SAMSUNG

2024 BENEFITS

2024 BENEFITS ENROLLMENT GUIDE

Welcome SRA BENEFITS ENROLLMENT

Well-Being

To help you make informed decisions regarding your benefit plan, we are providing this enrollment guide and other resources throughout the enrollment process.

Take the time to learn what is available and what options are best for you and your loved ones. It is **time well spent!**

ENROLLING FOR BENEFITS

As a new hire you have 30 days from your date of hire to enroll yourself and your dependents. If you do NOT enroll within 30 days, you will not have coverage in 2024, unless you or your dependents experience a Qualifying Life Event (QLE) such as marriage, spouse job change, or the birth of a child. Aside from experiencing a QLE, your next chance to elect benefits will be during Annual Open Enrollment in the fall of 2024.

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Register Online to Enroll Click on **digital.benefitsnow.com/SRA** to begin the registration process. Select "*New User*" option. Scan the code to see detailed enrollment instructions.

- Select "New User" option below the Log On button.
- Follow the step-by-step prompts. Enter the last 4 digits of your Social Security Number, birthdate, and Zip Code (as it is shown in Workday), and then click Continue to create your User ID and Password.
- Next you will be prompted to create security questions and answers to authenticate, and continue to complete the registration process.
- A "Successfully Completed" message will appear once completed. Click Continue to proceed to the Alight Landing Page and select the Enroll Now tile.

YOUR BENEFITS

SRA provides a full range of benefits that address your needs now and in the future, which are discussed in this guide.

- Medical
- •<u>myVirtualCare Access</u> <u>Plan</u>^
- Prescription Drug[^]
- Dental[^]
- Vision[^]

• <u>Permanent Life with</u> <u>LTC Benefits</u>

- ·Life & Disability Insurance
- <u>Critical Illness</u>
- Accidental Injury
- Hospital Indemnity
- •<u>Health Savings Account</u> (<u>HSA</u>)
- •<u>Flexible Spending</u> <u>Accounts (FSA)</u>
- Mental Health Care

- •Back-Up Care
- Legal Services Program
- ID Theft Protection
- Financial Wellness
- Lifestyle Benefits
- <u>Benefit Navigation +</u>
 <u>Advocacy Support</u>

• Discount Program

^Benefits available to interns

Benefit Eligibility

Employees

· As a full-time employee, your benefits coverage is effective as of your date of hire.

Dependents

- As a benefit-eligible employee, you may enroll your eligible dependents, including:
 - Your legal spouse or domestic partner (same or opposite sex)
 - Your child(ren) up to the end of the month they reach age 26
 - · Your stepchild(ren) or child(ren) of your spouse or partner.

You may NOT enroll:

- Your spouse from whom you are legally separated or divorced or the child(ren) of that spouse (i.e., stepchild(ren) or child(ren) of your spouse)
- Your child(ren) age 26 or older
- Your parents

Please be sure to <u>only enroll eligible dependents</u> to keep SRA benefits affordable for everyone. If your dependent is no longer eligible for benefits, please remove them from your coverage within 30 days from the date your dependent becomes ineligible.

myVirtualCare Access Plan

A new virtual first health plan for convenient care and lower costs



Samsung Research America is excited to offer employees the myVirtualCare Access plan, with care by Teladoc Health. **With this plan, you receive care virtually first.**

Virtual Care

- Regular Doctor Visits
- Mental Health Care
- Wellness and Prevention
- 24/7 Non-Emergency Urgent Care
- Screenings
- Specialty Care
- Chronic Condition Management
- And more!

In-person Care

- Available by referral if care cannot be received virtually
- Scheduled for you by your Care Team
- Includes access to local Cigna OAP providers by referral

Scan the QR code for more information.



https://www. luminarehealth.com/ myvirtualcareaccess/ introduction

Virtual-first Care from Anywhere

After enrolling, get started by downloading the **myVirtualCareAccess mobile app** or by visting **myVirtualCareAccess.com**. It's easy to select your provider, schedule your first appointment, complete your health assessment, and connect with your doctor and Care Team.

Dood Morning, David	Please select a provider.		<
	Tap "Profile" to see more details about each provider, or use the filters to make changes to the list.	During the past TWO (2) weeks, how much, (or how often) have you been bothered by the following	CONSISTENCE -
Primary360	Current Filters Filter 🖓	problems? Response key: • None: Not at all	HAR SER
chedule a primary care visit or et care now for non-emergency onditions	Jasmine Smith >	Mild: Several days Moderate: More than half the days Severe: Nearly every day	
chedule a Primary Care Visit Get Care ow (General Medical)	Title: MD or DO Doctor Specialties: Adolescent Medicine, Adult Medicine	Little interest or pleasure in doing things None Mild Moderate Severe	
	German, English Profile	Feeling down, depressed, or hopeless None Mild Moderate Severe	12 (2) (2)
Mental Health	Paul Sarmiento >	Copyright 1999 Pfizer Inc.	
alk to a therapist or psychiatrist y phone or video, 7 days a week	Title: ND or DO Doctor Specialties: Family Medicine English, Spanish, French Profile	CONTINUE >	
As early as Options Thursday	Janie Smith >		
Specialists &	Title: MD or DO Doctor Specialties: General Practice, Sports Medicine Spanish Profile		
Expert Medical			

Self-funded plans are administered by Luminare Health Benefits, Inc.

800.832.3332 · LuminareHealth.com

Teladoc. luminare health

myVirtualCare PLAN FAQS AND HIGHLIGHTS

1. How much would I pay for the myVirtualCare plan to cover myself only?

The myVirtualCare plan is offered for **\$0 employee contributions** for employee-only coverage, with options to cover your dependents at a reasonable cost. See <u>page 20</u> for monthly contributions.

2. Does the myVirtualCare Plan have a deductible that I need to meet?

The myVirtualCare Plan has a **\$0 in-network deductible** and offers lower out-of-pocket costs than a typical "in-person" plan and includes many additional services at no out-of-pocket cost to you. If you select the myVirtualCare plan, you aren't required to see a doctor virtually. If you don't use your virtual Teladoc doctor, you will have a deductible to meet, higher out-of-pocket costs, and you will lose access to your Care Team.

3. Can I get care for my child(ren) in-person?

Yes! With the myVirtualCare Plan, you can get in-person care for children. Plan members are assigned a dedicated Care Team upon their first visit with their virtual Teladoc primary care doctor. Your Care Team can help schedule any needed in-person care with an in-network Cigna OAP provider, send you reminders, answer any questions you may have, and work with your doctor to help develop a care plan.

