan	Program Name/Vendors	Access	Cost	Notes
ExpressWay MainStreet OpenRoad	**Virtual Visits** *UHC network includes: Teladoc Health, Amwell, and Doctor on Demand*	You must have an account at **myuhc.com** in order to arrange a Virtual Visit.	$15	Virtual Visits are offered in Spanish and English; translation services are available for other languages.
Surest	Telemedicine is integrated in the plan. Select provider through Virtual Health Network in the Surest app or website.	**surest.com** to select a provider	$0 - $125	Use the provider's app or website for appointment (*example, Teladoc Health*)

Medical Benefit Tools and Tips

UHC Member Resources and Hub

Once your coverage is active after 1/1/2025, go to uhc.com/memberresources to explore the library of information and tools available to you, including:

- Support programs: chronic conditions, house calls, maternity, LGBTQ+ member support, and other topics.
- Resources: finding an in-network provider, urgent care centers, hospitals, and pharmacies.
- Wellness and Rewards: programs to help you meet your health goals.
- Optum Now: UHC's FSA and HSA store with eligible health and medical products.
- myuhc.com:
    - Secure access to your own personal health hub
    - Find and estimate costs
    - Search for providers or facilities
    - View plan balances and claim details
    - Learn about covered preventive care
    - Access your health plan ID card
- UHC's free mobile app (Available for download on your iPhone or Android devices)
    - Check claims and coverage details
    - Search for providers and compare costs
    - Add your health plan details to your digital wallet

One-on-One Support through Advocate4Me

UHC's **Advocate4Me** program connects you with an Advocate by phone, chat, or video. Specially trained Advocates can help you understand your benefits and coverage, bills, claims, medications, help manage complex conditions, make more informed health care decisions, help you find ways to reduce cost, and connect you with the care that fits your needs.

Advocates are able to see your coverage and history to help know you better and offer faster, personalized support. They can access all the benefits DENSO offers to make sure you are connected with the right resources.

Optum Rx Digital Tools

After 1/1/2025, visit optumrx.com to register an account. You'll need information from your UHC ID card to sign up and access your account details and prescriptions. Once you log in, you can:

- Price a Drug: Search your current or new medications to see costs at pharmacies near you. If you're taking a brand-name drug you can also see prices for generic options.
- My Prescriptions: See your current prescriptions along with information about how to use them and possible side effects.
- View My Claims: See which prescriptions you've filled and how much you paid.
- Pharmacy Locater: Search for network pharmacies near you – or find a pharmacy when you're traveling. Note: DFHC Pharmacies will not appear in the search but are in-network.
- Manage Prescriptions On-the-Go: For added convenience, download the Optum Rx app.
- Other Member Tools: view member ID card, sign up for Optum Home Delivery, live chat with a pharmacist.

Learn More: Communications from Vendors

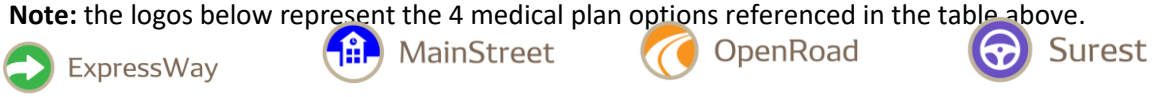
UHC is DENSO's third-party benefits administrator, meaning they process every medical claim. If a claim contains a new diagnosis code, such as diabetes, UHC can notify our wellness vendor of your eligibility for their program, and the vendor may reach out to you with information or resources to help you. You are under no obligation to participate; it is simply one additional resource available to you at no cost. Your information is not shared with DENSO. Additionally, our wellness vendors may send postcards or home mailers to raise awareness of their programs.

Understanding Your Choices for Care

Your cost share will vary depending on your type of plan and visit. To help you get the most out of the plan you choose, the table below shows the care options available and when best to use them.

Doctor's Office	Virtual Care	Urgent Care Center	Emergency Room
A primary care physician (PCP) is an essential part of your healthcare. They get to know your health history over time and can recommend follow-up care, like seeing a specialist, if needed. **$25 Copay—PCP** **$0 - $125 Copay** **Deductible/ Coinsurance** **Specialist Office or Specialist Virtual Visit** **$50 Copay** **$20 - $125 Copay** **Deductible/ Coinsurance** ***DENSO Family Health Center*** See details on page 13.	Telemedicine through UHC or Surest gives you 24/7 access to a U.S. board-certified doctor from anywhere using your smartphone, tablet, or computer. It's a convenient, low-cost option for a minor illness, mental health, or prescription if you can't get in to your doctor's office. **$15 Copay** **$0 - $125 Copay** 	Urgent care centers may be available when your doctor's office is closed. Most have extended hours and some are open 24/7. When your symptoms aren't severe, urgent care centers can offer you care that's more cost-effective and convenient than an ER. **$50 Copay** **$80 Copay** **Deductible/ Coinsurance** 	You never know when you might need emergency care. If you do, ERs are equipped to handle severe to life-threatening illnesses and injuries. This is why they're the most expensive option for care. Use your best judgment when considering ER care. **$400 Copay** **Deductible/ Coinsurance**

Note: the logos below represent the 4 medical plan options referenced in the table above.



Learn More: Common Benefits Phrases

- **PREMIUMS**: regular amounts you pay (biweekly or monthly) to have health insurance. Your premium does not count toward your deductible or your out-of-pocket maximum.
- **DEDUCTIBLES**: how much you have to spend out-of-pocket for covered health services before your insurance pays anything (except for preventive services, which are 100% covered in-network).
- **COINSURANCE**: the percentage of the bill you pay after you meet the deductible.
- **COPAYS**: flat fee payments you make to your healthcare providers each time you get care.
- **OUT-OF-POCKET-MAXIMUMS**: the most amount you have to spend on covered services in a year. After you reach this amount the company will pay 100% for the covered services for the rest of the calendar year.

2025 Medical Plan Comparison

This chart compares In-Network coverage only.

Out-of-Network coverage can be found in the Summary of Benefits and Coverages (SBCs) at DENSOBenefits.com.

