

# 2024 BENEFITS SUMMARY

## Medical Plan Options

| In-network Features   | Traditional Plans  |  | Consumer Directed Health Plans  |   |
|---|--|--|---|---|
|   | BCBS National (EPO)  | UHC Choice Plus (PPO)  | UHC Consumer Choice (CDHP)  | UHC Consumer Max (CDHP)   |
| <b>Annual deductible</b>  | Individual: <b>\$600</b><br>Family: <b>\$1,200</b>   | Individual: <b>\$1,000</b><br>Family: <b>\$2,000</b>   | Employee only: <b>\$1,750</b><br>If you enroll dependents: <b>\$3,500</b>   | Employee only: <b>\$3,000</b><br>If you enroll dependents: <b>\$6,000</b>                             |
| <b>Annual out-of-pocket maximum<sup>1</sup></b>                                     | Individual: <b>\$2,500</b><br>Family: <b>\$5,000</b><br>(excludes Rx drugs)  | Individual: <b>\$3,500</b><br>Family: <b>\$7,000</b><br>(excludes Rx drugs)                                    | Employee only: <b>\$3,500</b><br>If you enroll dependents: <b>\$7,000</b><br>(includes Rx drugs)  | Employee only: <b>\$5,000</b><br>If you enroll dependents: <b>\$10,000</b><br>(includes Rx drugs)     |
| <b>Medical coinsurance</b>  | You pay 20% after deductible   |  |   |   |
| <b>Health Savings Account Contribution</b>  | N/A  | N/A  | Caterpillar contributes:<br><b>\$300</b> for employee only<br><b>\$600</b> if you enroll dependents   | Caterpillar contributes:<br><b>\$550</b> for employee only<br><b>\$1,100</b> if you enroll dependents |
| <b>Preventive care</b>  | No charge in-network. All plan options cover U.S. Preventive Services Task Force Grade A and B recommendations and Affordable Care Act (ACA) mandates. |  |   |   |
| <b>Office visit</b>   | Primary: You pay a <b>\$20</b> copay<br>Specialist: You pay a <b>\$40</b> copay  | You pay 20% after deductible   |   |   |
| <b>Hospital</b>   | You pay 20% after deductible   |  |   |   |
| <b>Urgent care</b>  | Visit: You pay a <b>\$20</b> copay<br>Procedures: You pay 20% after deductible   | You pay 20% after deductible   | You pay 20% after deductible  | You pay 20% after deductible  |
| <b>Emergency care</b>   | You pay 20% after deductible plus a <b>\$125</b> fee (fee is waived if admitted)   | You pay 20% after deductible plus a <b>\$100</b> fee (fee is waived if admitted)                               | You pay 20% after deductible  | You pay 20% after deductible  |
| Pharmacy  | Traditional Plans  |  | Consumer Directed Health Plans  |   |
|   | BCBS National (EPO)  | UHC Choice Plus (PPO)  | UHC Consumer Choice (CDHP)  | UHC Consumer Max (CDHP)   |
| <b>Caterpillar Pharmacy Network</b>   | Walmart, Kroger, Walgreens and CPRxN <sup>2</sup> and their affiliates   |  |   |   |
| <b>Annual Deductible</b>  | Does not apply   |  | You pay the full retail price until you meet the annual deductible. After you meet the deductible, you pay the copay/coinsurance as shown in the table below. The deductible is waived for specific medications on the Preventive Drug List. <sup>3</sup> |   |
| <b>Retail<sup>4</sup> up to a 30-day supply</b>                                     | Tier 0   | You pay a <b>\$0</b> copay   |   |   |
|   | Tier 1   | Walmart or Kroger: You pay a <b>\$5</b> copay<br>Walgreens or CPRxN <sup>2</sup> : You pay a <b>\$10</b> copay |   |   |
|   | Tier 2   | You pay 20% (\$35 min / \$70 max)  |   |   |
|   | Tier 3   | You pay 50% (\$85 min / \$135 max)   |   |   |
|   | Tier 4   | You pay 50% (\$110 min / \$210 max)  |   |   |
| <b>Full-Time Monthly Premiums (includes dental and vision benefits)<sup>5</sup></b> |  |  |   |   |
| Employee only   | \$145  | \$100  | \$63  | \$38  |
| Employee + spouse   | \$363  | \$250  | \$158   | \$95  |
| Employee + child(ren)   | \$290  | \$200  | \$126   | \$76  |
| Family  | \$508  | \$350  | \$221   | \$133   |

<sup>1</sup> The federal annual out-of-pocket maximum for 2024 is \$9,450/\$18,900, which includes deductibles, coinsurance and copays. These amounts are subject to change each year.

