Total health













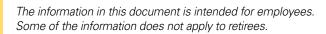


Questions about the consumer-directed health plan options?

WE HAVE ANSWERS.



This FAQ (which is not for supplementary and temporary employees) describes only the consumer-directed health plan (CDHP) options available under the plan. There are also two traditional health plan options available that you can learn more about in your enrollment materials.







For many years, our industry peers have offered CDHP options because these plans offer more control over health care spending and saving. By offering these plans, Caterpillar provides you with choices, so you can find the health plan option that's right for you.

What are the CDHPs?

The CDHP options — called UnitedHealthcare Consumer Choice and UnitedHealthcare Consumer Max — are medical plans with lower premiums and a higher annual deductible than a traditional health plan option. Both of the CDHP options are high-deductible health plans and are therefore eligible to be paired with a health savings account (HSA). The CDHP and the HSA help you plan, save and pay for health care expenses. Contact HealthEquity® to see if you are eligible for an HSA, or see IRS Publication 969: irs.gov/pub/irs-pdf/p969.pdf.



Do the CDHP options offer the same types of services as the traditional PPO option?

Yes. For medical benefits, these health plan options offer:

- The same quality network of doctors and hospitals that is available under the UnitedHealthcare Choice Plus PPO option.
- The same covered services.
- Flexibility to see any health care provider you want, with lower costs when you stay in the network for care.
- 100% coverage (no cost to you) for network **preventive care**, covered under your medical benefits. Please refer to your summary plan description (SPD) for additional information.
- Coinsurance that shares the cost for services between you and the plan after you meet the deductible.
- An out-of-pocket maximum to protect you from the expense of catastrophic illness or injury.
- See FAQ 21-23 for details specific to your prescription drug benefit.



What is an HSA?

An HSA is a tax-advantaged account you can use to pay for qualified medical expenses (including prescriptions) and your deductible. You can also use it to pay for qualified dental and vision care expenses. An HSA allows you to save on taxes three ways:

- The money you contribute from your paycheck is pretax and any after-tax deposit you make is tax deductible.*
- Your savings grow tax-free.
- Any money you take out to pay for qualified medical expenses is income tax-free.

Caterpillar, you or a family member can put money into your account up to an annual limit that is set by the IRS.



Will Caterpillar contribute to my HSA?

Yes. Caterpillar will contribute the following amounts each year:

	UnitedHealthcare Consumer Choice	UnitedHealthcare Consumer Max
Employee-Only Coverage	\$300	\$550
Employee + Spouse Coverage	\$600	\$1,100
Employee + Child(ren) Coverage	\$600	\$1,100
Family Coverage	\$600	\$1,100

Note that you must be eligible for and open an HSA through Caterpillar's designated HSA provider partner to receive company contributions to your HSA.

^{*}State tax treatment of HSAs varies.





When will Caterpillar's contribution to my HSA be made available to me?

Caterpillar's contribution will be available to you in early January, as soon as administratively possible. For all new enrollments during the plan year, Caterpillar's contribution will be available to you the first week of the month following the month in which you complete enrollment.



How do the CDHPs work?

- **1. Your deductible** You pay out of pocket until you reach the deductible. You can choose to pay for care from your HSA or you can choose to pay another way (i.e., cash, credit card) and let your HSA grow.
- 2. Your medical coinsurance Once your deductible is met, you will be responsible for paying coinsurance. The plan will pay 80% of each eligible expense and you will pay 20% for network services. For out-of-network services, the plan will pay 50% and you will pay 50%.
- 3. Your prescription cost share Once your deductible is met, you will be responsible for paying either a copay or coinsurance for covered medications filled at a network pharmacy. Higher copay/ coinsurance amounts apply when using an out-of-network pharmacy.
- **4. Your out-of-pocket maximum** This maximum protects you from major expenses. It is the most you will have to pay in the plan year for covered services. The plan will then pay 100% of all remaining covered network expenses for the rest of the plan year.