Medical/Prescription: UnitedHealthcare/Optum Rx Mental and Behavioral Health: Behavioral Health Systems (ExpressWay, MainStreet, & OpenRoad) / UHC (Surest) Surgical Coordination: Carrum Health				
DENSO Medical Plan	ExpressWay	MainStreet	OpenRoad[1]	Surest[4]
Metal Tier *(to more easily compare plans by level)*	**Gold**	**Gold**	**Gold**	**Gold**
	IN-NETWORK	**IN-NETWORK**	**IN-NETWORK**	**IN-NETWORK**
Annual Deductible & Cost Sharing	Deductible included in the Out-of-Pocket Maximum.			
Individual	$1,000	$750	$1,650	$0
Family	$2,000	$1,500	$3,300[2]	$0
Preventive Care	**100% Covered**			
Allergy Injections	$0 Copay	20% after Deductible	20% after Deductible	$0 Copay
Primary Care Physician Office or Virtual Visits, including: - Chiropractic Manipulations & Acupuncture - Physical, Occupational, Speech Therapies - Psychologist/Psychiatrist Therapy Visits	$25 Copay			$0 - $125 Copay
Specialist Office or Virtual Visits	$50 Copay			$20 - $125 Copay
Urgent Care				$80 Copay
Emergency Room	$400 Copay	$400 Copay	20% after Deductible	$400 Copay
Virtual Care	$15 Copay	$15 Copay	$15 Copay	$0 - $125 Copay
Labs & Testing	20% after Deductible	20% after Deductible	20% after Deductible	$0 - $900 Copay
Hospitalization				$50 - $3500 Copay
Surgery: Musculoskeletal (MSK) Spinal Fusion Bariatric Surgery Other MSK orthopedic procedures (e.g., hand, wrist, elbow, foot, etc.) Surgical Oncology Hysterectomy Cardiovascular Surgery	• If coordinated by Carrum Health: 100% covered. • If arranged by patient using in-network providers: Deductible, then 20% Coinsurance.		• If coordinated by Carrum Health: Deductible, then 100% covered. • If arranged by patient using in-network providers: Deductible, then 20% Coinsurance.	• If coordinated by Carrum Health: 100% covered. • If arranged by patient using in-network providers: $50 - $3,500 Copay.
Annual Out-of-Pocket Maximum	Out-of-Pocket Maximum includes the Deductible and Copays.			
Individual	$6,000	$6,250	$3,500	$6,500
Family	$12,000	$12,500	$7,000[3]	$13,000
Prescriptions				
Retail (up to a 31-day supply)				
Generic[5]	$10 Copay		Preventive Drug List – $0, all other prescriptions Deductible & 20% Coinsurance	$10 Copay
All other tiers	Deductible, then 20% Coinsurance (see below)			20% Coinsurance (see below)
Coinsurance:	*Once the deductible has been met, you will be responsible for 20% of the drug cost up to a maximum defined by each tier below*			*You will be responsible for 20% of the drug cost up to a maximum defined by each tier below*
Preferred	$100 Max			$100 Max
Non-Preferred Brand	$200 Max			$200 Max
Specialty	$300 Max			$300 Max
Mail or 90 Day Retail				
Generic	$25 Copay		Preventive Drug List – $0, all other prescriptions Deductible & 20% Coinsurance	$25 Copay
All other tiers	Deductible, then 20% Coinsurance (see below)			20% Coinsurance (see below)
Coinsurance:	*Once the deductible has been met, you will be responsible for 20% of the drug cost up to a maximum defined by each tier below*			*You will be responsible for 20% of the drug cost up to a maximum defined by each tier below*
Preferred	$250 Max			$250 Max
Non-Preferred Brand	$500 Max			$500 Max
Specialty	Not Applicable			Not Applicable

[1]**Eligible OpenRoad participants** will receive a Health Savings Account contribution from DENSO of $500 (individual) or $1,000 (family) in 2025.

[2]**OpenRoad Deductible** - true family Deductible – 1 family member could satisfy the entire family deductible.

[3]**OpenRoad Out-of-Pocket Max** - true family Out-of-Pocket Max – 1 family member could satisfy the entire family max.

[4]**Surest** – Member decides what the Copay will be based on the provider they select in the Surest app.

[5] **Generic prescriptions** are $5 at DENSO Family Health Center Pharmacies.

Dental Plans

DENSO Associates have a choice between two dental options through Delta Dental of Tennessee: Dental Core and Dental Plus. With either option, you can visit the dentist of your choice; however, if you choose an out-of-network provider, you are responsible for charges above the allowable amount. This is a brief summary of your dental premiums and benefits.

Biweekly Dental Premiums		
Tier	**Dental Core**	**Dental Plus**
Associate Only	$5.36	$8.10
Associate + 1	$10.71	$16.20
Family	$17.41	$26.32

Summary of Dental Benefits				
	Dental Core		**Dental Plus**	
	In-Network	**Out-of-Network**	**In-Network**	**Out-of-Network**
Deductibles & Limits				
Annual Deductible	$50 per individual • $100 per family			
Member's Annual Maximum *(not reduced by preventive care)*	$1,000		$2,000	
Services				
Diagnostic and Preventive, no deductible required *(up to 2 visits per year)*	Covered at 100%	Covered at 80%	Covered at 100%	Covered at 80%
Basic	50%	40%	80%	60%
Major			70%	50%
Orthodontia *(excluded from annual maximum)*	Not Covered		50% up to $2,000 lifetime maximum, no deductible (no age limit)	
Anesthesia for Special Health Care Needs Patients (If qualified)	100%			

Things to Consider

- If you elect a dental plan without covering all members of your family, those family members not on the plan will not have any dental coverage. Be sure to cover all dependents who may need dental care throughout the year.
- Benefits are not coordinated with other dental insurance—claims will be paid (up to 100% of the allowed cost) if you have other dental coverage outside of DENSO.

Delta Dental Mobile App

Access your benefits and tools anytime, anywhere using the Delta Dental Mobile App. On the app, you can:

- Search for a dentist in the PPO and Premier networks,
- Download a mobile ID card,
- View coverage and claims,
- Use the Dental Care Cost Estimator tool, and
- Use the toothbrush timer.

To download the mobile app, visit the App Store or Google Play (search **Delta Dental**), or scan the QR code to the right.

Before You Visit a Dentist

Search for an in-network provider using the app. If you call:

- Don't ask: "Do you take my insurance?"
- Do ask: "Are you in-network?"

