



2022 Benefits Guide

SCHAEFFLER



Right for you. Right for your family.

At Schaeffler, our success is driven by our employees.

Our benefits program supports not only your health, but your wealth and wellness too. This guide is designed to highlight your options, support you during initial and annual enrollment, and help you make the most of your benefits.

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Please note: This guide is intended to provide you with highlights of our benefits program. It is not intended to address all details. Actual benefit coverage is specified in the Summary Plan Descriptions (SPDs). In the event of any differences between this guide and the SPDs, the SPDs will govern. The SPDs can be found electronically on our benefits website schaefflerbenefits.com. Additionally, you may request a printed copy from your local Human Resources Representative at no cost to you.



Eligibility & Enrollment

We value what you bring to our business, which is why we are committed to providing you with a competitive, comprehensive benefits program that gives you and your family the care you need to lead healthy, productive lives.

Who is eligible for benefits?

You are eligible for benefits if you are:

- A regular, full-time employee working at least 30 hours per week
- **For Life and Disability coverage only:** A regular employee working at least 20 hours per week

Your dependents are eligible for benefits if they are:

- Your legally-married spouse
- Your children up to age 26

Within 30 days of enrollment, you must provide documents to verify a dependent's eligibility for coverage, such as a birth certificate or marriage certificate. If you don't, your dependents will not be covered.

When can I enroll for, or make changes to, my benefits?

New or newly-eligible employees

You have 30 days from your date of hire (or status change) to elect your benefits. If you don't elect your benefits before this deadline – or you decline coverage for yourself and/or your dependent(s) – you won't be able to elect coverage until the next Open Enrollment period, which is usually late October each year.

Coverage starts on the first day of the month coincident with or following one month of service.

Existing employees

You can enroll for or make changes to your benefits during Open Enrollment, which is October 20 – November 3, 2021. Coverage starts on January 1 following Open Enrollment.

Any employee experiencing a qualified life event

You may make changes to your benefits mid-year if you experience a qualified life event, such as a change to:

- Marital status – marriage, divorce, legal separation, annulment or death
- Number of dependents – birth, death, adoption/placement for adoption or dependent reaching age limit
- Employment status that affects eligibility
- Employee, spouse or dependent coverage on spouse's plan during spouse's Open Enrollment period
- Entitlement to Medicare, Medicaid or State Children's Health Insurance Program (CHIP)
- Eligibility for group health plan premium assistance under Medicaid or CHIP

Within 30 days of confirming a qualified life event, you must provide documents to verify the event took place and on the date reported, such as proof of loss of coverage - if you don't your event will be reversed.



When can I enroll for, or make changes to, my benefits? (cont'd)

You have 31 days from the date of the event to make changes to your benefits – or 60 days if the event is a change to entitlement to Medicaid or State CHIP. If you don't make any changes, you will not be able to enroll or make changes until the next Open Enrollment period.

If you, your dependent(s) or your spouse have a qualified life event, coverage will be made effective on the first of the month coincident with or following the effective date of the event. Coverage changes following a birth, adoption or change of legal custody will be effective based on the event date.

Note: Dropping health insurance that you elected to purchase through a Health Insurance Marketplace is not a qualified life event.

How do I enroll for, or make changes to, my benefits?

Log in at **myADP.com**. You can find out more about using the ADP Benefits Portal on page 5.

If you need any assistance during enrollment or have questions about eligibility, reach out to your local Human Resources Representative or the Schaeffler Benefit Service Center at **1-844-842-1405** or e-mail: **Benefits-USA@schaeffler.com**.

How do I make beneficiary designations?

We are moving to a paperless beneficiary designation process. Ensure your loved ones are protected by designating your beneficiaries online:

- Life Insurance through ADP
- 401(k) through Fidelity
- HSA (if applicable) through HealthEquity

You have 30 days from your date of hire to elect your benefits.



ADP Benefits Portal

The ADP Benefits Portal features tools and resources designed to help you build and manage your Schaeffler benefits package (the ADP Portal can also be used for iPay).

Shop

You have many important decisions to make when you enroll, including choosing from two medical plans, two dental plans, a vision plan and more. The ADP Benefits Portal will give you access to a decision-support tool that will help you find the plan that best fits your needs. These tools will help you to:

- Estimate your total cost for each medical plan
- Determine which plan best meets your personal priorities
- See how coverage details vary from plan to plan
- Determine how much you should contribute to an HSA or FSA (if applicable)

Navigate

The ADP Benefits Portal allows you to enroll for and manage your benefits online. You will be able to:

- Check your current plan coverage
- Make changes to your benefits and provide the necessary documentation if you experience a qualified life event (see page 3)
- Provide documentation verifying your covered dependents' eligibility

Access

The ADP Benefits Portal is available 24/7 anywhere that you have an internet connection. As well as access on your browser, you can also head over to your app store on both IOS and Android to download the ADP app.

Log in at **myADP.com**. For first-time users, our registration code is Schaeffler-Schaeffler.

If you need any assistance accessing or using the ADP Benefits Portal, reach out to your local Human Resources Representative or the Schaeffler Benefit Service Center at **1-844-842-1405** or e-mail: **Benefits-USA@schaeffler.com**.



Medical

Your health comes first. That's why our medical plans provide coverage for illness and injury, and help you and your family to stay well with free preventive care. We offer two medical plans through BlueCross® BlueShield® of SC; both include prescription drug coverage through CVS Caremark (see page 9).

How does it work?

You can choose between two plans – Plan 1 and the Consumer-Driven Health Plan (CDHP) with a Health Savings Account (HSA). Both plans use the Preferred Blue network and cover in-network preventive care services, like annual physicals, mammograms and prostate exams, at 100%.