4. Who is the myVirtualCare plan designed for?

The myVirtualCare was designed for people who need:

- Lower out-of-pocket health care costs
- Flexible and easy access to quality care without long wait times or traveling to the doctor's office
- An easy-to-use central hub for many of their care needs
- Fast access to health care professionals to answer questions and coordinate their care
- To build a relationship with a primary care doctor, mental health professional, dermatologist, or nutritionist

5. What if I cover my family?

The myVirtualCare plan offers you fully coordinated, one-stop-shop, virtual first health care at lower out-of-pocket costs than a typical "in-person" plan and has options to cover all of your dependents. See page 20 for monthly contributions.

MEDICAL INSURANCE

SRA offers multiple medical plan options so you can choose the coverage level best-suited to you. All of the available plans include prescription coverage. Medical coverage options continue onto page 7.

	myVirtualCare Access Plan [^]		Cigna Open Access Plus (OAP) Plan	
	Tier 1 In-Network	Tier 2 In-Network	In-Network	Out-of-Network
Annual Deductible** (Individual/Family)	\$0	\$3,000 / \$6,000	\$200 / \$600	\$300 / \$900
Out-of-Pocket Maximum*** (Individual/Family)	\$6,000 / \$12,000 ¹	\$8,550 / \$17,100 ¹	\$2,250 / \$6,750 (includes deductible)	\$4,500 / \$13,500 (includes deductible)
Coinsurance	N/A	70% SRA / 30% Employee	80% SRA / 20% Employee	60% SRA / 40% Employee
Office Visits	Virtual: Free	70% SRA / 30% Employee	 \$5 copay for Cigna Care Providers**** \$25 copay for Non- Cigna Care Providers 	60% SRA / 40% Employee after deductible
Specialty Visits	Teladoc Virtual: Free In-Person: \$80	70% SRA / 30% Employee	 \$20 copay for Cigna Care Providers**** \$40 copay for Non- Cigna Care Providers 	60% SRA / 40% Employee after deductible
Hospital Care	\$3,000 per admit	70% SRA / 30% Employee	\$200 copay per admission, then 80% SRA / 20% Employee after deductible	\$200 copay per admission, then 60% SRA / 40% Employee after deductible
Annual Routine Physical Well-Woman Visit- OB/GYN	Free	\$0 copay	\$0 copay	60% SRA / 40% Employee after deductible
Urgent Care	Teladoc Virtual: Free In-Person: \$100	70% SRA / 30% Employee	\$35 copay	\$35 copay
Emergency Room Visit	\$500		\$100 copay (wa to hospital dir	ived if admitted ectly from ER)
Outpatient Surgery	\$1,500	70% SRA / 30% Employee	80% SRA / 20% Employee after deductible	\$100 copay, then 60% SRA / 40% Employee after deductible

[^]Benefits eligible for interns

^{**}For individuals enrolled in family coverage, deductible will be capped at the individual deductible. Once the deductible has been reached for an individual, the plan will begin to pay coinsurance for that individual. If the family deductible has been met prior to their individual deductible being met, their claims will be paid at the plan coinsurance.

^{***}For individuals enrolled in family coverage, individual out-of-pocket expenses will be capped at the individual out-of-pocket maximum. Once the out-of-pocket limit has been reached for an individual, the plan will pay that individual's covered expenses at 100%. If the family Out-of-Pocket has been met prior to their individual Out-of-Pocket being met, their claims will be paid at 100%.

^{****}Cigna participating providers who rank highest in quality and cost efficiency receive the Cigna Care Designation. These providers are identified by a unique symbol () in the online provider directory on MyCigna.com.

¹ OOPM is aggregated between tiers, so maximum paid would be the tier 2 OOPM.

MEDICAL INSURANCE (CONTINUED)

HSA Plus Plan participants automatically receive Critical Illness, Accidental Injury, and Hospital Indemnity Insurance paid for by SRA.

	Cigna HSA	Kaiser HMO	
	In-Network	Out-of-Network	In-Network
Annual Deductible** (Individual/Family)	\$1,750 / \$3,500	\$3,500 / \$7,000	None
Out-of-Pocket Maximum*** (Individual/Family)	\$3,500 / \$7,000 (includes deductible)	\$7,000 / \$14,000 (includes deductible)	\$1,500 / \$3,000
Coinsurance	80% SRA / 20% Employee	60% SRA / 40% Employee	100% SRA
SRA HSA Contribution (Individual/Family)	\$750 /	\$1,500	N/A
HSA Contribution Maximum	\$4,150 Individual \$8,300 Family SRA contributions count toward the maximum.		N/A
Office Visits	85% after deductible for Cigna Care Providers***	60% after	\$20 copay
Specialty Visits	80% after deductible for Non-Cigna Care Providers	deductible	\$20 copay
Hospital Care	80% after deductible	60% after deductible	\$100 copay per admission
Annual Routine Physical Well-Woman Visit- OB/GYN	Covered 100%; no deductible	60% after deductible	\$0 copay
Urgent Care			\$20 copay
Emergency Room Visit	80% after deductible		\$100 copay (waived if admitted to hospital directly from ER)
Outpatient Surgery			\$50 copay

**For individuals enrolled in family coverage, all eligible family members contribute towards the family deductible. Once the family deductible has been met, the plan will pay each eligible family member's covered expenses based on the coinsurance level specified by the plan.

***For individuals enrolled in family coverage, when in-network, individual out-of-pocket expenses will be capped at the individual out-ofpocket maximum. Once the out-of-pocket limit has been reached for an individual, the plan will pay that individual's covered expenses at 100%. If the family Out-of-Pocket has been met prior to their individual Out-of-Pocket being met, their claims will be paid at 100%.

For individuals enrolled in family coverage, when out-of-network, all eligible family members contribute towards the family out-of-pocket maximum. Once the family Out-of-Pocket has been met, claims will be paid at 100%.

****Cigna participating providers who rank highest in quality and cost efficiency receive the Cigna Care Designation. These providers are identified by a unique symbol (ⓒ) in the online provider directory on MyCigna.com.