You are still able to see the dentist of your choice. However, if they are not in-network you will pay more for services.

Vision Plan

You may choose to purchase an insured vision plan through Superior Vision by MetLife. Below is a brief summary of the benefits.

Biweekly Vision Premiums	
Tier	**Vision**
Associate Only	$2.03
Associate + 1	$4.14
Family	$6.23

	Vision Benefits Overview	
	In-Network	**Out-of-Network Reimbursements**
Exams (each covered once every calendar year)		
Routine Eye Exam *(covered once per calendar year)*	$0 copay	Optometrist – up to $28 retail Ophthalmologist – up to $37 retail
Contact Lens Fitting	$15 copay	not covered
Materials (choice of frames/lenses or contacts)		
Frames *(covered once every two calendar years)*	$25 copay ($130 frame allowance)	Up to $61 reimbursement
Standard Plastic Lens *(covered once per calendar year)* Single Bifocal Trifocal		Up to $35 reimbursement Up to $50 reimbursement Up to $60 reimbursement
Contact Lens (*covered once per calendar year) in lieu of glasses*	$0 copay ($130 allowance)	Up to $100 reimbursement

Important Notes and Tips

- If you have a medical issue with your eye (such as glaucoma or a foreign object), you must use your medical plan coverage for the exam, which will be subject to the annual deductible and co-insurance.
- In-network discounts are available for non-covered procedures, materials, and exams.
- Member discounts toward LASIK services ranging from 15-50% are offered under the vision plan.
- If you elect the vision plan without covering all members of your family, those family members not on the plan will not have any vision coverage. Be sure to cover all dependents who may need vision care throughout the year.
- Go to metlife.com/insurance/vision-insurance/ to find providers (search *Superior Vision by MetLife*). MetLife's provider network includes independent optometrists and ophthalmologists, as well as regional and national optical chains including America's Best, Lens Crafters, Walmart, Sam's Club, and Costco.
- Contact lenses delivered direct to your front door! Use your vision benefits to order contact lenses online without the retail prices. Go to metlife.com/insurance/vision-insurance/ for more information on how to order contact lenses.

Chronic Conditions and Wellbeing

DENSO partners with several third-party healthcare vendors to provide associates and their eligible dependents with additional support in their wellness, including mental health, chronic condition management, surgical concierge, and medical second opinions.

Chronic Condition Support Programs

These wellness and chronic condition programs are available at no cost to associates and dependents over age 18 covered on a DENSO medical plan.

Condition	Health Partner and Contact	Description
Diabetes	Teladoc HEALTH teladochealth.com Phone: 800-945-4355	Personalized education and support for managing Diabetes; includes a no-cost glucose meter and testing supplies, mobile app, and coaching.
Hypertension (High Blood Pressure)		Personalized education and support for managing Hypertension; includes a no-cost blood pressure monitor, mobile app, and coaching.
Musculoskeletal (MSK) Chronic or Acute Pain	Hinge Health hinge.health/DENSO Phone: 855-902-2777	Virtual education and support for managing chronic and acute pain; includes no-cost wearable sensors with live feedback in the app, Enso TENS unit as part of your therapy, personalized exercise therapy, and coaching. Focus on multiple areas at once, including women's pelvic health.
Digestive Health	Cylinder go.cylinderhealth.com/DENSO Phone: (833) 336-9488 Registration code: **DENSO**	Includes support from an expert health care team including a licensed dietitian, personalized education and action plan, digestive health tools, and access to the mobile app.
Weight Management	NOOM go.noom.com/denso	Weight loss program that is not a fad diet, it's a psychological shift in the way you think about food. Track weight, monitor your food intake, connect with a personal coach, and learn how to think differently about what you eat and how you feel.

Surgical Concierge

carrum health

Carrum Health is a special surgery and medical concierge benefit for certain types of surgeries for medically enrolled members aged 18 and older. Carrum partners with high-quality surgeons and world-class hospitals to make getting surgery easier, more comfortable, and less expensive.

- Members have the option to use Carrum Health or UHC (plan cost share will apply) for Musculoskeletal (MSK) hip or knee replacements, spinal fusion, bariatric, orthopedic procedures (e.g. hand, wrist, elbow, shoulder, ankle, foot, etc.), hysterectomy, oncology, and cardiac surgeries.
- Personal support from a dedicated care team to assist with arranging travel, scheduling appointments, managing billing, and more. Travel costs are subject to taxes; a 1095 form is provided to you at the end of the tax year.

Those enrolled in ExpressWay, MainStreet, or Surest plans will have **no out of pocket cost share** for the surgical event. Those enrolled in OpenRoad will be responsible for deductible, then the remainder will be covered with zero cost share. Visit carrumhealth.com or call 888-855-7806 for more information.

Medical Second Opinion

After you receive a medical diagnosis, it can be overwhelming and often difficult to understand your options and next steps. That's where 2nd.MD comes in.

The health experts with 2nd.MD can help you navigate your situation from delivering a second opinion and understanding the diagnosis to helping you develop a treatment plan and making a referral. Avoid unnecessary tests, eliminate the uncertainty of your treatment plan, and get support anytime. The 2nd.MD service is provided **at no cost** to anyone enrolled in a DENSO medical plan. Visit 2nd.md/denso to activate your account. If you prefer a phone consultation, call 866-887-0719.

Visit 2nd.md/webinars to view the 2nd.MD House Calls webinar series, covering topics like women's health, heart health, understanding cancer diagnoses, men's health, and LGBTQ+ health advocacy.

Healthy Horizons Associate Wellness Program

DENSO offers the opportunity for associates to participate in our award-winning wellness program, Healthy Horizons, administered by Health by Design (HbD). The Healthy Horizons program offers confidential, individualized coaching in-person at your location or by email, education, tools, and positive support to help you make continuous improvements to your health.

Health Coaches routinely visit your worksite and are available through email or phone. Coaches help with personal health goals relevant to you and your personal health risks.

At densohealthyhorizons.com you can find applicable wellness information at your fingertips, including videos, seasonal tips, and recipes. Watch for opportunities to participate in local Healthy Horizons events or challenges at your worksite.

If you have more questions, contact your HbD Health Coach at 866-996-2155 or go to DENSOHealthyHorizons.com and click "Contact."