The way you pay for care is different with each plan:

	Plan 1	Consumer-Driven Health Plan (CDHP)
Premiums	Higher than CDHP	Lower than Plan 1
Paying for care	Pay a flat copay for services such as doctor and specialist visits (copays don't apply towards your annual deductible; you pay copays until you reach your out-of-pocket maximum)	Pay 100% of non-preventive medical and prescription drug expenses at the networks' discounted rates until you meet your annual deductible*, then the plan pays 100%
Savings account	Health Care Flexible Spending Account (FSA) eligible (see page 14)	Health Savings Account (HSA), with an annual contribution from Schaeffler (see page 12)

**Excludes preventive generic and brand-name drugs, for which the deductible is waived and the plan pays 80%.*

How am I covered?

Summary of features	Plan 1		Consumer-Driven Health Plan (CDHP)	
Network coverage	In-network	Out-of-network*	In-network	Out-of-network*
Annual deductible (individual/family) – the amount you have to pay before the plan starts paying	\$1,000/\$2,000	\$2,000/\$4,000	\$3,000/\$6,000	\$6,000/\$12,000
Annual out-of-pocket maximum (individual/family) – the most you have to pay for covered services during the plan year; after that, the plan pays the rest	\$4,000/\$8,000	\$8,000/\$16,000	\$3,000/\$6,000	\$6,000/\$12,000
Schaeffler’s contribution to your Health Savings Account (HSA)	N/A		Employee only: \$400 Employee + spouse: \$800 Employee + child(ren): \$800 Family: \$1,200	
Preventive care – including mammograms, prostate exams, physicals and well baby visits	Plan pays 100% for preventive services based on age/gender guidelines from the American Medical Association			
Office visit (physician/specialist)	\$25/\$50 copay, then plan pays 100%	Plan pays 60% after deductible is met	Plan pays 100% after deductible is met	
Emergency Room	\$150 copay per visit, then plan pays 80%		Plan pays 100% after deductible is met	

*Benefits paid based on allowable charges.

How do I find a provider?

Visit southcarolinablues.com or call 1-866-654-5227 to find a provider. You save money when you choose a provider in the Preferred Blue network.

What additional programs are available under the medical plan?

Virtual health care with Blue CareOnDemand

Blue CareOnDemand allows you to access health care, including behavioral care, 24/7 online or on your mobile device. Download the Blue CareOnDemand app or go to BlueCareOnDemandSC.com to register.

For primary care, you pay a \$25 copay per visit if you are enrolled in Plan 1, and \$59 per visit if you are enrolled in the CDHP. You can use your FSA or HSA debit card to pay for this service.

Psychiatrists, Psychologists, and Counselors are here to help with life's challenges. These professionals have been trained in telehealth to deliver the best possible experience to you.

See a lactation consultant for common questions and issues associated with breastfeeding. The lactation services are provided by MilkOnTap's network of International Board-Certified Lactation Consultants (IBCLCs). They can provide help on a number of issues such as latching, breast pain due to feeding issues, questions about milk supply, pumping or going back to work or school as well as many more.

Chronic condition management with Tria Health

This free and confidential benefit provides support in managing your health, medications and health care budget if you (or a covered dependent) manage a chronic condition, such as:

- Diabetes
- Heart disease
- High cholesterol
- High blood pressure
- Mental health
- Asthma/COPD
- Osteoporosis
- Migraines

Tria Health pharmacists can help ensure your medications are working effectively, help you save money, answer your health care questions and coordinate care with your doctor. In addition, if you (or a covered dependent) have diabetes you will receive a free wireless blood glucose meter, testing strips and mobile app designed to help you better manage your condition.

Invited members can qualify to receive up to \$100 in VISA gift cards by engaging in two phone consultations per year.

To access this benefit, visit triahealth.com or call 1-888-799-8742.

SurgeryPlus

We know needing surgery can be overwhelming. Locating a top-quality surgeon, scheduling multiple appointments, transferring medical records, dealing with unexpected medical bills, setting up travel – it's complicated. That's why SurgeryPlus is here to help and save you money. The SurgeryPlus concierge service handles the hassle for you.

Important Bonus: When you use SurgeryPlus to book your surgery, Schaeffler will waive a portion of the cost – that means you pay little to nothing out of pocket!

SurgeryPlus covers a number of common surgeries, such as:

- **Knee:** replacement, arthroscopy, ACL/MCL/PCL repair
- **Hip:** replacement and arthroscopy
- **Shoulder:** replacement, arthroscopy, rotator cuff repair
- **Foot and Ankle:** replacement, arthroscopy, fusion
- **Spine:** laminectomy, laminotomy, fusion, artificial disc
- **Wrist and Elbow:** replacement, fusion, carpal tunnel release
- **General Surgeries:** gallbladder removal, hernia repair, thyroidectomy
- **Gynecological:** hysterectomy, hysteroscopy, bladder repair
- **Gastrointestinal:** colonoscopy, endoscopy
- **Interventional Pain Management**
- **Bariatric**
- **Cardiac:** cardiac ablation, defibrillator implant, pacemaker implant, pacemaker replacement, valve surgery
- **Ear, Nose & Throat (ENT):** ear tube insertion, ear infection, septoplasty, sinuplasty

You or your dependents must be enrolled in the medical plan to use SurgeryPlus. If you are enrolled, a SurgeryPlus ID card will be automatically mailed to your home.

To see if your procedure is covered, or for more information, visit schaeffler.surgeryplus.com. To speak with a dedicated Care Advocate, email schaeffler@surgeryplus.com or call 1-833-512-1178.





Prescription Drug

Prescription drug coverage, administered by CVS Caremark, is automatically determined based on your medical election.

How does it work?

The way you pay for prescriptions is different with each plan:

- **Plan 1:** Pay a flat copay for prescriptions until you reach your out-of-pocket maximum, then the plan pays 100%. If the actual cost of the prescription is lower than the copay, you pay the lower price.
- **CDHP:** Pay 100% of non-preventive prescription drug expenses until you meet your annual deductible, then the plan pays 100%. For preventive generic and brand-name drugs the deductible is waived and the plan pays 80%.