PRESCRIPTION

Prescription drug coverage is provided by CVS Caremark when you enroll in the myVirtualCare or Cigna medical plans.

	myVirtualCare Access Plan [^]		Cigna Open Acce	ss Plus (OAP) Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network	
Prescription Drug: Up to 3	Prescription Drug: Up to 30-Day Supply - Retail				
Generic Preferred Brand Non-Preferred Brand**	\$10 copay \$40 copay \$100 copay	Not covered	\$10 copay \$25 copay \$50 copay	70% SRA / 30% Employee after \$50 deductible	
Prescription Drug: 90-Day	y Supply–Mail Order or	CVS Caremark Mainte	nance Choice Program	n	
Generic Preferred Brand Non-Preferred Brand**	\$20 copay \$80 copay \$200 copay	Not covered	\$15 copay \$37.50 copay \$75 copay	Not Covered	
	Cigna H	ISA Plus	Kaiser	HMO*	
	Cigna H In-Network	ISA Plus Out-of-Network		HMO* twork	
Prescription Drug: Up to 3	In-Network				
Prescription Drug: Up to 3 Generic Preferred Brand Non-Preferred Brand**	In-Network 30-Day Supply - Retail 10% after deductible 20% after deductible		in-Ne ⁻ \$10 c \$20 c		
Generic Preferred Brand	In-Network 30-Day Supply - Retail 10% after deductible 20% after deductible 30% after deductible	Out-of-Network Not Covered	In-Ne \$10 c \$20 c \$20 c	twork opay opay opay	

[^]Benefits eligible for interns

* For Kaiser, in-network pharmacies are located in Kaiser Permanente hospitals and medical offices. To find an in-network pharmacy near you, visit www.kp.org. For a list of covered drugs, refer to Kaiser's comprehensive formulary, also available on www.kp.org. Out-of-network pharmacies are not covered.

** Non-preferred brand drugs are brand-name drugs that do not appear on the CVS Caremark Preferred Drug List. These drugs are generally more expensive and do not have approved generic equivalents yet. For more information on non-preferred brand drugs, visit www.caremark.com.

Prescription Highlights

PrudentRx - Specialty Drug Copay Program

- CVS plan members enrolled in the OAP plan will pay a \$0 copay for specialty medications. Members enrolled in the HSA Plus Plan must reach their deductible first.
- PrudentRx obtains copay card assistance for your medication and manages renewals.
- To participate, call 1-800-578-4403.

Health Advisor Enhancement

- Pharmacy Advisor gives you guidance by mail, email, text or phone whenever you need it - helping you make healthy choices, save on medical expenses, and to better manage your health.
- Enhanced preventative care services and communication channels for better engagement.
- CVS will be in touch to get you started.

CVS Caremark Cost Saver

- With this program, you can save automatically on generic non-specialty medications that are filled at a retail pharmacy.
- For 2024, pharmacy spend through GoodRx will automatically be applied to deductible and out-of-pocket threshold.

RxSavingsPlus

- Plan members can save on select medications that aren't covered under your prescription plan.
- Up to 80% savings on generics, up to 40% on brand name medications*, including meds for pets**, at participating pharmacies nationwide.**

*Average savings of 55% for generics and 24% for brand. CVS Health Drug Discount Analytics Team, October 2020. **Prescription savings for pet medications cannot be combined with any other discounts. Heartworm or flea/tick prevention medications are not covered.

CONTROLLING HEALTH CARE COSTS /

Rightway^{*}: Get confidential help with finding a low-cost, high-quality provider, answer questions about medical bills and appeals, and much more. Available whether or not you have SRA medical coverage using the Rightway app from the Google Play Store or App Store[®]. You may also call **1-833-689-0339** or visit https://member.rightwayhealthcare.com/.



The rising cost of health insurance is a concern for all of us. Keeping costs to a minimum contributes to lower premiums in future years. Here are tips on how you can help lower the cost of health insurance:

Use these great health care resources

Get the full list of the programs by visiting: <u>sra.samsung.com/benefits</u> > Important Resources > Controlling Healthcare Costs.

Cigna Health Programs:

Health Advisor: Identifies and notifies Cigna members who are at risk for significant health issues (prediabetes, hypertension, hyperlipidemia) or want to focus on improving healthy eating and exercise.

Telehealth Connection: Get help for minor, non-life-threatening conditions via video chat or phone 24/7 with board-certified doctors, licensed clinicians, or nurses.

Healthy Pregnancies, Healthy Babies: Provides free educational materials about pregnancy and babies.

Omada Complete for Diabetes and Hypertension Management and Prevention: A digital care program that empowers people to achieve their health goals through sustainable lifestyle changes and is for Cigna members and their covered adult dependents. It includes a dedicated health coach, wireless smart scale, interactive lessons, a peer group, remote device monitoring, and support from Certified Diabetes Educators (CDEs) are included. Contact <u>support@omadahealth.com</u> or visit <u>https://omadahealth.com/sra</u> for more information.

Please note, Cigna will transition to digital ID cards accessible via the MyCigna app. Visit myCigna.com to download the app and register now.

myVirtualCare Delivery Program through Trustmark: Receive personalized maternity and adoption education and support at Trustmark's Maternity Management site or by calling 1-833-865-1187.

^Benefits eligible for interns

HEALTH SAVINGS ACCOUNT (HSA)

How do the Cigna HSA Plus Plan and the HSA work together?

Under the Cigna HSA Plus Plan, you will pay the full negotiated rates for all of your health care services (other than preventive care and medicine). The plan will begin to pay benefits after the deductible is met.

Here's an example of how the plan would work if you were to visit your In-Network Primary Care Doctor.

BEFORE YOU MEET YOUR DEDUCTIBLE:



Instead of paying a copay, you will pay the full plan allowance (negotiated rate) of your visit to the doctor. AFTER YOU MEET YOUR DEDUCTIBLE:



*15% for Cigna Care Providers!

You will be responsible for 20% of the plan allowance. The plan will pay the remaining 80% of the cost. Coinsurance will apply until the plan's out-of-pocket maximum is met.

Remember! HSA Plus Plan participants receive Supplemental Insurance (pg. 11) at no cost. If you have a serious medical issue covered under the Supplemental Insurance, these plans can help with meeting your deductible or other expenses.

You can use your HSA to pay your health care bill.

An HSA is a tax-advantaged savings account with investment options that you can use for qualified health care expenses. The account is yours to keep – even if you leave SRA. You can only participate in the HSA if you elect the Cigna HSA Plus Plan. Here's how it works:



** References to taxes are at the federal level. State tax rules may vary.

Critical Illness, Accidental Injury, and Hospital Indemnity Insurance

SRA offers Critical Illness, Accidental Injury, and Hospital Indemnity Insurance to all employees. The plans are **paid for by SRA for HSA Plus Plan participants.** Employees who are not enrolled in the HSA Plus Plan can pay for the cost of coverage on an after-tax basis through payroll deductions.