Learn More: About Preferred Premiums

Participating in Healthy Horizons may not only help you kaizen (continuously improve) your life, but could also lower your medical insurance premiums!

Annual health checks are a simple yet important strategy for managing your health. DENSO encourages you to be proactive in your health by offering a Preferred Premium discount on your medical benefits when you complete these two activities:

- Annual Wellness Check or Biometric Screening (physical screening with finger stick blood draw or a wellness exam by your PCP) and
- Annual Member Health Assessment (MHA) – a simple questionnaire covering basic lifestyle habits.

Visit DENSOHealthyHorizons.com to review the current program brochure or contact HbD at 866-996-2155 for more information. The biometric screening and MHA are administered by an independent third party (HBD). Your results are never shared with DENSO.

Employee Assistance Program

DENSO provides an Employee Assistance Program (EAP) through Behavioral Health Systems (BHS). The EAP is offered to help you and your family deal with a variety of life situations. The BHS professionals will connect you to counseling services for behavioral and mental health issues, including substance abuse.

You and your eligible dependents may receive up to five (5) visits/consults per unique issue each calendar year at no charge, when provided through BHS and when the BHS PPO network is used. After 5 visits are used, plan fees apply. Surest participants can speak with their BHS Care Coordinator to transfer services to providers in the Choice Plus network.

Some of the additional EAP plan benefits include:

- Childcare and/or eldercare referrals
- Personal relationship information
- Health information and online tools
- Financial planning assistance
- Stress management
- Legal resources and professionals

Call 800-245-1150 to be connected to your designated BHS Care Coordinator. You will be referred to the appropriate resources, which may include appointments with a mental health professional, community resource, support group, local attorney, and/or a financial consultant. You can also visit the BHS Member Access Portal at behavioralhealthsystems.com to view benefits, request an appointment, and access newsletters, fact sheets, national resources, self-assessments, and more.

Other resources are available through BHS, visit behavioralhealthsystems.com. Login under Member Access using the Employer ID: **DENSO**.

Behavioral Health & Substance Abuse Programs

DENSO Medical Plan	Behavioral Health Plan Administrator	Plan Features
ExpressWay OpenRoad MainStreet	BHS Behavioral Health Systems	BHS coordinates with the EAP to provide inpatient and outpatient care for mental health and substance abuse treatment. BHS contracts with over 20,000 providers across the U.S. To ensure coverage, you should first contact and be referred through BHS, as all inpatient care and certain outpatient services must be pre-authorized. **Phone: 800-245-1150** **Website: behavioralhealthsystems.com or app**
Surest	United Healthcare	Search for a provider and copay through the Surest app or website to arrange an in-person or virtual visit with a mental health specialist. If you don't see your preferred provider, call Surest to check if they are in-network. The Surest clinical advocates can help you manage care between providers and facilities, find in-network facilities, understand your treatment options, and locate resources and support options for you. Surest uses the robust UHC Choice Plus network of providers and connects you with high quality and high value services. Copays apply for each visit. **Phone: 866-683-6440** **Website: Surest.com or app**

Tax Savings Plans

Flexible Spending Account

A Flexible Spending Account (FSA) allows you to save for eligible health care and dependent care expenses incurred during the plan year. To help reduce your tax liability, contributions are deducted from your paycheck on a pre-tax basis and tax-free reimbursements are paid to you for eligible expenses. Businessolver is DENSO's FSA administrator who tracks your contributions and reimbursements and provides a debit card (see note below regarding Limited Use FSA Debit Card). You can track your account using the MyChoice mobile app or through our Benefitsolver site **myDENSObenefits.com**.

Key Points on FSAs	
You decide the amount you expect to spend on eligible health care and dependent care expenses throughout the year. **Plan carefully.**	
Health Care FSA Eligibility	Health Care FSA covers eligible medical, dental, and vision expenses. Common eligible expenses for a Health Care FSA are prescriptions, over-the-counter medications, hearing aids, orthopedic goods, doctor visits, and dentist visits. You cannot contribute to a Health Savings Account (HSA) if you are enrolled in a Health Care FSA.
Day Care or Dependent Care FSA Eligibility	Day Care, or Dependent Care, FSA allows you to put money aside for dependent care for eligible children up to age 13, a disabled dependent of any age, or a disabled spouse. A Day Care FSA covers expenses such as work-related daycare and elderly care costs.
Plan Year	**January 1 (or your enrollment date, whichever is later) – December 31**: This is when eligible expenses can be incurred in order to be submitted for reimbursement. **Note:** New hires cannot include expenses prior to hire date.
Annual FSA Contribution Limits	**Refer to IRS.gov for the most up to date FSA contribution limits.** The amount you elect to contribute is divided evenly among your paychecks for the year and is deducted before calculating taxes (federal & social security as well as most state taxes).
2024 Run-Out Period	**January 1 – March 31, 2025:** This timeframe is called the "run-out period" that participants have to file claims for expenses incurred in the prior plan year (2024).
Carry-Over	Participants enrolling in Health Care FSA for 2025 can carry-over a certain amount in remaining, unused 2024 Health Care FSA funds into the 2025 plan year. 2024 Health Care FSA participants who re-elect for 2025 and have a carryover from 2024 will see the carryover in your MyChoice Account early in 2025 after the 2024 runout period ends (March 31, 2025). The funds that are rolled over can be used after the run-out period from the previous plan year. Any unused funds exceeding this limit from the 2024 plan year will be lost. Refer to IRS.gov for current FSA carry-over limits. **Note: Day Care FSA is not eligible for the carry-over.** **Note: You can't carry over FSA funds unless you re-elect FSA for 2025.**

FSA Resources

- **Considering enrollment in an FSA?** – Go to DENSOBenefits.com to view the Tax-Advantaged Accounts informational video.
- **MyChoice** mobile app – offers convenient, real-time access to your accounts in one spot. Check balance and account activity, file claims, and pay providers right from your phone. Download the app on Apple and Android devices (search under 'MyChoice Mobile app').
- **Eligible Expense List** – To find out which specific expenses are eligible, view the searchable eligibility list under the Resource Center **myDENSObenefits.com**.

