



2023

Benefits Guide



Find Your Place on D-Street



ExpressWay



MainStreet



OpenRoad

DENSO
Crafting the Core




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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.

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

Plan	Options	Vendor	Page
Medical and Prescription	 ExpressWay  MainStreet  OpenRoad	Medical and Prescription: Blue Cross Blue Shield of Michigan Mental Health and Substance Abuse: Behavioral Health Systems	9-12, 15
Dental	Dental Core	Delta Dental of Tennessee	13
	Dental Plus		
Vision	Vision	Superior Vision by MetLife	14
Flexible Spending Account (FSA) Health Care	Elect up to \$2,850	WEX	16
Flexible Spending Account (FSA) Day Care	Elect up to \$5,000		
Health Savings Account (HSA)	Must be enrolled in OpenRoad, the high deductible health plan option	Optum Bank/Empower	17
Optional Life Insurance	1x-5x Annual Base Pay	Reliance Standard Life Insurance	19
Spouse Life Insurance	\$25,000 - \$300,000 (in \$25,000 increments)		
Child Life Insurance	\$10,000 on each child	AllState	21
Voluntary Critical Illness	\$10,000 benefit at diagnosis for covered illness		
Voluntary Accident	Payment based on schedule of benefits	Reliance Standard Life Insurance	21
Voluntary Hospital Indemnity	Payment based on schedule of benefits due to hospital confinement		
Voluntary Identity Theft Protection	Monitors personal, social, and credit information, and provides restoration services	IdentityForce	21

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


Plan/Program	Description	Vendor	Page
Healthy Horizons	Wellness program	HealthbyDesign (HbD)	15
Employee Assistance Program (EAP)	Confidential advice/support	Behavioral Health Systems	
Diabetes Management Program	Personalized education and support for chronic condition <i>(Note: must be enrolled in a DENSO medical plan, available to all associates and covered dependents over 18 years of age)</i>	Livongo	
Hypertension Management Program		Hinge Health	
Musculoskeletal (MSK) Program		GIThrive	
Digestive Management Program			
DENSO Retirement Savings Plan	Associate contributions, company match, annual discretionary company contribution	Empower Retirement	18
Basic Life	1.5x annual base pay	Reliance Standard Life Insurance	19
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	Matrix Absence Management	20
Long-Term Disability (LTD)	60% of monthly base earnings		
Holidays and Paid Time Off (PTO)	13 paid holidays (annual holiday schedule will vary) Go to <i>Well-being & Other Benefits</i> on DENSOBenefits.com to view the annual holiday schedule and PTO schedule		

When and How to Enroll

New Hire Enrollment in 2023

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 six months after your date of hire. Contact your local HR Business Partner (HRBP) for instructions on how enroll.

Important Note: If you do not make your health benefit elections within 30 days from your hire date, your enrollment will default to **Associate Only** coverage with the following options:

Medical Plan	Dental	Vision	FSA	Optional Life
 ExpressWay	Dental Core	Opt out	Opt out	No Optional Life Insurance

Remember: Once you enroll, 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 7).

Open Enrollment for the 2023 Plan Year¹

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 your needs and those of your family.

The Open Enrollment dates for the 2023 plan year are:

Open Enrollment Dates
October 24 – November 4, 2022

Selections made during Open Enrollment are effective **January 1, 2023 through December 31, 2023**.

Open Enrollment Checklist

- ☐ **Read this guide** to learn about your 2023 benefit options and how to enroll or make changes to your benefits.
- ☐ **Explore resources** offered to help make your benefit decisions (refer to page 23 of this guide)
- ☐ **Complete Open Enrollment in Oracle Fusion between October 24 – November 4** if you want to do any of the following for the 2023 plan year:

<ul style="list-style-type: none">Enroll or re-enroll in a Health Care or Day Care Flexible Spending Account (FSA)	<ul style="list-style-type: none">Update life insurance beneficiaries
<ul style="list-style-type: none">Change plan options (medical, dental, vision, optional life)	<ul style="list-style-type: none">Enroll in voluntary benefits
<ul style="list-style-type: none">Add or remove dependents	<ul style="list-style-type: none">Elect to cash out Paid Time Off (PTO)²

Important Reminder

What will happen if you **DO NOT** make changes in Oracle Fusion during Open Enrollment?