How am I covered?

Summary of features	Plan 1	CDHP
Retail prescriptions (30-day supply*)		
Generic	\$10 copay, then plan pays 100%	Plan pays 100% after deductible is met
Preferred brand	\$30 copay, then plan pays 100%	
Non-preferred brand	\$50 copay, then plan pays 100%	
Specialty/Biotech	30% coinsurance**	
Preventive generic and brand-name maintenance medications	See corresponding tier above	Plan pays 80%, deductible waived
Mail-order or CVS retail pharmacy prescriptions (90-day supply)		
Generic	\$20 copay, then plan pays 100%	Plan pays 100% after deductible is met
Preferred brand	\$60 copay, then plan pays 100%	
Non-preferred brand	\$100 copay, then plan pays 100%	
Preventive generic and brand-name maintenance medications	See corresponding tier above	Plan pays 80%, deductible waived

*Maintenance medications filled at a 30-day supply will only be covered by the plan three times. In order for subsequent fills of the same medication to be covered, it must be filled as a 90-day supply.

**Enrollment in PrudentRx waives coinsurance resulting in a \$0 out-of-pocket responsibility.

Plan 1 members, get covered specialty medications for free when you enroll in our new PrudentRx Program and fill your prescription at CVS Specialty Pharmacy. Visit prudentrx.com or call 1-800-578-4403 to find a pharmacy.

How do I find a pharmacy?

To find a pharmacy, visit caremark.com or call 1-866-210-0916.



Dental

Good oral health is important to your overall health and wellbeing, which is why our plans come with free preventive visits twice a year. We offer two dental plans through Delta Dental of Missouri.

You can use funds in your FSA or HSA to pay for qualified dental expenses (see page 12 for HSA or page 14 for FSA).

How does it work?

You can choose between two dental plans – Plan 1 with orthodontia coverage, and Plan 2 without.

Both plans use the Delta Dental Premier and PPO networks and cover in-network preventive services, like exams, X-rays and cleanings, at 100%.

How am I covered?

Summary of features	Plan 1		Plan 2	
Network coverage	In-network	Out-of-network	In-network	Out-of-network
Annual deductible	\$35 per person	\$50 per person	\$35 per person	\$50 per person
Annual maximum benefit (applies to classes 2 and 3)	\$2,000		\$1,500	
Preventive (class 1)	Plan pays 100%, no deductible			
Basic (class 2)	Plan pays 80% after deductible is met			
Major (class 3)	Plan pays 60% after deductible is met		Plan pays 50% after deductible is met	
Orthodontia (class 4)	Plan pays 60%, no deductible		Not covered	
Orthodontic lifetime maximum	\$1,500		Not covered	

- **Class 1:** Includes two exams, X-rays, cleanings, fluoride treatments for dependent children under age 19 and sealants under age 16.
- **Class 2:** Includes fillings, root canals, extractions, oral surgery, periodontic treatments, dentures, bridgework and implants.
- **Class 3:** Includes inlays, onlays and crowns.
- **Class 4:** Includes orthodontia for adults and dependent children under age 26 (Plan 1 only).

How do I find a provider?

Visit deltadentalmo.com or call 1-800-335-8266 to find a provider.

Both plans allow you to visit any dentist, but your annual deductible and out-of-pocket costs will be lower when you choose a provider in the Premier or PPO network.



Vision



We want you and your family to take care of your vision, and our plan includes one comprehensive exam per year to help you maintain good eye health. We offer a vision plan through Superior Vision.

You can use funds in your FSA or HSA to pay for qualified vision expenses (see page 12 for HSA or page 14 for FSA).

How am I covered?

Summary of features	Frequency	In-network	Out-of-network*
Comprehensive exam			
Ophthalmologist	One per calendar year	\$10 copay, then plan pays 100%	Up to \$34 retail
Optometrist	One per calendar year	\$10 copay, then plan pays 100%	Up to \$26 retail
Frames (standard)	One per two calendar years	\$15 copay, plan provides up to \$125 allowance	Up to \$65 retail
Lenses (standard) per pair			
Single vision	One pair per calendar year	\$15 copay, then plan pays 100%	Up to \$29 retail
Bifocal	One pair per calendar year	\$15 copay, then plan pays 100%	Up to \$43 retail
Trifocal	One pair per calendar year	\$15 copay, then plan pays 100%	Up to \$53 retail
Contact lenses**			
Medically necessary	One allowance per calendar year	Plan pays 100%	Up to \$210 retail
Elective	One allowance per calendar year	Plan provides up to \$120 allowance	Up to \$100 retail
Contact lens fitting			
Standard	One per calendar year	\$25 copay, then plan pays 100%	Not covered
Specialty	One per calendar year	\$25 copay, plan provides up to \$50 allowance	Not covered

*Copays for out-of-network visits are deducted from reimbursements.

**Contact lenses are in lieu of eyeglass lenses and frames benefit.

How do I find a provider?

Visit superiorvision.com or call 1-800-507-3800 to find a provider.

The plan allows you to visit any eye doctor, but your out-of-pocket costs will be lower when you choose an in-network provider.



Health Savings Account

Looking after your health means that you are likely to incur expenses. If you are enrolled in the Consumer-Driven Health Plan (CDHP)* you can use a Health Savings Account (HSA) to save pre-tax dollars to pay for current and future qualified health care expenses.

We provide Health Savings Accounts through HealthEquity, and Schaeffler contributes to your HSA each year.

*You cannot contribute to an HSA if you are enrolled in Medicare, a dependent on another person's tax return, or contributing to a Health Care FSA. If you have an FSA with a balance at the end of 2021, you won't be able to open or contribute to an HSA in 2022, even if you are enrolled in the CDHP.