Limited Use FSA Debit Card

The MyChoice FSA debit card is accepted at pharmacies and day care providers **ONLY**. You can still use your FSA funds to pay for other qualifying expenses. Request reimbursement for these expenses by filing a claim or set up direct payment to your provider. Go to **myDENSObenefits.com** or the MyChoice mobile app for details.

Health Savings Account

If you enroll in the OpenRoad high-deductible medical plan, you may also be eligible to open a Health Savings Account (HSA). The HSA allows you to set aside money on a pre-tax basis and then use the funds for eligible healthcare expenses. Unlike some FSAs, any money left in your account at the end of the year rolls over to the following year. In fact, the HSA offers a way to save for future healthcare expenses because you can invest the value of your HSA so your account can grow over time. The chart below shows some of the key features of the HSA.

Health Savings Account (HSA) Details	
Eligibility	To be eligible for the HSA, you must satisfy all of the following requirements: 1. Enrolled in the OpenRoad medical plan in 2025. 2. Not enrolled in a Health Care FSA in 2025. 3. Not enrolled in Medicare (including Parts A, B, and D). 4. Not eligible to be claimed as a dependent on someone else's tax return. 5. Not covered by any of the following insurance or accounts (see IRS Publication 969): • Spouse or domestic partner's non-Qualified High Deductible Health Plan (non-QHDHP) • You or your spouse's Health Care Flexible Spending Accounts (FSA) • TRICARE or TRICARE for Life • You or your spouse's/domestic partner's Health Reimbursement Accounts (HRA) • Any Veterans Affairs benefits used within previous three months • National health care insurance provided by foreign countries while an expatriate
Your Contributions	You may elect to start, stop, or change your contribution amount to your HSA at any time during the year by logging in to myDENSObenefits.com or going to the MyChoice mobile app. Changes will apply to the next pay cycle.
Annual Company Contributions	DENSO will contribute money to the accounts of eligible associates in 2025: $500 for individual and $1,000 for family.
2025 Annual HSA Contribution Limits	• Associate Only coverage: **$4,300** (including DENSO's $500 contribution) • Other tiers: **$8,550** (including DENSO's $1,000 contribution) *Note: You can make an additional $1,000 catch-up contribution if you will be age 55 or older by end of year 2025.*
Eligible Expenses	You can use your HSA to pay for eligible medical, prescription, dental, and vision expenses. For a list of eligible expenses, visit IRS.gov and refer to Publication 502. Be sure to keep your receipts for all qualified expenses.
Portability	You own your HSA, which means you keep it even if you leave the company or retire.

Important Notes for OpenRoad Participants

- **New** OpenRoad participants must Agree to the Terms and Conditions to initiate the opening of a MyChoice Account in Benefitsolver **when they enroll in benefits** to make pre-tax payroll contributions as well as receive the company contribution in 2025.
- **Existing** OpenRoad participants must attest your eligibility (confirm you meet the requirements in Benefitsolver during Open Enrollment to be eligible to receive an annual company contribution in 2025. You must set your individual HSA contribution each year (either during Open Enrollment or at any time during the plan year).
  - If you do not wish to contribute to your HSA but want the company contribution you must still attest your eligibility for an HSA in Benefitsolver.
- OpenRoad participants who do not contribute to an HSA may enroll in a Health Care FSA. However, Health Care FSA participants are not eligible for the HSA company contribution.

401(K) DENSO Retirement Savings Plan (DRSP)

Full-time and part-time associates are eligible to participate. There is no waiting period required, but automatic enrollment may be delayed up to 60 days after your first paycheck. If you do nothing, DENSO will automatically enroll you in the 401(k) Plan with a 4% employee contribution of your pre-tax earnings into your 401(k) account each pay period. DENSO will also contribute up to a 4% company match. In addition, your pre-tax contributions will increase automatically by 1% each year, until you reach 15%. You can opt out or change either of the above options by contacting Empower either via phone at 888-411-4015 or online at empowermyretirement.com.

Contribution Types

Age at End of Year	Anticipated IRS Contribution Maximums for 2025
Less than 50 years old	$23,500
50 - 59 years old	$31,000
60 - 63 years old	$34,750
64+ years old	$31,000
Refer to IRS.gov for current limits	

- **Traditional Pre-Tax or Roth After-Tax** - You can elect to contribute up to 75% of your eligible pay, subject to IRS limits.
- **Catch-Up** - If you will be age 50 or older by the end of the year, you are eligible to make additional 401(k) contributions. These contributions may increase your contributions above 75% of pay.
- **Company Match** -Employer-matching contributions equal to 100% of the first 4% of compensation you defer (either Pre-Tax or After-Tax contributions can be matched to 4%; subject to IRS limits).
- **Company Discretionary Contribution** - DENSO may contribute up to an additional 3% of your eligible earnings on an annual basis.
- **Annual True-Up** - Company matching contributions are reviewed annually to ensure you receive the maximum allowed amount. True-up contributions are paid at the end of the first quarter following the calendar year.

Choosing Your Investments - Two Ways to Diversify

1. Choose a single, ready-mixed portfolio (*RetireReady* Goal Setter): Make a single investment choice based on the date you want to retire and diversify your total retirement savings across an array of funds.
2. Build your own portfolio: Choose your own diversified combination of individual funds offered by the plan.

Vesting

Employer Matching Contributions and Employer Annual Discretionary Contributions consist of separate components, which vest differently.

- Total Company Match (100%) = Regular Match (75%) + QMAC (25%)
- Total Annual Discretionary (100%) = Annual Discretionary (75%) + QNEC (25%)

Vesting Schedule for Employer Contributions			
Years of Completed Service	**Regular Match Annual Discretionary (75% of total)**	**QMAC* & QNEC* (25% of total)**	**Effective Vesting (Combined Employer Contributions)**
Less than 2 yrs.	0%	100%	25%
2 yrs., but less than 3 yrs.	33 1/3%	100%	50%
3 yrs., but less than 4 yrs.	66 2/3%	100%	75%
4+ yrs.	100%	100%	100%

*Qualified Matching Contributions (QMAC) and Qualified Non-elective Contributions (QNEC) are special Employer contributions that help the DRSP 401(k) Plan pass mandatory annual non-discrimination testing. Note: Associate contributions are always 100% vested.

Log in to your account at empowermyretirement.com to easily see how much you've saved and more.