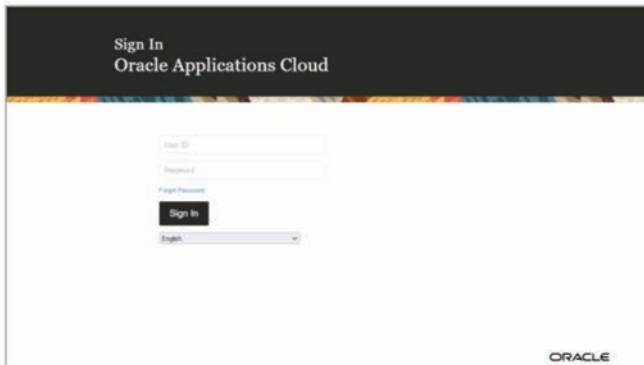
- Your health plan elections and covered dependents will remain the same for 2023
- Your Health Care and Day Care Flexible Spending Accounts (FSA) will reset to \$0 for 2023
- Your PTO Cash Out election will default to 0 (zero) hours in 2023

¹This information does not apply to anyone hired in 2023.

² If you elect to cash out PTO in 2023, PTO Cash Out payments will be in December 2023. All affiliates have a common payout.

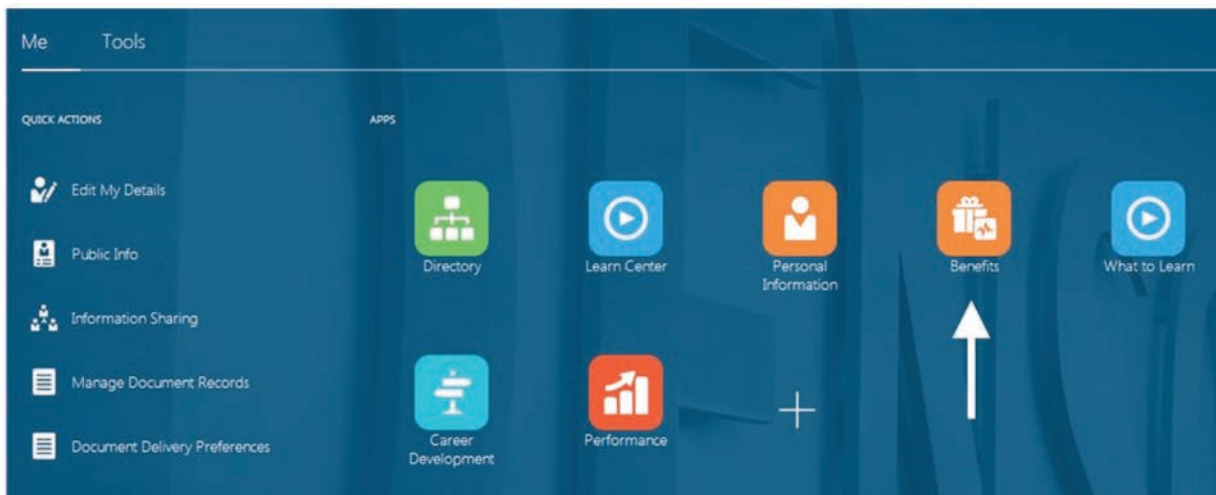
Oracle Fusion Instructions for 2023 Open Enrollment

- 1 Access Oracle Fusion by clicking on the link at DENSOBenefits.com.
 - **Your Oracle Fusion User ID is your DSC-ID.** Your DSC-ID is a unique 10 or 11-digit identifying number assigned to all associates when they join the company. It is made up of two sets of numbers:
 - Your affiliate's 5-digit company code (refer to chart below) and
 - Your 5- or 6-digit associate number.
 - *Example:* if your associate number (found on your DENSO ID badge) is 111111 and you work at DENSO Arkansas (DMAR), your Oracle user ID would be 20039111111.
 - **Logging in for the first time?** If you have a DENSO email address, click on the "Forgot Password" link to reset your password. If you do not have a DENSO email address, contact HRBP for your password information.
 - **Password Reset:** Contact your local HRBP if you need assistance with your DSC-ID or password.



Affiliate	Company Code
DIAM	20003
DMAR	20039
DMAT	20037
DMMI	20005
DMNC	20017
DMTN	20007
DPAM	20001

- 2 Once logged in, go to **Me → Benefits** to begin the open enrollment process. For further instructions, review the Oracle Fusion self-service instructions at DENSOBenefits.com (see *Resources* section on the home page).



- 3 Before logging out, review the confirmation page to ensure any benefit changes you entered have been saved and submitted. You may print the confirmation page for your records.

What to Do After Enrolling

Enrollment Requirements for OpenRoad

- **All participants** must recertify eligibility for a Health Savings Account (HSA) annually by completing the **2023 HSA Eligibility Form**. The form is available on [DENSOBenefits.com](https://densobenefits.com) (see FSA & HSA Tax Savings Accounts). In order to receive DENSO's annual HSA contribution of \$500 (individual) or \$1,000 (family) in 2023, the form **must be submitted by April 30, 2023**.
- **Newly enrolled** - If you're enrolling in OpenRoad for the first time, and you qualify to receive DENSO's annual HSA contribution and/or contribute to an HSA through payroll deduction, you must set up a Health Savings Account with Optum Bank within 4 months of the date you become eligible to receive the company annual HSA contribution. In addition, the **2023 HSA Eligibility Form** must be submitted within 4 months of eligibility (*refer to the eligibility form or go to [DENSOBenefits.com](https://densobenefits.com) for instructions on how to open your HSA*).
- **HSA 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 your Empower Retirement account at empowermyretirement.com. Participants have integrated access and capability to manage your pre-tax contribution elections to your 401(k) retirement and HSA contributions.