How does it work?

An HSA allows you to save pre-tax dollars to pay for qualified health care expenses for you and your eligible dependents. This includes doctor visits, prescriptions, dental and vision expenses and more.

Summary of features

Contribute**

You choose how much you want to contribute to your HSA. You can contribute pre-tax contributions through payroll deductions or after-tax cash contributions that are deductible when you file your taxes.

Schaeffler also contributes to your HSA each year:

- Employee only: \$400
- Employee + spouse: \$800
- Employee + child(ren): \$800
- Family: \$1,200

For new hires, Schaeffler's contributions are prorated based on your benefit eligibility start date and on the coverage tier you elect.

Grow

The dollars in your HSA earn interest. Once you reach and maintain a minimum account balance, you can make investments to help your money grow.

Spend or save

All of the dollars in your HSA are yours to spend or save as you see fit. You can spend them on doctor visits, prescriptions, dental and vision expenses, and more – or you can choose to pay another way and save your dollars for future expenses.

You can only use HSA funds as they are deposited in your account following each payroll processing. If you do not have enough money to cover an eligible expense at the time of service or purchase, you can reimburse yourself once you have accumulated funds in your account.

**The total contributions to your HSA by you and Schaeffler cannot exceed the annual IRS maximum: in 2022, the limits are \$3,650 for individuals, \$7,300 for families and \$1,000 for catch-up contributions for individuals who are 55 or older.

Summary of features

Roll over and portability

Any unused dollars at the end of a calendar year stay in your HSA so you can use them in the future – even in retirement. The dollars in your HSA are always yours, including those contributed by Schaeffler, even if you change medical plans*, leave the company or retire.

Tax advantages

Your contributions are not taxed, the interest you earn is not taxed, and the dollars you spend on qualified expenses are not taxed.

**You must be enrolled in an IRS-qualified Consumer-Driven Health Plan, such as Schaeffler's CDHP, to contribute to an HSA.*

What can I use my HSA funds to pay for?

You can pay for the following qualified health care expenses on a tax-free basis:

- Qualified medical, prescription drug, dental and vision expenses not covered by the plans, as defined by the IRS in Publication 502, available online at [irs.gov/pub/irs-pdf/p502.pdf](https://www.irs.gov/pub/irs-pdf/p502.pdf)
- COBRA premiums
- Qualified long-term care insurance and expenses
- Health insurance premiums when receiving unemployment compensation
- Medicare and retiree health insurance premiums (not Medicare Supplement premiums)
- Medigap insurance premiums

How do I contribute to and manage my HSA?

You can start, stop or change your HSA contributions at any time through the ADP Benefits Portal, [myADP.com](https://myadp.com). You can check your balance, invest your funds and reimburse yourself by visiting my.healthequity.com.

We are moving to a paperless beneficiary designation process. Ensure your loved ones are protected by designating your HSA beneficiaries online, by visiting my.healthequity.com or call 1-866-735-8195.





Flexible Spending Accounts

If you expect to incur medical, dental, vision and/or dependent care expenses that won't be reimbursed by your benefit plans, you can use a Flexible Spending Account (FSA) to save pre-tax dollars to pay for these expenses.

We provide a Health Care FSA and a Dependent Care FSA through HealthEquity/WageWorks.

How does it work?

Health Care FSA*	Dependent Care FSA
Save pre-tax dollars to pay for eligible medical, prescription drug, dental, vision and hearing expenses for you and your eligible dependents – including deductibles, copays and other out-of-pocket expenses. For a complete list of qualified expenses, visit irs.gov/pub/irs-pdf/p502.pdf .	Save pre-tax dollars to pay for eligible dependent care expenses for a dependent child under age 13 or a dependent of any age that lives in your household who is incapable of self-care – including day care, after school care or eldercare expenses. For a complete list of qualified expenses, visit irs.gov/pub/irs-pdf/p503.pdf .
For 2022, you can contribute up to \$2,750 to a Health Care FSA.	For 2022, you can contribute up to \$5,000 to a Dependent Care FSA (or \$2,500 if married and filing separately). If married, both spouses must earn income in order to contribute to a Dependent Care FSA – unless the non-earning spouse is disabled or a full-time student.
Your entire elected contribution amount is available immediately upon your benefit eligibility date – even before you've made all of your payroll contributions.	You may only be reimbursed up to your contribution balance.

**If you are contributing to a Health Savings Account (HSA), you cannot contribute to a Health Care FSA.*

Each year you choose how much you want to contribute to your FSA(s), but these accounts have a “use it or lose it” rule**, which means that any funds you don't use are forfeited, so you should plan your expenses carefully to make sure you only elect to save what you can use during the year.

You are required to enroll in the FSA each year to participate, and you cannot change your contributions midyear unless you experience a qualified life event (see page 3).

****Use it or lose it:** Funds may only be used for expenses incurred between January 1, 2022, and March 15, 2023. You have until March 31, 2023, to submit claims for eligible expenses. After that date, any unused funds will be forfeited.

How do I manage my FSAs?

Visit participant.wageworks.com or call 1-866-735-8195.



Disability Insurance

If you are unable to work due to injury or illness, Disability Insurance takes away the financial pressure so that you can focus on recovery.

We provide Short-Term Disability coverage at no cost to you, and you can buy Long-Term Disability coverage through Lincoln Financial at discounted rates.

How does it work?

We provide Short-Term Disability coverage to eligible employees following 90 days of employment, which provides replacement income if you are disabled due to a non-work-related illness, injury or the birth of a child.

Extend your income replacement by purchasing Long-Term Disability coverage at discounted rates. We pay 50% of the total cost of this benefit and you pay the remainder.

How am I covered?