- **Estimated monthly income in retirement** – see what percent of your goal you're on track to reach.
- **Receive plan messaging** – stay up to date on plan events and changes.
- **Get your account details** – see your balance, get fund information, view your statements.
- **Access your personal profile** – choose electronic communications, update your email address, select or change your beneficiary.
- **My Financial Path** – offers you actionable next steps toward reducing stress and helping you achieve your financial goals.

Life and Disability Protection

Insurance Provided at No Cost to You

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	Basic Life*	Accidental Death and Dismemberment (AD&D)	Business Travel Accident (BTA) (provided by Ace/Chubb)
Benefit Amount	1.5 times your base annual salary	1.5 times your base annual salary	$250,000
Limitations	Coverage is limited to a combined $500,000 for Life and AD&D insurance		Payable if an accident claim occurs while traveling on business
Beneficiary	Your designated beneficiary for Basic Life will apply to all three policies.		
Reduction of Basic Life	**The basic life insurance benefit reduces by 35% when you reach age 70.**		

* The value of any Basic Life Insurance coverage over $50,000 (called "imputed income") is added to the Associates' taxable income per IRS Code section 79.

Additional Life Insurance Available

Optional Associate Life Insurance	
Coverage Amount	You may purchase additional coverage from 1 to 5 times your base annual salary.
Maximum	The combined maximum for basic and optional term life is $2,000,000.
Rates	Rates are age-based as shown below.
Hours Requirement	Your hours worked—if less than 40/week—may be used to determine your coverage level; therefore, if you are working a reduced schedule, you may have a reduced benefit.
Evidence of Insurability (E of I) Requirements	An E of I health questionnaire **is required** if: • **During Open Enrollment:** You increase by more than 1 level or your insurance amount is more than $500,000. • **As a New Hire:** You elect more than $500,000 in coverage.
Reduction of Principal Amount	**Optional term life insurance benefit reduces by 35% when you reach age 70.**
Optional Spouse Life Insurance	
Coverage Amount	You may purchase spouse life coverage in increments of $25,000, up to $300,000. **In order to purchase spouse life coverage, you must purchase at least 1x optional and your requested spouse amount cannot exceed your own optional term life amount.**
Rates	Rates are the same as Optional Group Term Life based on the Associate's age (see below).
Evidence of Insurability (E of I) Requirements	An Evidence of Insurability (E of I) health questionnaire **is required** if: – **During Open Enrollment/Family Status Change**: You increase coverage by more than $25,000 and/or your insurance amount is more than $50,000. – **As a New Hire:** You elect more than $50,000 in coverage.
Reduction of Principal Amount	**Spouse life insurance benefit reduces by 35% when your spouse reaches age 70.**

Optional Group Term Life Insurance Rates (for Associate and Spouse)											
Associate Age	**<25**	**25-29**	**30-34**	**35-39**	**40-44**	**45-49**	**50-54**	**55-59**	**60-64**	**65-69**	**70+**
Monthly rate per $1,000 of coverage	$0.07	$0.08	$0.10	$0.12	$0.15	$0.23	$0.43	$0.51	$1.06	$1.34	$2.29

NOTE: Spouse life rate is based on associate age.

Optional Child Life Insurance	
Eligibility	You may purchase child life coverage for your eligible dependent children from birth through age 25. **In order to purchase child life coverage for your child or children, you must purchase at least 1x optional life.**
Rate and Coverage Amount	The bi-weekly rate is $0.55 per paycheck, which insures each eligible child for $10,000.

Important Notes

- If an E of I is required based on your Open Enrollment election and you do not complete and sign it before **60 days after 1/1/2025** (March 1, 2025) your requested coverage level will no longer be considered.
- During Open Enrollment, Benefitsolver projects premiums based on current salary and age as of January 1, 2025.
- New Hires in 2025 have **60 days** from date of hire to sign and submit the E of I in Benefitsolver. For family status changes, you have **60 days** to initiate the process in Benefitsolver.
- Premiums will adjust throughout the year with changes in your age and/or wages.
- E of I requested amount does not go into effect until the first of the month following E of I approval.

Disability Coverage

DENSO recognizes the importance of your financial wellbeing in the event of a disability. Most of us insure our homes, automobiles, and other assets, yet often overlook our most valuable asset—our ability to earn an income! For this reason, we provide both Short-Term and Long-Term Disability benefits at no cost to you. These benefits cover associates only, not spouses or children and are administered through Reliance Matrix.

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Short Term Disability (STD) Benefits Overview	
Eligibility	All exempt and nonexempt associates following 6 months of employment
Benefit Level	60% - 100% of weekly base pay (depending on position and length of disability*)
Elimination Period	*Accident*: 0 days (benefit begins on Day 1) *Illness*: 7 days (benefit begins on Day 8)
Partial Disability Benefit	STD Benefit + Wages (60% - 100% of pre-disability weekly earnings)
Maximum Duration	26 weeks
Benefit Determination	Reliance Matrix
Payment Processing	Exempt associates – Paid in-house Nonexempt – Paid through Reliance Matrix

Long Term Disability (LTD) Insurance Overview	
Eligibility	All exempt and nonexempt associates following 6 months of employment, whose disability date occurred while actively employed
Benefit Level	60% of base pay, to a maximum monthly benefit of $10,000* (benefits may be reduced by other income)
Elimination Period	26 weeks
Maximum Duration	5 years
Benefit Determination and Payment Processing	Reliance Matrix

*Your hours worked—if less than 40 per week—may be used to determine your benefit level; therefore, if you are working a reduced schedule, you may have a reduced benefit.

Refer to the Summary Plan Descriptions (SPDs) for more details, including the definition of disability, pre-existing conditions, and other exclusions.

PTO Cash Out

Associates may elect to cash out a portion of your PTO allowance for 2025. **Elections must be made during Open Enrollment (October 22 – November 7, 2024) in Benefitsolver**. If you elect to cash out PTO for the 2025 calendar year, payouts will be in December 2025. The timing of the payouts is common for all affiliates. Timing of elections and payments are compliant with IRS regulations.