These plans provide added financial protection to ease the burden of out-of-pocket expenses including costs that extend beyond your medical plan coverage, like deductibles, coinsurance and regular bills. Benefits are paid directly to you, so you can decide how the money is spent.



your coverage level

\$50 Wellness Benefit!

Every year, each family member can receive \$50 per plan for getting a covered screening test. Employee-paid Critical Illness, Accidental Injury, and Hospital Indemnity Insurance enrollees and their dependents can receive up to \$150 each year.

CRITICAL ILLNESS INSURANCE	ACCIDENTAL INJURY INSURANCE	HOSPITAL INDEMNITY INSURANCE
Critical Illness Insurance pays a lump sum benefit directly to you if you or a covered family member are diagnosed with a covered condition such as:	You can't always prevent accidents, but you can take steps to reduce the financial impact.	Even with medical insurance, a hospital stay can cost you thousands of dollars in deductibles and coinsurance.
 Heart attack · Stroke · Cancer You can use this benefit any way you choose: Pay for deductibles and coinsurance Replace earnings from being out of work 	Accidental Injury Insurance pays you or your covered dependents benefits for specific injuries and events resulting from a covered accident.	Hospital Indemnity Insurance pays a benefit directly to you if you or a family member receives hospital care.
 Coverage Amounts If you are enrolled in an HSA Plan: A coverage amount of \$5,000 is automatically provided to you You will also have the option to purchase a higher level of coverage 	 The amounts paid depend on: Type of injury Care received Benefits may be available for things like:	 Benefit Amounts A \$1,000 benefit for being admitted to the hospital \$200 for each day you're confined Additional benefits are paid
If you are electing coverage on a voluntary basis, the following benefit amounts are available:	SurgeryPhysical therapyLacerations	based on the type of services you receive.
 Employee: \$10,000 - \$30,000 Spouse: Automatically covered at 50% of your coverage level at no additional cost Children: Automatically covered at 25% of 	BurnsDislocationsFractures	

These policies or their provisions may vary or be unavailable in some states. The policies have exclusions and limitations which may affect any benefits payable.

DENTAL

Cigna's Dental PPO Plan allows you to visit the licensed dentist of your choice. Remember staying in the Cigna network, especially if you choose to visit a dentist in the DPPO Advantage network, will cost you less.

Learn about Cigna's 24/7/365 virtual dental care on myCigna.com.

DENTAL PLAN	CIGNA DENTAL PPO^			
HIGHLIGHTS	Cigna DPPO	Cigna DPPO Cigna DPPO Advantage		
Calendar Year Benefits	\$2,000 per persor	n combined maximum in- and	d out-of-network	
Annual Deductible (Individual/Family)	\$50 Individual \$100 Family	\$0 Individual \$0 Family	\$50 Individual \$100 Family	
Preventive Care Exams, Cleanings (2 cleanings annually)	Covered at 100%	Covered at 100%	Covered at 100% of MRC**	
Basic Care Fillings, Extractions	Covered at 80% after deductible	Covered at 100%	Covered at 80% of MRC** after deductible	
Major Care Inlays, Crowns	Covered at 50% after deductible	Covered at 75%	Covered at 50% of MRC* after deductible	
Orthodontia (Adults & Children)	Covered at 50% after deductible; \$1,500 plan lifetime maximum	Covered at 50%; \$1,500 plan lifetime maximum	Covered at 50% of MRC" after deductible; \$1,500 plan lifetime maximum	
Implants	Covered at 50% after deductible; subject to \$2,000 plan annual maximum	Covered at 50%; subject to \$2,000 plan annual maximum	Covered at 50% of MRC" after deductible; subject to \$2,000 plan annual maximum	

Our Buy-Up plan option offers several advantages, including an additional cleaning per year and an increased calendar year maximum.

DENTAL PLAN	CIGNA DENTAL PPO BUY-UP PLAN			
HIGHLIGHTS	Cigna DPPO Cigna DPPO Advantage		Out-of-Network	
Calendar Year Benefits	\$3,000 per persor	n combined maximum in- and	d out-of-network	
Annual Deductible (Individual/Family)	\$0 Individual \$0 Family	\$0 Individual \$0 Family	\$100 Individual \$300 Family	
Preventive Care Exams, Cleanings (3 cleanings annually)	Covered at 100%	Covered at 100%	Covered at 100% of MRC**	
Basic Care Fillings, Extractions	Covered at 100%	Covered at 100%	Covered at 80% of MRC** after deductible	
Major Care Inlays, Crowns	Covered at 75%	Covered at 75%	Covered at 50% of MRC** after deductible	
Orthodontia (Adults & Children)	Covered at 50%; \$2,000 plan lifetime maximum	Covered at 50%; \$2,000 plan lifetime maximum	Covered at 50% of MRC ^{**} after deductible; \$2,000 plan lifetime maximum	
Implants	Covered at 50%; subject to \$3,000 plan annual maximum	Covered at 50%, subject to \$3,000 plan annual maximum	Covered at 50% of MRC" after deductible; subject to \$3,000 plan annual maximum	

[^]Benefits eligible for interns

^{**} The Maximum Reimbursable Charge (MRC) is the policyholder-selected percentile of all charges made by providers of such service or supply in the geographic areas where it is received. SRA pays out-of-network claims at the 90th percentile of the MRC.



Receive care from a network provider for a higher level of coverage, or from any private practice provider for a scheduled reimbursement amount.

VISION SERVICE PLAN (VSP)^			
Benefit	Description	Сорау	Frequency
WellVision Exam	 Focuses on your eyes and overall wellness 	\$10	Every calendar year
Prescription Glasse	PS	\$20	See frame and lenses
Frame	 \$150 allowance for a wide selection of frames \$170 allowance for featured frame brands 20% savings on the amount over your allowance \$80 Costco[®] frame allowance 	Included in Prescription Glasses	Every calendar year
Lenses	 Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children 	Glasses	Every calendar year
Lens Enhancements	 Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 30% on other lens enhancements 	100% covered \$55 \$95 - \$105 \$150 - \$175	Every calendar year
Additional Pairs of I	Eyewear		
Contacts (in place of lenses)	 \$220 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) 	\$35	Every calendar year
Laser VisionCare Pr	referred Program		·
Laser VisionCare Preferred Program	 \$1,000 allowance per eye for Custom LASIK, Custom PRK, Bladeless LASIK, LASIK, or PRK Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities 	\$0	Once per lifetime
	h Out-of-Network Providers: Get the most out of your ber or. Call Member Services for out-of-network plan details.		ater savings with a

[^]Benefits eligible for interns

FLEXIBLE SPENDING ACCOUNTS (FSAs)

Flexible Spending Accounts (FSAs) enable you to put aside money for eligible expenses and help you reduce your income taxes at the same time. SRA offers a Health Care FSA, a Limited Purpose Health Care FSA, a Dependent Care FSA, and a Commuter Benefits FSA. These accounts, administered by Optum Financial, allow you to set aside pre-tax dollars to pay for certain out-ofpocket health care, dependent care, or commuting expenses.