Optional Associate 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 November 30, 2022** as specified on page 19.

Note: E of I submissions from Open Enrollment will not be considered if signed after **November 30, 2022**

ID Cards

- **New Vision Cards in 2023** – Due to Superior Vision rebranding under the MetLife network in early 2023, MetLife will issue new vision ID cards to all covered associates after January 1, 2023.
- **New Hires in 2023** – You will receive ID cards within a few weeks after enrolling in the corresponding plans:

Plan	Medical/Prescription	Dental	Vision	Flexible Spending Account (FSA)	Health Savings Account (HSA)
Carrier	Blue Cross Blue Shield of Michigan	Delta Dental of Tennessee	Superior Vision by MetLife	WEX	Optum Bank/Empower
Note	Your dependents for the prescription plan are the same as whom you cover on the medical plan			If you re-enroll in an FSA, continue to use your current card in 2023.	Note: If you have an existing HSA with the Optum Bank or Empower logo, you can continue to use your current debit card. If you open a new HSA, you will be issued a debit card with the Empower logo
Card Example					

- **Need Additional ID Cards?** Dependent names will not appear on 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 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 that he or she has been continuously incapable of self-support because of a mental or physical handicap that existed prior to age 26.

Note: Coverage will automatically end on the last day of the month in which your dependent child turns age 26.

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.

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 Summary Plan Description (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) by completing a Family Status Change Form.

Supportive documentation is required, which could include:

- Marriage Certificate
- Final Divorce Decree
- Birth or Adoption Certificate
- Court Order

Only elections consistent with the status change will be allowed.

For more information about Family Status Changes or to complete the Family Status Change Form, contact your local HRBP.

Special Considerations

DENSO Associates Married to Other DENSO Associates

Oracle cannot always prevent you from making elections that may not be the best choice financially or may duplicate coverage. Therefore, make your elections carefully:

- **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 and the other associate could opt out.
- **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 and the other associate could opt out. Do not duplicate your elections by each enrolling the other as a dependent as this will cost you unnecessary additional premiums without any additional benefit.
- **Optional Associate and Spouse Life** - Each associate may elect Optional Life. Associates married to another associate should not elect Spouse Life. The insurance company will not pay a claim for someone as both an associate and a dependent.
- **Optional Child Life** - Only one associate should elect coverage. The 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 would need to elect their own coverage and one of you can elect to cover your dependents.

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. Please be sure to complete Open Enrollment or New Hire Enrollment forms to notify HR of your elections.
- **Optional Child Life** - Once a child becomes a DENSO associate, he/she is no longer eligible for coverage 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** - Once a child becomes a DENSO associate, he/she is no longer eligible for dependent coverage under a Voluntary Critical Illness, Accident, or Hospital Indemnity policy. Claims will not be 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. It is not considered a family status change to add them to your plans 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 SPD which can be viewed/downloaded from [DENSOBenefits.com](https://densobenefits.com).

Note: Blue Cross Blue Shield 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 BCBS, by calling the number on the back of your BCBS ID card: 1-888-605-2563, or by calling the BCBS COB update line: 1-866-263-9494.

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.

Health Plans and Well-Being Programs





Medical/Pharmacy Plan



Blue Cross Blue Shield (BCBSM) of Michigan administers all three medical plan options, including the prescription benefit program. There are two sets of medical premiums within the three options:

- **Standard Premium** - applies to associates who do not participate in Healthy Horizons.
- **Healthy Horizons Preferred Premium** - applies to associates who complete the requirements outlined in the 2023 Healthy Horizons Program overview and anyone hired between 10/1/2022 and 12/31/2023. Go to DENSOBenefits.com or contact your local HR for details on how to qualify for the discounted premiums.

Note: The vaccine incentive offered as a 2022 premium incentive was effective for the 2022 calendar year only and expires December 31, 2022.