Summary of features	Short-Term Disability (STD)	Long-Term Disability (LTD)
Income replacement	Hourly: 60% of normal wages Salaried: 100% of normal wages	60% up to \$15,000 of basic monthly earnings* Minimum: Greater of \$100 or 10% of monthly income replacement amount Maximum: \$15,000 minus any disability income received from other sources
When benefit begins	Hourly: 7 calendar days following beginning of disability** Salaried: first day of disability	After you have been totally disabled for 180 days
Maximum benefit period	26 weeks per related illness	Dependent on age at time of disability and duration of disability

*Your basic monthly earnings do not include bonuses, commissions or overtime pay for the purposes of Long-Term Disability benefits.

**Elimination period is waived when hospitalized on the first day of disability.

How much will coverage cost me?

You pay \$0.172 per \$100 of Long-Term Disability Insurance coverage.

How do I file a disability claim?

Disability Insurance is administered through Lincoln Financial. Visit mylincolnportal.com (Registration Code: Schaeffler-Schaeffler) or call 1-800-213-1521.

If you waive LTD when first eligible and elect at a later date you will be required to submit Evidence of Insurability (EOI).



401(k) Savings Retirement Plan

Saving for your retirement is important whatever your age – and easier the sooner you start. We offer a 401(k) Savings Retirement Plan through Fidelity, and help you to save by matching 100% of the first 6% of your eligible compensation each payroll period.

How does it work?

The 401(k) Savings Retirement Plan allows you to save pre-tax dollars for your retirement.

Most employees are eligible to participate on the first day of the month coincident with or following two months of service. New employees are automatically enrolled in the plan at a contribution rate of 3% of pre-tax eligible earnings. If you do not wish to contribute to the plan, you must change your contribution rate to 0%.

Summary of features

Contribute*	<p>You choose how much you want to contribute to your account. We match 100% of the first 6% of your eligible compensation each payroll period (contributed to the plan as deferral contributions).</p> <p>A Schaeffler Financial Performance Bonus may be deposited into your Fidelity 401(k) Savings Retirement Plan as a discretionary contribution. This can be from 0% up to 1.5% of your annual eligible compensation. To be eligible for this, you are required to work a minimum of 1,000 hours in the plan year and be an active employee on the last day of the plan year.</p>
Grow	You choose how to invest the dollars in your account from a wide variety of investment opportunities provided by Fidelity Investments, Inc. Auto-enrolled employees are invested in a Fidelity Freedom Fund based on their target retirement date.
Vesting	You are always 100% vested in your entire account balance.
Tax advantages	Your contributions are not taxed and your earnings are not taxed. All dollars in your account grow tax-deferred until you make a withdrawal, when ordinary tax rates apply, but there is a penalty fee if you make a withdrawal before age 59½.

*Contributions to your account cannot exceed the annual IRS maximum: in 2022, the limit is \$20,500. If you will be age 50 or older by the end of the calendar year and you are making deferral contributions to the plan, you may also make catch-up contributions of up to \$6,500.

How do I enroll in and manage my plan?

Visit 401k.com or call 1-800-835-5097 to enroll in the plan, change your contribution amount, or change your investment options.

How do I designate my beneficiaries?

You can designate or change your 401(k) beneficiaries at any time through your Fidelity account online.



Life & AD&D Insurance

Life and AD&D Insurance gives you peace of mind knowing that your loved ones will have financial security after the unfortunate event of serious injury or your death.

We provide at no cost to you Basic Life and Accidental Death & Dismemberment (AD&D) Insurance through Lincoln Financial, and you can buy additional protection for yourself and your family at discounted rates.

How does it work?

Basic Life and AD&D Insurance is provided to all active employees who work a minimum of 20 hours per week (excluding temporary/seasonal employees) beginning the first of the month coincident with or following one month of service.

You can increase your own coverage and/or buy Supplemental Life Insurance coverage for your spouse and child(ren) up to age 26.

In the event of your serious injury or death, a lump sum benefit would be paid to you or your designated beneficiaries.

How am I covered?

Summary of features	Basic Life and AD&D	Supplemental Life and AD&D
Employee	1x annual base salary up to \$500,000 (minimum \$50,000)	Life: 1x to 8x annual base salary up to \$1,000,000 (Guarantee Issue \$550,000) AD&D: 1x to 8x annual base salary up to \$1,000,000 (all amounts are Guarantee Issue)
Spouse	N/A	Life: Increments of \$10,000 up to \$50,000 (all amounts are Guarantee Issue when first eligible)
Child(ren) to age 26	N/A	Life: Increments of \$5,000 up to \$15,000 (all amounts are Guarantee Issue)
Benefit reduction	Coverage reduces to 65% of the original amount at age 70 and to 50% of the original amount at age 75.	
Life Insurance accelerated death benefit	If you or your covered spouse (if applicable) are diagnosed with a terminal illness with 12 months or less to live, you may apply for an accelerated benefit, up to 75% of your current Life Insurance, to be used however you wish. The balance is paid to you or your beneficiaries upon death.	
Life Insurance waiver of premium benefit	If you become totally disabled from any gainful occupation prior to age 60, you may be eligible to continue your Life Insurance coverage until age 70 at no cost.	
Conversion of Life Insurance	Upon termination of coverage, you may convert your Life Insurance coverage and your enrolled dependents' coverage (if applicable) to individual whole Life Insurance. Application and initial payment must be made within 31 days of termination.	
Portability of Life Insurance	Upon termination of coverage, you may port your Life Insurance coverage and your enrolled dependents' coverage (if applicable) as term Life Insurance. Application and initial payment must be made within 31 days of termination. You cannot port and convert the same coverage.	

What is Guarantee Issue and EOI?

Employees who elect coverage when first eligible can elect up to the Guarantee Issue amount without being required to submit Evidence of Insurability (EOI). However, if you waive coverage when first eligible and elect at a later date, you will be required to submit EOI. EOI is a medical questionnaire submitted to Lincoln Financial to evaluate your application for the desired coverage.