Your deductible

You pay 100%
until your
deductible is met.

Your medical coinsurance

Your plan pays 80%.

NETWORK COINSURANCE
You share expenses with
the plan until you meet your
out-of-pocket maximum.

3

Your prescription cost share

You pay a copayment or coinsurance.

You pay a copay or coinsurance amount based on the drug formulary.

4

Your out-of-pocket maximum

You are protected.

When you reach your out-of-pocket maximum, the plan pays 100%.

You can pay out of pocket with your HSA dollars (as long as you have dollars available), or you can choose to pay another way (i.e., credit card) and let your HSA grow.

Certain preventive care services and Health Care Reform medications are covered at 100% when you use a network provider. Also, some CDHP preventive medications do not charge a deductible before your copay or coinsurance applies. See FAQ 21-23 for additional details.



How much will I pay for my deductible?

The amount of your deductible will depend on which CDHP option you choose and whether you have individual or family coverage. You can find the amount you will pay below.

UNITEDHEALTHCARE CONSUMER CHOICE

Individual Deductible \$1,500

Family Deductible \$3,000

UNITEDHEALTHCARE CONSUMER MAX

Individual Deductible \$3,000

Family Deductible \$6,000

Note: If you choose any tier of coverage other than employee only, you will need to meet the family deductible before the plan will pay coinsurance benefits for anyone in your family.

Sick or well, you're covered.







How do I know if a CDHP option is right for me?

A CDHP option may be right for you if:

- You want to pay a lower monthly premium. CDHP options have lower employee contributions (premiums) and a higher deductible.
- You grow your savings. By saving in your HSA the money you would have spent on higher monthly premiums, you'll have a sizable balance when you need it. Remember, Caterpillar will also contribute to your HSA if you open one through Caterpillar's designated HSA provider partner.
- You are generally healthy. With a CDHP option, you will not be paying higher premiums for coverage you rarely use. Certain preventive care services and Health Care Reform medications are covered at 100% when you use a network provider. Refer to your SPD for more information. If you have questions about specific coverage, contact UnitedHealthcare for medical benefits or Magellan Rx for prescription drug benefits.
- You have a chronic condition. Consider the costs of treating your condition. You will pay less in premiums if you elect one of the CDHP options. The extra money you save can be deposited into your HSA for future medical costs.
- You want to capture tax savings. Contributions to your HSA are pretax; any after-tax deposit you make is tax deductible; your savings grow tax-free; and any money you take out to pay for qualified medical expenses is income tax-free.*
- You are preparing for retirement. Your contributions to your HSA are tax-free, and there is no tax when you use your HSA for eligible medical expenses. If you are 55 or older, you can make a "catch-up" contribution of an additional \$1,000 in your HSA each year. You can even invest your HSA funds when you reach a certain amount.

MARK USES HIS CDHP

Mark is single and chooses the UnitedHealthcare Consumer Choice (CDHP) option. The plan option covers certain, eligible medical preventive care at 100% and has a deductible of \$1,500.

In this case, the cost of Mark's preventive physical exam is covered completely by the plan option because he saw a network doctor.

During his exam, Mark tells the doctor about the wrist pain he has been experiencing. The doctor examines Mark's wrist and provides exercises to help strengthen it.

Because the wrist exam is not considered preventive care, Mark is billed for this portion of the doctor visit. He is responsible for paying for his prescriptions and medical care until he has paid \$1,500 — the amount of his deductible.

After Mark reaches the deductible, he is responsible for paying 20% of the cost (coinsurance) for in-network medical claims. He is also responsible for either a copay or coinsurance for covered prescription medications until he reaches the plan option's out-of-pocket maximum of \$3,000.