Please note: These accounts are separate. For example, you cannot use money from the Health Care FSA to cover expenses eligible under the Dependent Care FSA or vice versa.

Health Care FSA, Limited Purpose Health Care FSA, and Dependent Care FSA:

- During your enrollment, you must decide how much to set aside for health care and/or dependent care expenses if you plan to contribute to the FSA for 2024.
- Your contributions are deducted from your paycheck on a before-tax basis in equal installments throughout the calendar year.

For the Commuter Benefits FSA:

- Every month, you choose how much to set aside for monthly qualified, work-related, transit and parking expenses.
- Choose how much tax-free money to set aside for monthly qualified, work-related transit and parking expenses by the 10th of every month.

Use-it-or-lose it!

IRS legislation allows for \$640 of account funds to carry over from 2024 Health Care FSAs. Funds in excess of this amount will be forfeited.

PLAN	ELIGIBLE EMPLOYEES	ANNUAL MAXIMUM CONTRIBUTION**	EXAMPLES OF COVERED EXPENSES
Health Care FSA	All Employees	\$3,200	Copays, deductibles, orthodontia, over-the-counter medications, etc.*
Limited Purpose Health Care FSA	Cigna HSA Plus Plan Participants	\$3,200	Dental and vision expenses only
Dependent Care FSA	All Employees	\$5,000 (\$2,500 if married and filing separate tax returns)**	Day care (children under 13), nursery school, elder care expenses, etc.*
Commuter Benefits FSA	All Employees	\$315/month for mass transit \$315/month for parking	Work-related transit and parking expenses

* See IRS Publications 502 and 503 for a complete list of covered expenses.

**The Internal Revenue Code (IRC) allows pretax contributions to FSAs as long as the benefit does not favor highly compensated employees (HCEs). You are considered "highly compensated" if your gross earnings are above the annual amount set by the Internal Revenue Service.

In accordance with IRC regulations, North America Samsung Electronics Corporation (NA SEC) examines Dependent Care FSA elections each year to ensure that the benefit does not disproportionately benefit HCEs and that the Plan remains compliant. If the benefit is found to "discriminate" against non-highly compensated employees, NA SEC subsidiaries will reduce contributions made by HCEs to a level that enables compliance with the IRC. If the Dependent Care FSA fails the test for the year, HCEs will be taxed on the pretax deductions contributed to their Dependent Care FSA during that calendar year. Non-highly compensated employees are not affected by this rule.

As you plan your Dependent Care FSA election for the year, please consider the following:

- Depending on your income, it may be more advantageous to take a Tax Credit when filing your income tax return than paying your expenses through a pre-tax Dependent Care FSA.
- For HCEs, it may be advantageous to plan how you might share the maximum \$5,000 Dependent Care FSA with your spouse if your spouse has access to a similar benefit.

Please consult a qualified tax advisor on the matter.

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LIFE & DISABILITY INSURANCE

SRA automatically provides several income protection benefits through Reliance Matrix at no cost to eligible employees and their family members with the opportunity to elect plans for additional security. The plans protect your finances, and secure a comfortable future by paying benefits directly to you, or to your beneficiaries.

COVERAGE	PLAN HIGHLIGHTS
	Employee: Benefit amount equals to two times (2X) your annual base salary, to a maximum of \$500,000
Basic Life Insurance	Spouse: \$10,000 benefit amount
	Child(ren): \$5,000 (\$500 birth to six months) benefit amount
	You are automatically enrolled, and the coverage is provided at no cost to you
Supplemental Term Life Insurance - Employee	Up to eight times (8X) your annual salary. The maximum benefit amount is \$1.5 million.
Supplemental Term Life Insurance - Spouse	If you elect supplemental life for yourself, you can also purchase additional life insurance for your spouse. You may elect up to \$150,000 in \$10,000 increments.
Supplemental Term Life Insurance - Child	If you elect supplemental life for yourself, you can also purchase additional life insurance for your child(ren) in the amount of \$5,000 or \$10,000 (\$500 birth to six months).
Basic Accidental Death & Dismemberment (AD&D)	Benefit amount equals to two times (2X) your annual average salary, to a maximum of \$500,000. You are automatically enrolled and the coverage is provided at no cost to you.
	Employee: Up to eight times (8X) your basic annual earnings, to a maximum of \$1.5 million.
Supplemental Accidental Death & Dismemberment (AD&D)	Families: Spouses will be covered at 50% of your coverage amount and your child(ren) will be covered at 10% of your coverage amount.
Insurance	Spouse, no child(ren): Your spouse will be covered at 60% of your coverage amount.
	• Child(ren), no spouse: Your child(ren) will be covered at 15% of your coverage amount.
	After seven consecutive days of certified disability, employees are eligible to receive Short-Term Disability benefits: 100% of pay for up to 26 weeks.
Short-Term Disability (STD)	STD is administered together with an approved leave of absence (FMLA, CFRA, etc.). Benefit amounts include state-mandated benefits, where applicable.
	After 26 weeks of disability, you may be eligible for Long-Term Disability: 60% of your monthly earnings up to a maximum of \$15,000/month.
Long-Term Disability (LTD)	Benefits may end at age 65, or after 24 months for certain conditions. The benefits are subject to offsets such as Social Security and Workers' Compensation.

These policies or their provisions may vary or be unavailable in some states. The policies have exclusions and limitations which may affect any benefits payable.

PERMANENT LIFE INSURANCE

PLAN AHEAD NOW.

Our Permanent Life Insurance plan can help to protect your family's quality of life after you're gone or while you're still living.

What makes Permanent Life Insurance different?

• **Permanent Coverage:** As long as the premium payments are maintained, the policy never expires, and the premium always remains the same.

· Lock in a lower premium now to help you save money in the future.