Your PTO cash out election cannot exceed your 2025 PTO allowance minus 40 hours. If you use more PTO hours during the year than you anticipated, your PTO cash out election may be reduced. The PTO cash out election is irrevocable, meaning after you make the election during Open Enrollment you cannot change this election later in the year. Remember, your earned PTO cannot exceed 200% of your annual PTO allowance. Please plan accordingly when you schedule PTO or make a PTO cashout election during Open Enrollment.

See Wellbeing & Other Benefits section at DENSOBenefits.com for more details on paid company holidays and PTO schedule.

Other Voluntary Plans

Voluntary benefits may provide financial protection by covering services not covered by your medical benefits. The following voluntary plans are 100% paid by associates post-tax at the group-discounted rates outlined below. You can find the detailed benefit summaries at DENSOBenefits.com, in Benefitsolver at myDENSObenefits.com, or contact your local HR Business Partner. **Note: Associates have the opportunity to enroll in these voluntary programs during the annual Open Enrollment period and within 30 days of a qualifying family status change during the year. New hires can elect voluntary benefits when first electing benefits.**

Voluntary Critical Illness

Critical Illness insurance can help fill a financial gap if you experience a serious illness, such as cancer, heart attack, or stroke. The coverage provides a $10,000 benefit upon diagnosis of a covered illness (50% of benefit amount for covered dependents). Benefits can be used to help cover out-of-pocket medical costs like your plan deductible and co-insurance.

Critical Illness Insurance Biweekly Rates						
Associate Age	**<29**	**30-39**	**40-49**	**50-59**	**60-64**	**65+**
Associate or Associate with Children	$2.05	$4.30	$8.69	$15.16	$20.24	$31.08
Associate & Family (includes Spouse and Children)	$3.41	$6.83	$13.51	$23.36	$31.08	$47.48

Note: The rate at enrollment will be locked in as long as you continue this benefit and will not adjust as you age as long as you stay in the same coverage tier. If you change coverage tiers your rate will adjust to your current age.

Voluntary Accident

Accident insurance helps protect your finances by helping you pay for the unexpected costs associated with an accidental injury. It provides a lump sum payment based on a schedule of benefits in the event of an accident to include common injuries such as fractures, Emergency Room, or Urgent Care visits and physical therapy tied to accident.

Accident Insurance Biweekly Rates	
Associate Only	$5.54
Associate & Spouse	$9.59
Associate & Children	$12.01
Associate & Family (includes Spouse and Children)	$15.16

Voluntary Identity Theft Protection

Identity theft and cyber attacks are becoming more and more common. That's why DENSO offers identity theft protection as part of our voluntary wellness benefits package. This benefit is provided through IdentityForce. Plan features include:

- Prevention: personalized action plan and identity safety score, VPN for Mobile, computer protection tools, encrypted cloud storage for important personal data, company breach protection, and password manager.
- Monitoring: fraud activity of your SSN, Driver's License number, court and public record analysis, 24/7 dark web alerts, credit bureau reporting, and bank account monitoring and alerts.
- Recover: a dedicated restoration specialist, identity theft protection, and lost wallet assistance.
- Complete restoration

Identity Theft Protection Biweekly Rates	
Associate or Associate & Children	$2.50
Associate & Family (includes Spouse and Children)	$4.79

Voluntary Hospital Indemnity

Hospital Indemnity insurance pays you benefits when you are confined to a hospital, whether for planned or unplanned reasons. It helps cover certain out-of-pocket medical costs including deductibles and coinsurance. Hospital Indemnity is available through Reliance Matrix.

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Hospital Indemnity Biweekly Rates	
Associate Only	$5.69
Associate & Children	$8.54
Associate & Spouse	$12.01
Associate & Family	$14.85

Consumer Notice

Important: This is a fixed indemnity policy, NOT health insurance.

The fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care.

- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

- Visit HealthCare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325) to find health coverage options.
- To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

- For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments."
- If you have this policy through your job, or a family's member's job, contact the employer.

Resources

DENSO Benefits Helpline: Your Personal Benefits Expert

The rules, requirements, and options in your benefits package can seem overwhelming or hard to understand. The DENSO Benefits Helpline, managed by Benefit Advocates, makes navigating your benefits much easier. Call and talk to a real person, or email your questions and quickly get a personal, confidential response. The DENSO Benefits Helpline should be your first point of contact if you have any DENSO benefit questions.

Benefit Advocates knows the DENSO benefits plans, are experts in the healthcare field, can act on your behalf with insurance agencies and health partners, and are ready for your benefits questions, like:

- What plans are available at DENSO? What's the difference between them?
- Which doctors are covered under my plan? What services are covered? How much will I pay for an annual physical through my plan?
- I lost my insurance ID card, can I get a new one?
- I received a bill I don't understand, what does it mean? What do I have to do? What if it's wrong?
- My claim was denied, what happens now?
- I need help navigating disability and FMLA with Matrix, where do I start?
- And so much more!

Benefit Advocates
Real People, Real Answers.

DENSO Benefits Helpline	
Phone	855-311-2115
Hours	8AM to 6PM ET, Monday - Friday
Email	denso@benefitadvocates.net

DENSOBenefits.com

Your library of benefits information! View informational videos, links and resources from our vendors, read the On The Road with DENSO Benefits newsletter, download forms and handouts, review our Plan Documents, and find other helpful information.

Benefitsolver: myDENSObenefits.com

Explore the resources at myDENSObenefits.com, including a **Decision-Making Tool** that can give you a personalized recommendation on your benefit elections. And ask **Sofia** any question about your benefits.

HRBP: Your Local Human Resources Team

Human Resource Business Partners (HRBP) are your local points of contact for all things HR at DENSO. Formerly called Associate Relations or Team Member Solutions, these teams are aligned regionally as **HRBP**.

If you need assistance during Open Enrollment or have questions about your benefits, you can talk to an HR Business Partner on-site at your location. Please check for local office hours or call HRBP for details.