Biweekly Medical Premiums									
	 ExpressWay			 MainStreet			 OpenRoad		
	Standard	Preferred ¹	Annual Savings with Healthy Horizons	Standard	Preferred ¹	Annual Savings with Healthy Horizons	Standard	Preferred ¹	Annual Savings with Healthy Horizons
% Paid by Associate (DENSO pays remainder)	24%	20%		30%	25%		15%	8% and 11%	
Associate Only	\$49.80	\$41.84	\$206.96	\$84.14	\$70.68	\$349.96	\$24.00	\$12.00	\$312.00
Associate + 1	\$99.61	\$83.68	\$414.18	\$168.29	\$141.36	\$700.18	\$48.00	\$36.00	\$312.00
Family	\$161.87	\$135.97	\$673.40	\$273.47	\$229.71	\$1,137.76	\$78.00	\$58.50	\$507.00
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.			Someone who likes familiarity. It offers a traditional deductible and coinsurance for most services.			Someone who likes freedom and doesn't mind a little risk so long as they are driving. It offers a high deductible which is required for a Health Savings Account (HSA).		

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.

Telemedicine

Telemedicine is available through Blue Cross Blue Shield of Michigan (BCBSM). Benefits include online and telephonic visits for minor illnesses with 24/7 access. BCBSM connects you to board-certified doctors using your smartphone, tablet, or computer. Visits cost less than the average cost of a regular office visit. **Note:** This service is not available for behavioral health visits.



Cost

- \$15 copay for  ExpressWay and  MainStreet participants
- \$59 charge (applied toward deductible and coinsurance) for  OpenRoad participants

How to Sign Up

Method	Notes
Mobile – Download the BCBSM Online Visits app Web – Visit bcbsmonlinevisits.com Phone – Call 844-606-1608, 24 hours/day, 7 days/week	<ul style="list-style-type: none"> • Add your BCBSM plan information (Select “Blue Cross Blue Shield of Michigan” from the drop-down list). • Add service key BLUE. Using the service key ensures that you will see the services covered by your health plan. • Enter credit card information for payment when you register. Optum Bank HSA debit cards are accepted.

Prescription Plan

- **Network Pharmacies** - there are over 65,000 pharmacies in the BCBSM network.
- **Formulary** - If drugs are on the BCBSM formulary, they are preferred over drugs that are 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. BCBSM sends a letter to impacted members before a drug is removed from the list, because removal may result in a higher cost.
 - Drugs may be added to the formulary any time throughout the year, which may result in a lower cost.
- **Step Therapy** - You may need to try one or more alternative drugs before being allowed to fill certain prescriptions your doctor prescribes.
- **Prior Authorization** - Certain drugs require your doctor to provide additional information before the pharmacist can fill the prescription; you or your doctor should contact BCBSM 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 **AllianceRx Walgreens Prime**. Contact the specialty pharmacy at **855-244-2555** to arrange filling your specialty prescription.
- **Preventive Drugs** - Some preventive medications are available to *OpenRoad* participants at no cost.

Go to the Medical & Prescription section on [DENSOBenefits.com](https://densobenefits.com) to view the prescription drug lists.

Benefit Tools and Tips

BCBS of Michigan Member Resources

Creating a Blue Cross member account connects you to online resources and information to make informed, confident decisions about your health care. The resources found in your member account are personalized to you and your medical plan.



Your BCBSM member account can help you:

- **Find in-network doctors, urgent care centers, hospitals, and pharmacies.**
- **Track your deductible and out-of-pocket costs.**
- **Review claims and Explanation of Benefits (EOBs)** to monitor your medical and prescription claims.
- **Complete forms** and submit paperwork
- **See what's covered** including preventive services and other medical and prescription drug coverage.
- **Compare costs** for providers, procedures, drug costs at pharmacies, and find out how much you'll pay before a doctor visit, procedure, or a prescription.

Register for your Blue Cross member account:

- Go to bcbsm.com/DENSO
- Select **Register Now**
- Or, Text **REGISTER** to **222764**.

Note: You'll need your enrollee ID from your BCBSM ID card to register.

New Partners in 2023



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

- Musculoskeletal (MSK) hip or knee replacements, spinal fusion, and bariatric surgeries will be mandatory through Carrum Health and will be excluded under BCBSM (some exceptions may apply).
- Members will have the option to use Carrum Health or BCBSM (plan cost share will apply) for other orthopedic procedures (e.g. hand, wrist, elbow, shoulder, ankle, foot, etc.), Oncology, and Cardiac surgeries.
- Significant cost savings to you!
- Personal support from a dedicated care team to assist with arranging travel, scheduling appointments, managing billing, and more.

Those enrolled in the ExpressWay or MainStreet plans will have **no out of pocket cost share** for the surgical event. Those enrolled in OpenRoad will be required to meet the plan deductible before becoming eligible to use a Carrum surgical service with zero cost share. Additional details will be shared soon.



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! Additional details will be shared soon.