- Living Benefits: The Accelerated Death Benefit (ADB) for the Chronic Condition Rider is an added feature to help if you are diagnosed with a chronic condition that is expected to be permanent.
 - Benefits can be used to pay for any expenses you may have:
 - · Household or credit card bills
 - · Costs for an assisted living facility or for care provided by a loved one such as a spouse or child
 - \cdot There are no restrictions on how you use the benefits.

Additional Plan Features:

- Guaranteed Acceptance: No physical exams or health questions are required for newly eligible employees to apply for coverage.
- Coverage Options: You can purchase coverage for yourself and your spouse that includes the accelerated benefit for chronic conditions.

Employee: \$20,000 - \$100,000 benefit, not to exceed 5x your base salary

Spouse: \$10,000 - \$30,000 benefit

Plan ahead now!

Long-term care costs have skyrocketed in recent years. Paying for care on your own is costly, and someone who is age 65 or older has almost a 70% chance of needing some form of long-term care services.

- Cash Value: This policy builds cash value, which you can use to buy a paid-in-full policy with no more premiums due or take out a loan against the cash value on the policy.
- Portable Coverage: You can take this coverage with you if you change jobs or retire.

Life Insurance Plan Comparison

	BASIC LIFE INSURANCE	OPTIONAL LIFE INSURANCE	PERMANENT LIFE INSURANCE
Will the premiums go up?	N/A - The premium is company paid	The premiums increase as you get older	The premiums don't change
What's it for?	Replacing your income so your family can maintain their lifestyle	Replacing your income so your family can maintain their lifestyle	Paying for final expenses, such as funeral costs and nuisance debt like credit cards
What happens if I am diagnosed with a chronic condition?**	N/A	N/A	You can receive a monthly benefit to reduce the physical, emotional, and financial burden associated with a debilitating condition

^{*} U.S. Department of Health and Human Services, How Much Care Will You Need, July 2020

**Diagnosed with a chronic condition and, in the best medical judgment, are unable to perform two (2) of six (6) activities of daily living (ADLs) regardless of whether you're at home, in an assisted living facility, or a hospital.

The policies have exclusions and limitations which may affect any benefits payable. See plan documents for details.

FamilyADVISOR WITH LEGALGUARD

Affordable legal assistance can sometimes be difficult to find. If you enroll in FamilyADVISOR with LegalGUARD from LegalEASE, you will have access to a network of attorneys.

This network provides comprehensive legal assistance, telephone advice, and office consultations on many different legal services, including:

- Wills & Estate Planning
- Family Law
- Real Estate Matters
- Consumer Disputes

Debt Collection

- · Document Preparation
- Traffic Tickets
- Advice & Consultation

This plan is available via payroll deduction and provides coverage for you and your eligible dependents.

IDENTITY THEFT PROTECTION

Our offering from ID Watchdog includes Platinum Plus protection. The plan has all the features offered in the Platinum plan PLUS top-ranked digital identity protection.

Platinum Plus Identity Theft Protection Plan includes:

- Device Security (antivirus software) and Online Privacy
- Personal Virtual Private Network (VPN) A service that will route all of your web traffic through a third party to mask your identity.
- Password Manager
- Extended Family Feature Add family members to a family plan. Qualifying family members include: spouse/partner, any family member who lives with you (their age and family relationship do not matter), unmarried children up to age 26 who don't live with you, you and your enrolled spouse/partner's parents and grandparents whom you care for physically or financially.

Why choose ID Watchdog?

ID Watchdog's experts work around the clock to help protect your financial and personal information. This plan is available through convenient payroll deduction and provides coverage for you and your covered dependents.

Create Your Online Account Today

Learn more online at www.idwatchdog.com/identitybenefits.

How big of an issue is Identity Theft?

1.4 MILLION	Reported identity theft incidents in 2020, versus 650,000+ in 2019
\$3.3 BILLION	Reported losses due to identity theft in 2020, increased from \$1.8B in 2019
40%	Account takeovers that happen in just one day
1.25 MILLION	Children who were victims of identity fraud in 2020

LIFESTYLE BENEFITS

Lyra for Mental Health and Wellness

No matter what you're going through - coping with stress, managing anxiety or depression, navigating relationship issues, or whatever life brings - personalized mental health care from Lyra will help you feel your best.



High quality providers: Lyra's expert mental health providers are custom matched to you to meet your unique needs.

8 free sessions: Access 8 confidential mental health coaching or therapy sessions per year, at no cost to you.



Fast access: Sign up with Lyra in just a few minutes and be paired with providers who have appointments available for new clients.

Self-care resources: Gain unlimited access to a library of videos, meditations, soundscapes, and breathing exercises.



Lyra Learn: Members can browse over 200 professionally produced, short-form videos and interactive, multimedia exercises.

Take the first step of your mental health journey. To learn more, contact Lyra's Care Navigator Team at **1-877-729-9010** or visit <u>sra.lyrahealth.com</u>.

Exos Wellness Program[^]

• Exos and SRA are providing you with a Wellness Program that meets you where you are on your journey towards better health, wellness, and balance.



Download the free Exos app to get access to unlimited 1:1 coaching, hundreds of wellness videos, and fun challenges to support you on your wellness journey. Full-time employees can earn rewards by participating in the Exos app.

Sleepio & Daylight: Digital Sleep Improvement and Anxiety Support Therapeutic Programs^

- Sleepio is a six-week online program that uses cognitive behavioral techniques to help you fall asleep faster, stay asleep longer, and feel energized through the day.
- · Daylight an app using science-based techniques, teaches management techniques to get back on track.

Sleepio & Daylight are available to all SRA employees, spouses, and dependents on a CVS Rx plan and interns can be eligible if enrolled in the myVirtualCare plan with CVS Rx.

Quitting Tobacco

Tobacco users will pay an additional \$50 per person per month, up to a \$100 maximum charge per family.
 Cigna's Quit Tobacco Program will help to reduce your health care costs and is available for Cigna medical plan members. Contact Cigna at 1-855-246-1873 to learn more and register.

Back-Up Care through Bright Horizons

- Get high-quality, back-up child care at affordable rates for when your child care plan falls through with exclusive and flexible access to Bright Horizons care centers, and in-home caregivers
- · Learn more at https://backup.brighthorizons.com (Employer Username: SRA Password: Benefits4You)

SRA RESOURCES

SRA provides many helpful resources that can help you navigate your 2024 benefit decisions. Be sure to learn more about, and take advantage of, the great plans available.

Rightway

Reach out to Rightway for assistance with benefit questions at

https://member.rightwayhealthcare.com/ or

1-833-689-0339. You can download the Rightway app in the Google Play Store or app store.