Here are his expenses:

Annual physical exam: \$350

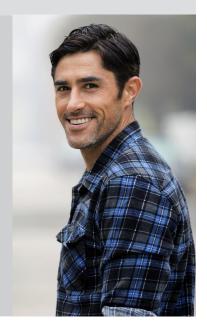
- Mark pays nothing because the plan option covers preventive care.
- The plan pays the total cost at \$350.

Non-preventive care: \$150

• Mark pays \$150 toward his deductible.

Mark uses pretax payroll deductions and Caterpillar's contribution to save \$2,500 in his HSA. His total out-of-pocket costs are \$150.

He uses his HSA to pay his out-of-pocket medical expenses, so at year end he has \$2,350 in his HSA. He can continue to save this long into the future or use it to help pay for health care expenses the following year.



^{*}State tax treatment of HSAs varies.





What expenses can I pay with my HSA?

You can use your HSA to pay for eligible health care expenses — even if the expense is not covered by the UnitedHealthcare Consumer Choice or UnitedHealthcare Consumer Max plan. The list of eligible expenses is defined by the IRS and includes a range of dental, vision and health care expenses, such as:

- Acupuncture
- Alcohol and drug addiction treatment
- Dental treatment
- Doctor visits
- Eyeglasses, contact lenses and exams
- Feminine hygiene products

- Fertility enhancements
- Hearing aids and batteries
- Nursing services
- Operations/surgery (non-cosmetic)
- Physical therapy
- Prescriptions
- Psychiatric care

For a complete list, visit IRS publication 502 located at irs.gov/pub/irs-pdf/p502.pdf.



Can I use the money in my HSA for non-eligible expenses?

Any money you use for purposes other than to pay for eligible health care expenses is taxable as income and subject to an additional 20% tax penalty. Examples of non-qualified expenses include:

- Cosmetic surgery
- Diaper service
- Electrolysis or hair removal
- Funeral expenses
- Health club dues
- Maternity clothes

- Nutritional supplements
- Teeth whitening
- Toiletries (e.g., toothbrush)
- Weight-loss programs



What happens to the money in the HSA if I leave Caterpillar?

The money in the HSA is yours to keep, even if you leave Caterpillar. The money rolls over from year to year and there is no "use-it-or-lose-it" rule.



How much can I contribute to the HSA?

The IRS sets the contribution limits. For 2023, the contribution limits are:



EMPLOYEE ONLY \$3,850



EMPLOYEE + SPOUSE EMPLOYEE + CHILD(REN) EMPLOYEE + FAMILY

\$7,750

If you are 55 or older, you can contribute an additional \$1,000 to your HSA as a catch-up contribution.

Note: Your contribution combined with Caterpillar's contribution cannot exceed the 2023 IRS limits outlined above. Also, if you and your spouse are both eligible to contribute to an HSA and either one of you has family coverage, your combined HSA contributions for the year cannot exceed \$7,750.



What happens if I contribute more than the IRS limit to my HSA?

If your contributions exceed the allowable amount, you can fill out an Excess Contribution and Deposit Correction Request Form to have excess funds returned to you. This way, you won't incur a penalty. This form is available on **healthequity.com/caterpillar**, or you can call **1-844-311-9732**.





Can I have both an HSA and a Health Care Flexible Spending Account (FSA)?

It depends. If you or a spouse/partner are covered by a General Purpose Health Care FSA, you are **ineligible** to contribute to an HSA. However, if you are covered by a Limited Purpose Health Care FSA, you **are eligible** to contribute to an HSA, provided you meet all the eligibility criteria to contribute to an HSA. A Limited Purpose Health Care FSA can be used only for eligible vision and dental expenses.



I was planning to roll over money from my current Health Care FSA into 2023, but I want to enroll in a CDHP option. What will happen to my rollover funds?

If you select a CDHP option, you can roll over up to \$570 from your Health Care FSA to a Limited Purpose Health Care FSA in 2023, as long as you enroll in a Limited Purpose Health Care FSA and elect to contribute at least \$75. The funds can only be used on eligible dental and vision expenses. Any funds in excess of \$570 remaining in your Health Care FSA will be forfeited.