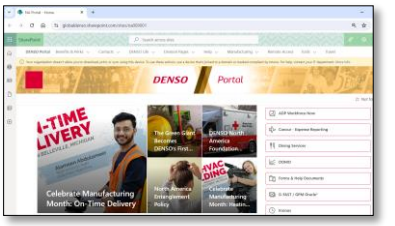
Learn More: Questions about your FSA and HSA

- **FLEXIBLE SPENDING ACCOUNT (FSA)**: is an employee benefit that allows you to set aside money from your paycheck pre-tax for certain health care and independent care expenses. DENSO Associates can have a Health Care FSA or Dependent Care FSA. Companies cannot contribute to these accounts.
- **HEALTH SAVINGS ACCOUNT (HSA):** is an investment bank account available only to those enrolled in a high deductible health plan (OpenRoad). Funds can be rolled over each year or invested for retirement. Companies can contribute to these accounts. You can't have both a Health Care FSA and HSA at the same time.

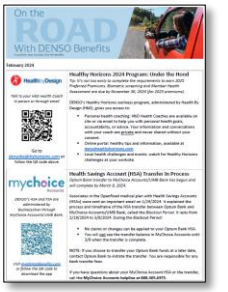
If you have questions about your FSA or HSA, call the MyChoice Accounts help line at 888-305-6975.

Stay Informed About Your Benefits

The Regional Benefits team continuously shares information about your DENSO benefits throughout the year. Use these communication vehicles to stay informed!



- **NA SharePoint Portal:** each time you open your internet browser on your DENSO computer you can access the NA SharePoint site. The homepage features current news, announcements, and events. The same content is posted on the DENSO mobile app.



- **DENSO TV**: new messages are shared every week and are repeated on the NA SharePoint Portal and DENSO mobile app.
- **On the Road with DENSO Benefits**: your bimonthly newsletter full of tips, education, updates, and reminders of all the great benefits available to you and your family. On the Road is posted on the NA Portal, DENSOBenefits.com, and is available to all people leaders. Read previous editions at DENSOBenefits.com.
- **Benefitsolver**: sign up at myDENSOBenefits.com to receive text messages or email notices when there is an action item alert, notice, deadline, or important update to your benefits.

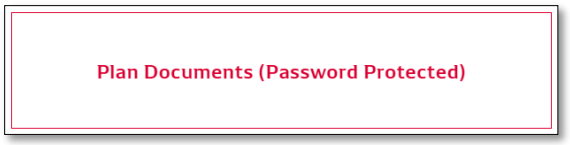
Health Partners, Vendors, and Program Administrators

Vendor, Health Partner, or Program Administrator	Benefit	Phone Number	Website or Email
2nd.MD	Medical second opinion	866-887-0719	2nd.md/denso
Allstate	Voluntary Critical Illness and Voluntary Accident Insurance	800-521-3535	allstatevoluntary.com/denso
Behavioral Health Systems (BHS)	• Employee Assistance Program, • Mental Health/Substance use support (ExpressWay, OpenRoad, MainStreet only)	800-245-1150	behavioralhealthsystems.com
Benefit Advocates	DENSO Benefits Helpline	855-311-2115	Email: denso@benefitadvocates.net
Businessolver	Health Care & Day Care Flexible Spending Accounts (FSA), Health Savings Account (HSA) administration	N/A	MyChoice mobile app, **myDENSObenefits.com**
Carrum Health	Surgical Coordination	888-855-7806	carrumhealth.com
Cylinder (formerly GIThrive)	Digestive Health Program	833-336-9488	go.cylinderhealth.com/DENSO
Delta Dental of Tennessee	Dental Insurance	800-223-3104	deltadentaltn.com
Empower Retirement	401(k) Record keeper	888-411-4015	empowermyretirement.com
Health by Design (HbD)	Healthy Horizons; Health Coaches	866-996-2155	densohealthyhorizons.com
Hinge Health	Acute and Chronic Pain Management	855-902-2777	hingehealth.com/DENSO
IdentityForce	Identity Theft Protection	877-694-3367	identityforce.com
Noom	Weight Loss Support	N/A	go.noom.com/denso
Optum Rx	Pharmacy Benefit Manager	844-898-8636	optumrx.com
Reliance Matrix	Short-Term & Long-Term Disability	800-866-2301	matrixabsence.com
	Basic Life and AD&D, Optional Life	800-351-7500	reliancestandard.com
	Hospital Indemnity		
Superior Vision by MetLife	Vision Insurance	833-393-5433	mybenefits.metlife.com
Surest	DENSO Medical Plan Option	866-683-6440	Surest.com
Teladoc Health (formerly Livongo)	Diabetes and Hypertension Condition Management Program	800-945-4355	Teladochealth.com
UnitedHealthcare (UHC)	Medical Plan Administrator	844-749-7834	whyuhc.com/denso

Learn More: What are Plan Documents?

DENSO encourages all associates to read the Plan Documents, the legal agreements that rule our medical, dental, 401(k), disability, life, and wellness benefits. Plan Documents describe in detail the benefits, rights, and responsibilities of plan participants, beneficiaries, eligibility, contributions, and other plan provisions.

Plan Documents & Compliance Notice Reminder



To access healthcare plan documents and compliance notices, including the DENSO Retirement Savings Plan and program booklets, go to DENSOBenefits.com and find the red "Plan Documents" button.

You will be prompted to enter a Username and Passoword.
To access the site, enter:

Username: denso Password: Benefits4u!

Included in this section of the Benefits information portal are:

- 401(k) Retirement Savings Plan Document
- Annual Compliance Notices
- Health & Welfare Plan Documents
    - Health & Wellness: DENSO Family Health Center, Medical/Rx/Behavioral Health, Dental, Vision, Employee Assistance Program, and Healthy Horizons program booklets
    - Life & Disability: Life and Accidental Death & Dismemberment (ADD), Short Term Disability, Long Term Disability, Business Travel Accident program booklets
    - Voluntary Plans: Critical Illness, Accident, and Hospital Indemnity program booklets
- Summary of Benefits and Coverage Booklet (SBC)

You can also requested printed copies of these documents by asking your local HRBP.

Disclaimer

This booklet highlights the main features of the DENSO associate benefits package. It is intended to provide you with an overview of your benefits as an associate of DENSO. This booklet does not include all plan rules and details and should not be considered as a substitute for plan documents or Summary Plan Descriptions. The terms of your benefits plans are governed by legal plan documents, including insurance contracts. Should there be any inconsistencies between this booklet and the legal plan documents, the plan documents are the final authority on the benefits plan. DENSO reserves the right to change or discontinue its benefits plans at any time, including premiums.

DENSO

Crafting the Core