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	 24-Hour Nurse Line	 Online Visits	 Urgent Care Center	 Emergency Room
<p>A primary care physician (PCP) is your first line of defense. They get to know your health history over time and can recommend follow-up care, like seeing a specialist, if needed.</p> <p>\$25 Copay—PCP \$50 Copay—Specialist </p> <p>Deductible/Coinsurance </p> <p>\$10 DFHC Copay </p>	<p>A registered nurse is available 24/7 to answer your urgent and non-urgent health concerns. Members can use the 24/7 nurse line by calling 800-775-2583.</p> <p>\$0 Cost </p>	<p>BCBSM Online Visits give 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 or prescription if you can't get in to your doctor's office.</p> <p>\$15 Copay </p> <p>\$59 Charge </p>	<p>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.</p> <p>\$50 Copay </p> <p>Deductible/Coinsurance </p>	<p>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.</p> <p>\$400 Copay </p> <p>Deductible/Coinsurance </p>

Note: the logos below represent the 3 medical plan options referenced in the table above:



2023 Plan Comparison

Medical/Prescription: Blue Cross Blue Shield of Michigan (BCBSM)						
Behavioral Health: Behavioral Health Systems (BHS)						
Surgical Coordination: Carrum Health						
DStreet Option	 ExpressWay		 MainStreet		 OpenRoad ¹	
Standard Biweekly Premiums ²	Associate Only Associate + 1 Family	\$49.80 \$99.61 \$161.87	Associate Only Associate + 1 Family	\$84.14 \$168.29 \$273.47	Associate Only Associate + 1 Family	\$24.00 \$48.00 \$78.00
Healthy Horizons Preferred Biweekly Premiums ³	Associate Only Associate + 1 Family	\$41.84 \$83.68 \$135.97	Associate Only Associate + 1 Family	\$70.68 \$141.36 \$229.71	Associate Only Associate + 1 Family	\$12.00 \$36.00 \$58.50
Metal Tier (to more easily compare plans by level)	Gold		Gold		Gold	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Annual Deductible	Deductible included in the Out-of-Pocket Maximum. In- and Out-of-Network Deductibles do not apply to each other.					
Individual	\$1,000	\$2,000	\$750	\$1,500	\$1,500	\$3,000
Family	\$2,000	\$4,000	\$1,500	\$3,000	\$3,000	\$6,000
Preventive Care	100%	60% covered after Deductible	100%	60% covered after Deductible	100%	60% covered after Deductible
Allergy Injections	\$0 copay		80% covered after Deductible		80% covered after Deductible	
Primary Care Physician Office or Virtual Visits, including: - Chiropractic Manipulations & Acupuncture - Physical, Occupational, Speech Therapies - Psychologist/Psychiatrist Therapy Visits	\$25 copay					
Specialist Office or Virtual Visits	\$50 copay					
Urgent Care						
Emergency Room	\$400 copay		\$400 copay		80% after Deductible	
BCBSM Online visits	\$15 copay		\$15 copay		\$59 (applied toward Deductible and Coinsurance)	
Labs & Testing	80% covered after Deductible	60% covered after Deductible	80% covered after Deductible	60% covered after Deductible	80% covered after Deductible	60% covered after Deductible
Hospitalization						
Surgery: Musculoskeletal (MSK) (Hip/Knee Replacement)	100% covered (No out-of-pocket costs, no deductible) <u>Must be coordinated by Carrum Health</u>				Coverage to be determined: Patient with HSA-eligible plan must meet at least the federally mandated minimum deductible	
Spinal Fusion						
Bariatric Surgery						
Other MSK orthopedic procedures (e.g., hand, wrist, elbow, foot, etc.)	<ul style="list-style-type: none">If coordinated by Carrum Health: 100% coveredIf arranged by patient using in-network providers: Deductible, then 20% Coinsurance					
Surgical Oncology						
Cardiovascular Surgery						
Annual Out-of-Pocket Maximum	Out-of-Pocket Maximum <u>includes</u> the Deductible and Copays. In- and Out-of-Network Out-of-Pocket Maximums do not apply to each other.					
Individual	\$6,000	\$12,000	\$6,250	\$12,500	\$3,500	\$7,000
Family	\$12,000 (not to exceed \$6,000 per covered person)	\$24,000 (not to exceed \$12,000 per covered person)	\$12,500 (not to exceed \$6,250 per covered person)	\$25,000 (not to exceed \$12,500 per covered person)	\$6,850	\$14,000
Prescriptions	Retail (up to a 31-day supply)		Mail or 90 Day Retail		Preventive Drug List – 100%, all other prescriptions Deductible & Coinsurance	
Generic	\$10 copay		\$25 copay			
Preferred Brand	\$50 copay		\$125 copay			
Non-Preferred Brand	\$90 copay		\$225 copay			
Specialty	\$200 copay		N/A			

¹Eligible OpenRoad participants will receive a Health Savings Account (HSA) contribution from DENSO in the amount of \$500 (individual) or \$1,000 (family) in 2023.