How much will coverage cost me?

Employee's age	Employee & Spouse* Supplemental Life Insurance** (monthly rate per \$1,000 of coverage)	Employee Supplemental AD&D Insurance** (monthly rate)
≤ 29	\$0.050	\$0.025 per \$1,000 of coverage
30-34	\$0.066	
35-39	\$0.074	
40-44	\$0.091	
45-49	\$0.132	
50-54	\$0.190	
55-59	\$0.354	
60-64	\$0.545	
65-69	\$1.048	
70+	\$1.700	

* Spouse Life premiums are based on employee's age.

** Premiums may change midyear as your age and/or salary change.

Coverage amount	Child Supplemental Life Insurance (monthly rate)
\$5,000	\$0.60
\$10,000	\$1.20
\$15,000	\$1.80

How do I designate my beneficiaries?

You can designate or change your Life Insurance beneficiaries at any time on the ADP Benefits Portal, myADP.com.

How do I contact the provider?

Life and Accidental Death & Dismemberment (AD&D) Insurance is provided through Lincoln Financial. Visit mylincolnportal.com (Registration Code: Schaeffler-Schaeffler) or call **1-888-787-2129**.



Wellness Programs

We provide you with the tools to take ownership of your wellbeing and lead a healthy, responsible lifestyle – including Rally, Choose to Lose, Quit for Life and fitness center reimbursement. You can even receive financial incentives by participating in our wellness programs!

Rally

Rally is a digital wellness experience that makes it easy to move more, eat better and feel great. After registration, your first step is completing the Health Survey to obtain your Rally Age, a measure of your overall health. Based on your survey responses, Rally will suggest personalized Goals and Missions. You can also join activity-based Challenges to compete with Rally users nationwide by walking, running, swimming and biking or engage in Private Challenges with unique quarterly topics and goals. You can even sync your wearable fitness device (e.g., Fitbit, Garmin, Jawbone) to keep track of your progress. You'll earn Rally Coins along the way that you can use to enter sweepstakes, receive discounts, participate in auctions and make charitable donations.

Get rewarded!

If you're enrolled in a Schaeffler medical plan, you and your covered spouse will have the opportunity to earn up to \$200 in Health Plan Rewards, redeemable as gift cards on the Rally platform! It's as easy as completing the Rally Health Survey and receiving a preventive wellness exam. Get started by registering for Rally at southcarolinablues.com.

NEW! Participate in our quarterly Private Challenges and earn up to an additional **\$200**. Stay tuned!

Quit for Life (tobacco cessation program)

Employees and spouses who enroll in a Schaeffler medical plan and are tobacco and/or nicotine product users will be assessed a pre-tax tobacco surcharge. The surcharge is \$50 per month for each employee and spouse.

We offer a free tobacco cessation program, Quit for Life. It offers unlimited access to coaching support, an eight-week supply of a nicotine replacement therapy product (nicotine patch or gum) and access to online tools. We encourage all employees who are tobacco and/or nicotine product users to consider taking advantage of the Quit for Life program in order to avoid the tobacco surcharge and, more importantly, to get healthy. Take the first step in quitting today and call **1-866-Quit-4-Life** or visit quitnow.net.

Choose to Lose

When you enroll in Schaeffler's 2022 medical plan, you'll have access to some of the best weight loss resources with Choose to Lose, available through Tria Health. Resources include a designated health coach, a health and fitness app, access to a clinical pharmacist and more. For more information, visit triahealth.com/ctl-schaeffler. Eligibility requirements apply.

Fitness center reimbursement

Our goal is to keep our employees healthy, which is why we cover a portion of a gym or fitness center membership up to \$300 annually. Once a year, Human Resources will announce a one-month period during which they will accept requests for fitness center reimbursements. You must submit your request by the provided deadline to receive payment in the final payroll of December. Please refer to the Wellness – Fitness Center Reimbursement Policy for full details.



Employee Assistance Program

You and your family can get help with the challenges that life, work and relationships can bring with our free, confidential Employee Assistance Program (EAP) – available 24/7.

How does it work?

You and your immediate family members have access to the EAP, through Lincoln Financial.

Support includes:

EmployeeConnectSM Services

- Unlimited 24/7 access online or over the phone to legal, financial and work-life services (e.g., child and elder care referrals, moving and relocation services, college planning, estate planning, family law, household budgeting, etc.)
- Up to five in-person sessions with a professional counselor per person, per short-term issue, per year
- One 30-minute in person legal consultation per issue, with subsequent meetings at a discount

Call **1-888-628-4824** or visit **guidanceresources.com**
(username: LFGsupport – password: LFGsupport1) to access resources online

LifeKeys[®] Services

- Step-by-step online will preparation instructions through EstateGuidance[®]
- Articles, tutorials and “Ask the Expert” advice on a variety of important life matters through GuidanceResources[®]
- Identity theft resources
- Grief counseling, financial services and legal support for your beneficiaries

Call **1-855-891-3684** or visit **guidanceresources.com** –
on the Register tab, enter the Web ID LifeKeys to access resources online



Holidays & Vacation

We provide 10 paid holidays each year, plus paid vacation time based on your length of service with Schaeffler, to give you time to rest, see friends and family, travel – or do whatever else you choose!

Holidays

We provide 10 paid holidays each year for eligible employees:

- New Year's Day
- Good Friday
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day & Following Friday
- Christmas Eve
- Christmas Day
- New Year's Eve

The company establishes an annual calendar placing these 10 holidays on predetermined weekdays in the following year. The holiday calendar may be altered to accommodate customer demands.

Vacation

Paid vacation time for each calendar year is based on your length of service with Schaeffler and is outlined in the following charts.