How is preventive care covered?

Medical benefits: Eligible preventive care is covered at 100%. You do not pay for it. Your preventive care must be provided by network providers to be covered at 100%. It is important to check with the carrier prior to receiving services to ensure your plan and the services meet the preventive guidelines.

Prescription benefits: A defined list of preventive medications that meet IRS guidelines are covered before you meet your deductible under the CDHP options. For these medications, you pay the copay or coinsurance amount, whether or not your deductible has been met. Additionally, certain medications are covered at 100% per the Affordable Care Act. These medications are listed on the formulary as Health Care Reform Products and are provided at no charge when you use a network pharmacy. See FAQ 21-23 for additional information.



Can I invest the money in my HSA?

Yes, when you reach a certain threshold. Reach out to HealthEquity for more information on your investment options.



What happens to the money in my HSA if I'm no longer enrolled in a CDHP option?

If you're no longer covered by a CDHP, you can't contribute new funds to your HSA. However, you can continue to spend the money in your HSA to pay for health care expenses such as your deductible or coinsurance, or you can let it grow tax-free for future use. Caterpillar will no longer pay the HealthEquity monthly administrative fee for your HSA. HealthEquity may begin automatically deducting the monthly administrative fee directly from your account balance.



If I have a large claim at the beginning of the year before I've built up my account, how do I pay for it?

You can pay with any other form of payment and reimburse yourself from the HSA at a later date, as your funds accumulate.



How will my prescriptions be covered under a CDHP?

Prescription medications covered under the plan count toward your deductible. This means you pay the full negotiated retail prices (at network pharmacies) until the deductible amount is reached. However, certain preventive medications are covered before you meet your deductible.

Note: If you choose any tier of coverage other than employee only, you will need to meet the family deductible before the plan will pay coinsurance benefits for anyone in your family.





How do I know if my prescription is a preventive medication?

If your medication is on the CDHP Preventive Drug List, you'll pay the formulary tier copay/coinsurance amounts, whether or not you've met your deductible.

If your medication is covered at 100% per the Affordable Care Act, it will be listed on the Caterpillar Drug Formulary as a "Health Care Reform Product" and show a \$0 cost share.



Please see the Caterpillar Drug Formulary at **benefits.cat.com** for more information as well as applicable drug tier, copays or coinsurance amounts. The full preventive drug list for consumer-directed health plans is also available at **benefits.cat.com**.



How can I find out the costs of prescription drugs?

If you have any questions or need assistance regarding your prescription drug coverage or out-of-pocket cost, contact Magellan Rx at **1-877-228-7909** or visit **MagellanRx.com/member/login**.



What are the preventive services that are 100% covered by the plan?

More than 90 preventive services are 100% covered under the Caterpillar health care plan, regardless of which plan option you choose. Examples include mammograms at specific ages, recommended immunizations at specific ages, etc. The Caterpillar health care plan follows the U.S. Preventive Services Task Force Grade A and B recommendations. For more information, visit uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations.



How do I find out more information on the HSA?

Visit **healthequity.com/caterpillar** or contact HealthEquity at **1-844-311-9732** to receive more information.



ADDITIONAL QUESTIONS?





1-866-228-4215. Go to benefits.cat.com or text CAT to 67936 for additional

contacts and websites.

Call UnitedHealthcare at



You can also visit totalhealth.cat.com to access benefits information and a wealth of resources for your physical, emotional, financial and social health.







In the event that the content of this communication or any representations made by any person regarding Caterpillar's employee benefits plans and programs conflict with or are inconsistent with the provisions of the governing documents, the provisions of the plan documents are controlling. To the fullest extent permitted by law, Caterpillar has reserved the right to amend, modify, suspend, replace or terminate any of its plans, policies or programs, in whole or in part, at any time and for any reason, by appropriate company action.

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