²Standard Premium - applies to associates who do not participate in Healthy Horizons

³Healthy Horizons Preferred Premium - applies to associates who complete the requirements outlined in the 2023 Healthy Horizons Program overview and anyone hired between 10/1/2022 and 12/31/2023.

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 charge. 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 <i>(not reduced by preventive care)</i>	\$1,000		\$2,000	
Services				
Diagnostic and Preventive, no deductible required <i>(up to 2 visits per year)</i>	Covered at 100%	Covered at 80%	Covered at 100%	Covered at 80%
Basic	50%	40%	80%	60%
Major			70%	50%
Orthodontic <i>(excluded from annual maximum)</i>	Not Covered		50% up to \$2,000 lifetime maximum, no deductible (no age limit)	

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
- 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 your right.



Vision Plan

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



SuperiorVision
By  MetLife

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)		Up to \$35 reimbursement Up to \$50 reimbursement Up to \$60 reimbursement
Single		
Bifocal		
Trifocal		
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/](https://www.metlife.com/insurance/vision-insurance/) to search for providers (search under *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/](https://www.metlife.com/insurance/vision-insurance/) for more information on how to order contact lenses.

Healthy Horizons Employee Wellness Program



DENSO offers the opportunity for associates to participate in our Wellness Program, Healthy Horizons. Health by Design (HbD) is DENSO's wellness vendor. The Healthy Horizons program offers confidential, individualized coaching and education, tools, and positive support to help you make continuous improvements to your health.

Participating in Healthy Horizons may not only help you kaizen (continuously improve) your life, but could also lower your medical insurance premiums! Visit DENSOHealthyHorizons.com, or contact HbD at 866-996-2115 for more information.

Employee Assistance Program (EAP)

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.



BEHAVIORAL HEALTH SYSTEMS

Some of the additional EAP plan benefits include:

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

Behavioral Health Program

The behavioral health program is also administered by BHS and coordinates with the EAP to provide inpatient and outpatient care for mental health and substance abuse treatment. The behavioral health program benefits are available to associates and their eligible dependents enrolled in a DENSO medical plan. **In order to save you money, they make sure the free services provided by the EAP are utilized first.** BHS contracts with over 20,000 providers across the U.S. To ensure coverage, you should first contact and be referred through BHS. All inpatient care and certain outpatient services must be pre-authorized by BHS.

To view further details on the benefits and resources available through BHS, visit BehavioralHealthSystems.com. You can also download their new app! Login under Member Access using the Employer ID: **DENSO**.

Call BHS at 800-245-1150 to speak with a DENSO Care Coordinator.

Chronic Condition Programs

These 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		Personalized education and support for managing Diabetes; includes a free glucose meter and testing supplies, mobile app, and coaching.
Hypertension	Go.Livongo.com/DENSO/register Phone: 800-945-4355 Registration code: DENSO	Personalized education and support for managing Hypertension (high blood pressure); includes a free blood pressure monitor, mobile app, and coaching.
Musculoskeletal (MSK)	 Hinge Health hingehealth.com/DENSO Phone: 855-902-2777	Virtual education and support for managing joint and back pain; includes free wearable sensors with live feedback in the app, personalized exercise therapy, and coaching.
Digestive Health	 GIThrive welcome.mygithrive.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.

Tax Savings Plans



Flexible Spending Account (FSA)

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. WEX, Inc. is DENSO's FSA administrator who tracks your contributions and reimbursements and provides a debit card.

Key Points on FSAs	
	You decide the amount you expect to spend on eligible health care and/or dependent care expenses throughout the year. Please 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.
Day Care FSA Eligibility	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 Dependent 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, 2023: When eligible expenses can be incurred in order to be eligible for reimbursement. Note: New hires cannot include expenses prior to hire date.
2023 Annual FSA Contribution Limits	<ul style="list-style-type: none"> Health Care FSA - \$2,850 Day Care FSA - \$5,000 <p>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).</p>
Run-Out Period	January 1 – March 31, 2024: This timeframe is called the “run-out period” that participants have to file claims for expenses incurred in the prior plan year.
Carry-Over	<p>Participants enrolling in Health Care FSA for 2023 can carry-over up to \$550 in remaining, unused 2022 Health Care FSA funds into the 2023 plan year. The funds that are rolled over can be used, after the run-out period, from the previous plan year. Any unused funds exceeding \$550 from the 2022 plan year will be lost.</p> <p><i>Day Care FSA is not eligible for the carry-over.</i></p> <p>Note: If you carry-over FSA funds into 2023, you will not be eligible for an HSA in 2023.</p>

FSA Resources

- **Considering enrollment in an FSA?** – Go to DENSOBenefits.com to view the Tax-Advantaged Accounts informational video.
- **WEX 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 ‘WEX’).
- **Eligible Expense List** – To find out which specific expenses are eligible, view the searchable eligibility list at wexinc.com/insights/benefits-toolkit/eligible-expenses/.