Hourly & salaried non-exempt employees

In 1st partial year	5 days prorated
In 1st full year	10 days
In 5th full year	12 days
In 6th full year	15 days
In 15th full year	18 days
In 17th full year	20 days
In 25th full year	25 days

Salaried exempt employees

In 1st partial year	15 days prorated
In 1st full year	15 days
In 10th full year	18 days
In 15th full year	20 days
In 25th full year	25 days

Get extra vacation when you make a hiring referral!

We recognize that employees are often the best source for finding qualified, external candidates, which is why we reward you for referring individuals who are hired and successfully complete their initial employment period (90-day probationary period). You will receive 16 hours (or two days) of vacation that can be taken or paid out. You may refer candidates to [schaeffler.us/careers](https://www.schaeffler.us/careers) to search for open positions.



Extras

Education Reimbursement

We will reimburse you for the cost of tuition, books and supplies related to continuing education.

Courses that pertain to your career growth at Schaeffler or lead to a career-related degree are eligible for reimbursement under this program. The annual maximum reimbursement for undergraduate courses is \$2,500, and \$5,250 for graduate level courses. Employees are eligible at their hire date to register for eligible classes and must achieve a grade of “C” or better to receive their reimbursement.

Where can I find out more?

Reach out to your local Human Resources Representative.

Business Travel & Accident Insurance

Our group business travel and accident program, provided through AIG, gives you access to a suite of services designed to help you in the event of an emergency or other issue while representing Schaeffler around the globe.

How does it work?

If you are away from home representing Schaeffler anywhere in the world, you have access to:

- **Worldwide travel assistance:** AIG’s Assistance Centers can track down lost or stolen luggage, retrieve lost travel documents, find roadside assistance, locate a nearby ATM, refer you to legal counsel and even act as an interpreter via telephone for emergencies.
- **Travel medical assistance:** AIG Benefits Travel Assist can help manage your medical case, make payment arrangements, refer you to providers, replace a prescription and coordinate an emergency medical evacuation.
- **Security assistance services:** In the event of an emergency, AIG personnel can provide location-specific security and safety advisories, update you on current world situations, offer immediate evacuation assistance and assist you and your family during an incident within 24 hours.
- **Insurance coverage:** You have a number of benefits, including, but not limited to, accidental death and dismemberment (AD&D), medical evacuation and rehabilitation benefits.

How do I access these services?

Call **1-877-244-6871** (in U.S.) or **1-715-346-0859** (outside U.S.), email travelassist@aigbenefits.com. Our policy number is GTP0009100992C.

Employee appreciation meals

To show our appreciation for the contributions of our employees, we sponsor appreciation meals throughout the year at our various locations.

Family outings

Because we know that your family is a big part of who you are, we may sponsor various family-oriented events during the year. Depending on location, these may include holiday activities for employees and their families or other family outings.

Supplier discounts

All employees have access to a variety of discounts from our suppliers. Please see the Supplier Discount posting for a list of suppliers that offer discounts and their contact information.

Useful Contacts

I need assistance – who can I speak to?

For general questions, reach out to your local Human Resources Representative or email **Benefits-USA@Schaeffler.com**. To contact the carrier directly, reference the below.

Benefit	Provider	Phone	Email, website & network
My health			
Medical	BlueCross BlueShield of SC	1-866-654-5227	southcarolinablues.com Network name: Preferred Blue
Virtual Health Care	Blue CareOnDemand	N/A	BlueCareOnDemandSC.com
Chronic Condition Management	Tria Health	1-888-799-8742	triahealth.com
SurgeryPlus	SurgeryPlus	1-833-512-1178	schaeffler.surgeryplus.com
Prescription Drug	CVS Caremark	1-866-210-0916	caremark.com
	Prudent Rx	1-800-578-4403	prudentrx.com
Dental	Delta Dental	1-800-335-8266	deltadentalmo.com Network name: Delta Dental Premier & Delta Dental PPO
Vision	Superior Vision	1-800-507-3800	superiorvision.com
My money			
Health Savings Account (HSA)	HealthEquity	1-866-735-8195	my.healthequity.com
Flexible Spending Accounts (FSAs)	HealthEquity/WageWorks	1-866-735-8195	participant.wageworks.com
Leaves of Absence (LOA): Family Medical Leave Act (FMLA), Short-Term Disability (STD) and Long-Term Disability (LTD) Insurance	Lincoln Financial	1-800-213-1521	mylincolnportal.com Registration Code: Schaeffler-Schaeffler
401(k) Savings Retirement Plan	Fidelity Investments	1-800-835-5097	401k.com
My life			
Life and Accidental Death & Dismemberment (AD&D) Insurance	Lincoln Financial	1-888-787-2129	mylincolnportal.com Registration Code: Schaeffler-Schaeffler
Wellness	Rally	1-844-334-4944	southcarolinablues.com werally.com
Tobacco Cessation Program	Quit for Life	1-866-784-8454	quitnow.net Employer: Schaeffler Group USA
Weight Loss Program	Choose to Lose	N/A	triahealth.com/ctl-schaeffler
Employee Assistance Program (EAP)	ComPsych	1-888-628-4824	guidanceresources.com (username: LFGsupport password: LFGsupport1)
Business Travel & Accident Insurance	AIG	1-877-244-6871 (in U.S.) 1-715-346-0859 (outside U.S.)	travelassist@aigbenefits.com Policy number: GTP0009100992C

I need to enroll for or make changes to my benefits

Call the Schaeffler Benefit Service Center at **844-842-1405** or log in at **myADP.com**. For first-time users, our registration code is Schaeffler-Schaeffler.

Important Notices

Mental Health Parity and Addiction Equity Act

Per the Mental Health Parity and Addiction Equity Act, benefits for mental health and substance-use disorder must be treated like benefits for regular medical and surgical care. For example, if there is no limitation on the number of days for inpatient and number of visits for outpatient medical care, then there can be no limitation for mental health and substance-use disorder treatments. As always, treatments must be medically necessary to qualify for coverage. Plan participants should review their plan's certificate of coverage or benefit document for specific information about coverage, limitations and exclusions for mental health care and substance-use disorder treatments.