Alight Platform and Mobile App

Our Alight platform is the home for all SRA benefit items! Benefit information, useful tools, and the enrollment system can be accessed at <u>digital.benefitsnow.com/SRA</u>.

The Alight Mobile App provides you with access to your benefits when and where you need it. With the app, you can easily:

- · View or change your benefit elections
- Store and access ID cards

• Stay on top of important messages, and more! Download from your device's app store.

3 ways to get the Alight Mobile app:

- 1. Text 'Benefits' to 67426 (U.S. Only)
- 2. Visit http://alight.com/app
- 3. Scan the QR code with your phone.



Cigna's Enrollment Information Line

Have questions about your Cigna benefits? Get help with understanding your benefits, comparing your Cigna benefit options, or even with finding participating network physicians. Call Cigna's enrollment help line **24/7** at **1-888-806-5042**.

MyCigna Mobile App

The myCigna mobile app makes it easy to personalize, organize, and access your important health information. Use this helpful app to view your ID cards, review recent and past claims, view your Health Savings Account balance, and more!

Kaiser Permanente

Visit <u>https://select.kaiserpermanente.org/samsungresearch-america</u> for more information about the Kaiser HMO. Kaiser offers many resources to plan members, including a Kaiser mobile app.

myVirtualCare

Need help finding a doctor? Have questions about claims or benefits? We can help. myVirtualCare plan Members can call **1-833-865-1187**.

Korean Language Resources

Cigna Customer Service

Speak with a Korean-speaking Cigna Customer Service representative by calling **1-855-202-2634**, Monday - Friday, 5:00 a.m. to 1:30 p.m. (PT).

If you are unable to call within these hours, leave a message for a return call, or call the toll-free number on your ID card.

CVS Caremark

You can also speak with a Korean-speaking CVS Caremark representative at **1-800-521-3935**.

Legal Notices

Each year you receive important legal notices relating to your coverage and laws and regulations that apply. You can find and review these notices throughout the year on the Benefits Portal under Important Resources.

2024 CONTRIBUTIONS

You and SRA share the cost of medical, prescription drug, dental, and vision coverage. Below are the employee contribution and SRA contributions for benefits effective January 1, 2024. A tobacco surcharge of \$50 per user, per month (max. of \$100) will be charged. Log into Alight to see per pay period contributions.

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Employee + Child(ren) \$123.00 \$996.94 Employee + Family \$227.00 \$1,836.04 Kaiser N/S Ca HMO Plan, Prescription Drug Employee Only \$92.00 \$568.53 Employee + Spouse/Domestic Partner \$218.00 \$1,235.18 Employee + Child(ren) \$198.00 \$1,123.06 Employee + Child(ren) \$198.00 \$1,123.06 Employee + Family \$297.00 \$1,684.60 Dental Plan \$227.00 \$1,684.60 Employee Only \$12.00 \$44.26 Employee + Spouse/Domestic Partner \$26.00 \$86.52 Employee + Child(ren) \$24.00 \$77.26 Employee + Family \$44.00 \$151.91 Dental Buy-Up Plan \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Child(ren) \$44.00 \$150.29 Vision Plan \$86.00 \$150.29 Employee + Family	Employee Only	\$59.00	\$530.44		
Employee + Family \$227.00 \$1,836.04 Kaiser N/S Ca HMO Plan, Prescription Drug Employee Only \$92.00 \$568.53 Employee + Spouse/Domestic Partner \$218.00 \$1,235.18 Employee + Child(ren) \$198.00 \$1,230.6 Employee + Child(ren) \$198.00 \$1,230.6 Employee + Family \$297.00 \$1,684.60 Dental Plan \$200.00 \$44.26 Employee - Child(ren) \$12.00 \$44.26 Employee + Child(ren) \$26.00 \$86.52 Employee + Child(ren) \$24.00 \$77.26 Employee + Child(ren) \$22.00 \$45.51 Employee Only \$22.00 \$45.51 Employee Only \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Child(ren) \$44.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee Only \$2.00 \$6.87 Employee Only	Employee + Spouse/Domestic Partner	\$143.00	\$1,153.76		
Kaiser N/S Ca HMO Plan, Prescription Drug Employee Only \$92.00 \$568.53 Employee + Spouse/Domestic Partner \$218.00 \$1,235.18 Employee + Child(ren) \$198.00 \$1,230.6 Employee + Child(ren) \$198.00 \$1,230.6 Employee + Family \$297.00 \$1,684.60 Dental Plan \$200 \$1,684.60 Employee - Spouse/Domestic Partner \$26.00 \$86.52 Employee + Child(ren) \$24.00 \$77.26 Employee + Family \$45.00 \$11.91 Dental Buy-Up Plan \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Child(ren) \$44.00 \$77.51 Employee + Child(ren) \$46.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee Only \$2.00 \$6.87 Employee Only \$2.00 \$6.87	Employee + Child(ren)	\$123.00	\$996.94		
Employee Only \$92.00 \$568.53 Employee + Spouse/Domestic Partner \$218.00 \$1,235.18 Employee + Child(ren) \$198.00 \$1,123.06 Employee + Family \$297.00 \$1,684.60 Dental Plan ************************************	Employee + Family	\$227.00	\$1,836.04		
Employee + Spouse/Domestic Partner \$218.00 \$1,235.18 Employee + Child(ren) \$198.00 \$1,123.06 Employee + Family \$297.00 \$1,684.60 Dental Plan \$12.00 \$1,684.60 Employee Only \$12.00 \$44.26 Employee + Spouse/Domestic Partner \$26.00 \$86.52 Employee + Child(ren) \$24.00 \$77.26 Employee + Family \$45.00 \$151.91 Dental Buy-Up Plan \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Family \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee Only \$2.00 \$6.87 Employee Only \$2.00 \$6.87	Kaiser N/S Ca HMO Plan, Prescription Drug		·		
Employee + Child(ren) \$198.00 \$1,123.06 Employee + Family \$297.00 \$1,684.60 Dental Plan Employee Only \$12.00 \$44.26 Employee Only \$26.00 \$86.52 Employee + Spouse/Domestic Partner \$26.00 \$86.52 Employee + Child(ren) \$24.00 \$77.26 Employee + Family \$44.20 \$151.91 Dental Buy-Up Plan \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Family \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee Only \$2.00 \$6.87 Employee Only \$2.00 \$6.87	Employee Only	\$92.00	\$568.53		
Employee + Family \$297.00 \$1,684.60 Dental Plan \$44.26 \$44.26 \$44.26 \$44.26 \$45.20 \$44.26 \$45.20 \$45.21 \$45.22 \$45.22 \$45.22 \$45.21 \$45.22 \$45.21 \$45.	Employee + Spouse/Domestic Partner	\$218.00	\$1,235.18		
Dental Plan Employee Only \$12.00 \$44.26 Employee + Spouse/Domestic Partner \$26.00 \$86.52 Employee + Child(ren) \$24.00 \$77.26 Employee + Family \$45.00 \$151.91 Dental Buy-Up Plan \$22.00 \$45.51 Employee - Spouse/Domestic Partner \$48.00 \$87.02 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Family \$86.00 \$150.29 Vision Plan \$86.00 \$150.29 Employee Only \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee Only \$2.00 \$6.87 Employee + Spouse/Domestic Partner \$44.00 \$13.75	Employee + Child(ren)	\$198.00	\$1,123.06		
Employee Only \$12.00 \$44.26 Employee + Spouse/Domestic Partner \$26.00 \$86.52 Employee + Child(ren) \$24.00 \$77.26 Employee + Family \$45.00 \$151.91 Dental Buy-Up Plan \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Child(ren) \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee + Child(ren) \$86.00 \$150.29 Employee + Family \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee Only \$2.00 \$6.87	Employee + Family	\$297.00	\$1,684.60		
Employee + Spouse/Domestic Partner \$26.00 \$86.52 Employee + Child(ren) \$24.00 \$77.26 Employee + Family \$45.00 \$151.91 Dental Buy-Up Plan \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Child(ren) \$86.00 \$150.29 Vision Plan \$22.00 \$6.87 Employee + Child(ren) \$86.00 \$150.29 Employee + Child(ren) \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee Only \$2.00 \$6.87 Employee + Spouse/Domestic Partner \$40.00 \$13.75	Dental Plan				
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Employee + Family \$45.00 \$151.91 Dental Buy-Up Plan Employee Only \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Family \$86.00 \$150.29 Vision Plan Employee Only \$2.00 \$6.87 Employee + Spouse/Domestic Partner \$40.00 \$13.75	Employee + Spouse/Domestic Partner	\$26.00	\$86.52		
Dental Buy-Up Plan Employee Only \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Family \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee - Spouse/Domestic Partner \$44.00 \$13.75	Employee + Child(ren)	\$24.00	\$77.26		
Employee Only \$22.00 \$45.51 Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Family \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee + Spouse/Domestic Partner \$44.00 \$13.75	Employee + Family	\$45.00	\$151.91		
Employee + Spouse/Domestic Partner \$48.00 \$87.02 Employee + Child(ren) \$44.00 \$77.51 Employee + Family \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee + Spouse/Domestic Partner \$40.00 \$13.75	Dental Buy-Up Plan		·		
Employee + Child(ren) \$44.00 \$77.51 Employee + Family \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee + Spouse/Domestic Partner \$4.00 \$13.75		\$22.00	\$45.51		
Employee + Child(ren) \$44.00 \$77.51 Employee + Family \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee + Spouse/Domestic Partner \$4.00 \$13.75					
Employee + Family \$86.00 \$150.29 Vision Plan \$2.00 \$6.87 Employee + Spouse/Domestic Partner \$4.00 \$13.75					
Vision PlanEmployee Only\$2.00\$6.87Employee + Spouse/Domestic Partner\$4.00\$13.75					
Employee Only \$2.00 \$6.87 Employee + Spouse/Domestic Partner \$4.00 \$13.75	Vision Plan				
Employee + Spouse/Domestic Partner\$4.00\$13.75		\$2.00	\$6.87		
	Employee + Child(ren)	\$3.00	\$12.98		
Employee + Family \$7.00 \$21.37					