Limited Use FSA Debit Card

The 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 WEXinc.com or the mobile app for details.

Health Savings Account (HSA)



If you enroll in the OpenRoad high-deductible medical plan option, 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	<p>To be eligible for the Health Savings Account (HSA), you must satisfy all of the following requirements:</p> <ol style="list-style-type: none"> 1. Enrolled in the OpenRoad medical plan in 2023. 2. Not enrolled in a Health Care FSA in 2023 or have a FSA carry-over from 2022. 3. Not enrolled in Medicare. 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 (for more details, see IRS Publication 969): <ul style="list-style-type: none"> • 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) • Medical coverage by a non-QHDHP • Any Veterans Affairs benefits used within previous three months • National health care insurance provided by foreign countries while an expatriate
Your Contributions	<p>You may elect to start, stop, or change your contribution amount to your HSA at any time during the year by logging in to your Empower Retirement account at empowermyretirement.com. You will have the integrated access and capability to manage your contribution election to your 401(k) retirement and HSA contributions.</p>
Annual Company Contributions	<p>DENSO will contribute money to the accounts of eligible associates in 2023: (\$500 for individual and \$1,000 for family)</p>
2023 Annual HSA Contribution Limits	<ul style="list-style-type: none"> • Associate Only coverage - \$3,850 (including DENSO's \$500 contribution) • Associate + 1 or Family coverage - \$7,750 (including DENSO's \$1,000 contribution) <p><i>Note: You can make an additional \$1,000 catch-up contribution if you will be age 55 or older by end of year 2023.</i></p>
Eligible Expenses	<p>You can use your HSA to pay for eligible medical, prescription, dental, and vision expenses. For a list of eligible health care expenses, visit irs.gov and refer to Publication 502. Be sure to keep your receipts for all qualified expenses.</p>
Portability	<p>You own your HSA, which means you keep it even if you leave the company or retire.</p>

HSA Resources → To learn more about the specifics of Health Savings Accounts, go to the *FSA & HSA Tax Savings Accounts* section on [DENSOBenefits.com](https://densobenefits.com). Optum Bank also provides educational videos on HSAs at optumbank.com/resources.

Important Notes for OpenRoad Participants

- New OpenRoad participants must take the following action within 4 months of becoming eligible to receive the company contribution in 2023:
 - 1) Complete and submit the **2023 Health Savings Account (HSA) Eligibility Form** to HRBP AND
 - 2) Open a Health Savings Account with Optum Bank.
- Existing OpenRoad participants must take the following action by **April 30, 2023** to be eligible to receive an annual company contribution in 2023:
 - 1) Submit the **2023 Health Savings Account (HSA) Eligibility Form** to HRBP AND
 - 2) Open an Optum Bank HSA (if you do not already have an account).
- OpenRoad participants who do not contribute to an HSA may enroll in a Health Care FSA. However, if you enroll in a Health Care FSA, you will not be eligible for the HSA company contribution.



Participation Overview

Full-time and part-time regular 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 and contribute 4% of your pre-tax earnings into your 401(k) account each pay period, along with 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

- **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. *Note: DIAM and DPAM associates who elected to continue their Pension Plan will not be eligible for this contribution until Plan Year 2023.*
- **Annual True-Up** - Company matching contributions are reviewed annually to ensure you receive the maximum allowed amount.

Age at End of Year	2022 IRS Contribution Maximum
Less than 50 years old	\$20,500
50 + years old	\$27,000

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 professionally 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%

*QMACs and QNECs 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.

- **Know your 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.
- **Quickly link to 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

	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.		

* Note: 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.

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: <ul style="list-style-type: none"> – 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	The 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: <ul style="list-style-type: none"> – 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	The 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	\$0.05	\$0.06	\$0.08	\$0.10	\$0.13	\$0.21	\$0.41	\$0.49	\$1.04	\$1.32	\$2.27

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 \$0.50 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 by **November 30, 2022**, your requested coverage level will not be in effect.
- During Open Enrollment, Oracle projects premiums based on current salary and age as of January 1, 2023.
- New Hires in 2023 have 30 days from date of hire to sign and submit the E of I form. For family status changes, you have 45 days to submit the form.
- Premiums will adjust throughout the year with changes in your age and/or wages.

Disability Coverage

DENSO recognizes the importance of your financial well-being 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.



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	<i>Accident:</i> 0 days (benefit begins on Day 1) <i>Illness:</i> 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	Matrix
Payment Processing	Exempt associates – Paid in-house Nonexempt – Paid through 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	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 Description (SPD) for more details, including the definition of disability, pre-existing conditions, and other exclusions.