Women's Health and Cancer Rights Act

On January 1, 1999, a federal law, the Women's Health and Cancer Rights Act of 1998, became effective, which affects our company plan options. This law requires group health plans that provide coverage for mastectomies (ours does) to also provide coverage for reconstructive surgery and prostheses following mastectomies. As required under the law, we have included this notice to inform you about it.

The law mandates that a participant or eligible beneficiary who is receiving benefits, on or after the law's effective date (January 1, 1999, for our Plan), for a covered mastectomy and who elects breast reconstruction in connection with the mastectomy, will also receive coverage for:

- All stages of reconstruction of the breast on which the mastectomy has been performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
- Prostheses and treatment of physical complications of all stages of mastectomy, including lymphedemas.

This coverage will be provided in consultation with the patient and the patient's attending physician and will be subject to the same annual deductible, coinsurance and/ or copayment provisions otherwise applicable under the Plan.

If you have any questions about coverage for mastectomies and post-operative reconstructive surgery, please contact your local Human Resources representative.

Summary of Benefits and Coverage (SBC)

As an employee, the health benefits available to you represent a significant component of your compensation package. They also provide important protection for you and your family in the case of illness or injury. To help you make an informed choice, the company makes available a Summary of Benefits and Coverage (SBC), which summarizes important information about our health coverage in a

standard format, to help you compare across options. The SBC also includes a Glossary of Health Coverage and Medical Terms to help you better understand health care terms used in the SBC. You can obtain a copy of the SBC at no cost to you by contacting your local Human Resources Representative.

401(k) Savings Retirement Plan 2022 Safe Harbor Matching Contribution Notice

Schaeffler Group USA Inc. has elected to make "safe harbor" matching contributions to eligible participants in accordance with statutory requirements. This notice describes all contributions under the Plan, including the safe harbor matching contribution and how you become eligible to receive this contribution.

Safe Harbor Matching Contribution

Schaeffler Group USA Inc. will make a safe harbor matching contribution to all eligible participants. To be eligible, you must also meet the Plan's age, Eligibility Service, and Entry Date requirements for making pre-tax contributions and be part of a class of employees eligible to participate in the Plan. You will be entitled to receive the safe harbor matching contribution if you make pre-tax contributions to the Plan during the Plan Year. You are not required to meet any other requirements such as working a specified number of hours of service during the Plan Year or be employed on the last day of the Plan Year.

Amount of Safe Harbor Matching Contribution

Schaeffler Group USA Inc. will make a matching contribution to your account based on your pre-tax contributions in an amount equal to 100% of the first 6% of your compensation that you contribute to the Plan.

Example: Your compensation for the Plan Year is \$30,000, and you contribute 6% (\$1,800) to the Plan as pre-tax contributions. You will receive safe harbor matching contributions of \$1,800 calculated as follows:

- **Compensation contributed to the Plan:** First 6%
 $(\$30,000 \times 6\%) = \$1,800$
- **Safe Harbor Matching Contribution %:** 100%
- **Safe Harbor Matching Contribution amount:**
 $\$1,800 \times 100\% = \$1,800$

Eligible compensation for computing your contributions and the safe harbor matching contribution is your taxable compensation for the Plan Year reportable by Schaeffler Group USA Inc. on your IRS Form W-2, including base pay, overtime, bonus, and shift differential and salary reduction contributions you made to an employer-sponsored cafeteria or 401(k) plan, but excluding reimbursements or other

expense allowances, fringe benefits, moving expenses, deferred compensation, and welfare benefits. The percentage of compensation you defer is limited to the lesser of 60% or the annual IRS limit (\$19,500 for 2022).

Compensation for your first year of eligible Plan participation will be measured for the portion of your initial Plan Year that you are eligible. Compensation under the Plan is limited to the applicable dollar limit in effect for the Plan Year.

Additional contributions available under the Plan

In addition to your matching contributions and the safe harbor contributions described above, the following types of contributions are available under the Plan: profit sharing contributions that are made at the time and in the amount determined by Schaeffler Group USA Inc.

Vesting and withdrawal of accounts

All contributions made to the plan, including safe harbor matching contributions, will be 100% vested and nonforfeitable. They may only be withdrawn from your account in the event of death, disability, retirement, and termination of employment or, if allowed by the Plan, on attainment of age 59 ½.

Other Information

Schaeffler Group USA Inc. must make the safe harbor matching contributions to your account within the time limits prescribed by Federal Law. The safe harbor matching contribution was first made for the Plan Year beginning January 1, 2007 and will continue in effect

each Plan Year thereafter unless the Plan is amended to eliminate them, or the Plan is terminated. Before the beginning of each Plan Year for which a safe harbor matching contribution is to be made, the Plan Administrator will provide you with a notice describing the safe harbor matching contribution and the eligibility requirements for receiving the safe harbor matching contribution for the Plan Year. You can elect to defer a percentage of your compensation on a pre-tax basis to the Plan. You may also increase, decrease, suspend or resume your contributions; changes will take effect within one to two payroll periods following notification to Fidelity. Elections and subsequent changes can be made by contacting the Fidelity Retirement Benefits line at **1-800-835-5097** or access the NetBenefits website at **401k.com**.

For more information regarding the Plan and safe harbor matching contributions, please refer to the Summary Plan Description. In addition, you can obtain more information by contacting Fidelity at **1-800-835-5097** or by accessing the NetBenefits website at **401k.com**. You may also contact David McMaster in Human Resources – Shared Services.

David McMaster Director – HR Policies & Standards – Americas

Human Resources – Shared Services

308 Springhill Farm Road, Fort Mill, SC 29715

1-803-548-8500