IMPORTANT CONTACTS

For full list of contacts, visit sra.samsung.com/benefits > Benefit Contacts.

BENEFIT/RESOURCE	PHONE	WEBSITE
SHARED SERVICE CENTER		
NA HR Shared Service Center (SSC)	1-855-557-3247, Monday through Friday, 6:00 a.m. to 6:00 p.m. PST	Knox > SRA Portal > NA SSC to submit a ticket
SRA BENEFITS MICROSITE		
Check out our microsite for en additional supplemental bene	rollment instructions, benefit highlights and fit contact information.	sra.samsung.com/benefits
ONLINE ENROLLMENT PLATFORM		
Alight	1-855-557-3247, Prompt 3, 1, 1	digital.benefitsnow.com/SRA
BENEFIT ADVOCACY/NAVIGATIO	N SUPPORT	-
Rightway	1-833-689-0339	https://member.rightwayhealthcare.com/ Download the Rightway app in the Google Play Store or App Store®
EMPLOYEE ASSISTANCE/MENTAL	HEALTH PROGRAM	
LYRA Health	1-877- 729-9010	sra.lyrahealth.com
MEDICAL		
		myvirtualcareaccess.com
myVirtualCare Access Plan	1-833-865-1187	For more information, visit: https://www.luminarehealth.com/ myvirtualcareaccess/introduction
Cigna Open Access Plus (OAP) Plan Cigna HSA Plus Plan	English: 1-800-244-6224 (24/7) Korean: 1-855-202-2634 Enrollment Information Line: 1-888-806-5042	<u>MyCigna.com</u>
	English: 1-800-464-4000	www.kp.org
Kaiser HMO	Spanish: 1-800-788-0616 Chinese dialects: 1-800-757-7585 Hearing and speech impaired: TTY 711	For enrollment information, visit https://select.kaiserpermanente.org/ samsung-research-america
PRESCRIPTION DRUGS	heating and speech inpaired. It i Ai	<u>sumsung-research-america</u>
CVS Caremark	1-844-328-9674 Korean Translation: 1-800-521-3935	www.caremark.com
DENTAL		
Cigna Dental PPO	English: 1-800-244-6224 (24/7) Korean: 1-855-202-2634 Enrollment Information Line:	<u>MyCigna.com</u>
	1-888-806-5042	
VISION	1 000 077 7105	
Vision Service Plan (VSP)	1-800-877-7195	www.vsp.com
FLEXIBLE SPENDING ACCOUNTS		
Optum Financial	1-877-292-4040	www.optumfinancial.com

SAMSUNG

NOTE: This statement is intended to summarize the benefits you receive from SRA. The actual determination of your benefits is based solely on the plan documents provided by the carrier of each plan. This summary is not legally binding, is not a contract, and does not alter any original plan documents. For additional information, please contact the Human Resources department.