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 at the group-discounted rates outlined below. You can find the detailed benefit summaries at DENSOBenefits.com, or contact HRBP.

Note: Associates have the opportunity to enroll in these voluntary programs during the Annual Open Enrollment period only.

Voluntary Critical Illness



Critical Illness insurance can help fill a financial gap if you experience a serious illness such as cancer, a 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	\$2.06	\$4.30	\$8.70	\$15.16	\$20.26	\$31.08
Associate & Family (includes Spouse and Children)	\$3.42	\$6.84	\$13.52	\$23.36	\$31.08	\$47.50

Note: The rate at enrollment will be locked in as long as you continue this benefit and will not adjust as you 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.

Accident Insurance Biweekly Rates	
Associate Only	\$5.56
Associate & Spouse	\$9.60
Associate & Children	\$12.02
Associate & Family (includes Spouse and Children)	\$15.16

The Voluntary Critical Illness and Accident plans are administered by AllState.

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 Standard Life Insurance.

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



Voluntary Identity Theft Protection



This voluntary program is provided through IdentityForce and services include:

- Credit monitoring
- Bank account alerts
- SSN, Driver's License number, and public record protection
- Company breach protection
- Complete restoration

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

Resources

HRBP: Your Local Human Resources Advocate

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

If you need assistance during Open Enrollment or have questions about your Oracle login information, you can talk to an HR Business Partner on-site at your location. Please check for local office hours or call HRBP for details on where to go. A list of all HRBPs by location is available:

- On the DENSO mobile app
- On [DENSOBenefits.com](https://densobenefits.com) under Contacts

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 this world 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?
- Where should I go for help with my chronic condition?
- 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!



DENSO Benefits Helpline

Phone: 1.855.311.2115

Hours: 8 am to 6 pm ET, Monday-Friday

Email: denso@benefitadvocates.net

DENSOBenefits.com

View benefit videos, explore D•Street, news, forms, plan documents, and other helpful information. To access plan documents, enter

Username: *denso*

Password: *Benefits4u!*



Scan the QR code to visit
[DENSOBenefits.com](https://densobenefits.com)

Note: Don't panic if you visit [DENSOBenefits.com](https://densobenefits.com) and are redirected to another webpage. The official file path is <https://www.denso.com/us-ca/en/employee/us-benefits/> but you can call it [DENSOBenefits.com](https://densobenefits.com) for short.

Vendors, Health Partners, and Program Administrators

Please refer to the chart below for the phone and website information.

Vendor, Health Partner, or Program Administrator	Benefit	Phone Number	Website
2nd.MD	Second Opinion	866-887-0719	www.2nd.md/denso
Allstate	Voluntary Critical Illness and Voluntary Accident	800-521-3535	allstatebenefits.com
Behavioral Health Systems (BHS)	Employee Assistance Program, Mental Health/Substance Abuse and Employee Assistance Program	800-245-1150	behavioralhealthsystems.com
Benefit Advocates	DENSO Benefits Helpline	855-311-2115	Email: denso@benefitadvocates.net
Blue Cross Blue Shield of MI (BCBSM)	Medical & Prescription	888-605-2563	bcbsm.com
	Telemedicine	844-606-1608	bcbsmonlinevisits.com
Carrum Health	Surgical Coordination	888-855-7806	carrumhealth.com
Delta Dental of Tennessee	Dental	800-223-3104	deltadentaltn.com
Empower Retirement	401(k) Recordkeeper	888-411-4015	empowermyretirement.com
GITHrive	Digestive Health Program	833-336-9488	welcome.mygithrive.com/denso/
Health by Design (HbD)	Healthy Horizons	866-996-2155	densohealthyhorizons.com
Hinge Health	Back and Joint Pain Management	855-902-2777	hingehealth.com/DENSO
IdentityForce	Voluntary Identity Theft Protection	877-694-3367	identityforce.com
Livongo	Diabetes/Hypertension Management	800-945-4355	join.livongo.com/DENSO/hi
Matrix Absence Management	Short-Term & Long-Term Disability	800-866-2301	matrixabsence.com
Optum Bank	Health Savings Account (HSA)	866-234-8913	optumbank.com
Reliance Standard Life Insurance	Basic Life and AD&D, Optional Life	800-351-7500	reliancestandard.com
	Hospital Indemnity		
Superior Vision by MetLife	Vision	800-507-3800	superiorvision.com
WEX	Health Care & Day Care Flexible Spending Accounts (FSA)	866-451-3399	wexinc.com

DENSO Wellness Program Recognized with National Health Award

Did you hear? DENSO's wellness program Healthy Horizons received the 2022 C. Everett Koop National Health Award for outstanding worksite health promotion and improvement!

Watch our video here:



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.