<sup>2</sup> CPRxN is Community Pharmacy Prescription Drug Network.

<sup>3</sup> Caterpillar Drug Formulary, CDHP Preventive Drug List and Network Pharmacy Directory can be found at [benefits.cat.com](https://benefits.cat.com).

<sup>4</sup> Mail order (home delivery) is available through AllianceRx Walgreens Pharmacy. Contact Magellan Rx Specialty Pharmacy for specialty medications.

<sup>5</sup> If you cover a same-sex domestic partner and/or his/her children, their portion of the benefit premiums will be imputed as taxable income to you. If you're enrolling a spouse/same-sex domestic partner who has access to employer-sponsored group insurance coverage but declines it and instead enrolls in the Caterpillar plan, you'll pay a spousal surcharge (**\$145/month**) in addition to the rates shown here.

# 2024 BENEFITS SUMMARY

## Dental Benefits (Cigna Dental)

| Cigna Dental Benefits   |  |
|---|--|
| <b>Annual Deductible</b> (does not apply to preventive services)                    | \$50 for individual<br>\$100 for family  |
| <b>Annual Maximum</b><br>(amount the plan will pay per person per year)             | \$2,000 per person for members age 18 and older (no maximum for members younger than age 18) |
| <b>Preventive Care</b> (two cleanings per 12-month period, annual exams and X-rays) | Covered at 100%, not subject to deductible   |
| <b>Basic Services</b> (fillings, root canals, periodontics and oral surgery)        | You pay 20% after deductible   |
| <b>Major Services</b> (crowns, bridges, partials and dentures, or implants)         | You pay 50% after deductible   |
| <b>Orthodontia</b> (for dependents age 21 and younger)                              | Plan pays 50% up to \$1,500 lifetime maximum per person                                      |

## Vision Benefits (VSP)

| VSP  |  |
|--|--|
| <b>For Glasses</b>   |  |
| <b>Eye Exams</b><br>Once per calendar year   | You pay a \$20 copay   |
| <b>Lenses</b><br>Once per calendar year  | You pay a \$20 copay for standard lenses (single vision, lined bifocal/trifocal) |
| <b>Frames</b><br>Every other calendar year   | You pay a \$20 copay; receive up to \$200 allowance for one pair of frames       |
| <b>For Contact Lenses</b>  |  |
| <b>Contact Lens Exam</b><br>Once per calendar year   | You pay up to a \$60 copay   |
| <b>Contact Lenses</b><br>(in lieu of lenses and frames)  | You pay a \$60 copay; receive up to \$140 allowance per calendar year            |
| <b>Medically Necessary Contact Lenses</b> (limited to members whose vision can't be corrected through glasses) | \$20 copay per calendar year in lieu of lenses and frames                        |

## Life Insurance (MetLife)

- Basic term life insurance
  - No cost to non-tobacco users (tobacco users must pay a premium)
  - \$50,000 of immediate coverage
- Optional life insurance: \$50,000 or \$100,000 can be purchased at group rates
- Spousal/dependent life insurance can be purchased at group rates
- Accidental Death & Dismemberment (AD&D)

## Disability Insurance

- Caterpillar provides disability insurance at no cost to you
- Eligibility waiting periods apply
- See the Summary Plan Description on [CatHealthEnrollment.bswift.com](http://CatHealthEnrollment.bswift.com) for details

## Voluntary Benefits

These benefits are offered at group rates that you can pay for through payroll deduction.

- Accident Insurance | Critical Illness Insurance | Hospital Indemnity Insurance
- Group Legal Services Plan
- Identity Protection
- Auto Insurance | Homeowners/Renters Insurance | Pet Insurance

## Flexible Spending Accounts (FSA)

- Health Care FSA and Limited Purpose Health Care FSA
- Dependent Care FSA

## Tax Deferred Retirement Plan (TDRP)

- You become eligible to defer into the plan after the date you complete 480 hours of service
- You can defer on a pre-tax or after-tax Roth basis up to 70% of eligible pay, not to exceed \$23,000 for 2024 (\$30,500 for age 50+)
  - You direct how your accounts are invested
  - Your contributions are fully vested when made
- Company match on your contributions: \$1 for \$1, up to 6% of pay (company match contributions are fully vested when made)
- Receive a one-time **\$10,000** contribution at 20 years of seniority
- Automatic enrollment applies with the following default provisions unless you opt out during the first 30 days:
  - 6% base pay contribution rate (rate automatically escalates by 1% each year until it reaches 15%)
- Investment election is set at 100% to the Target Retirement Fund closest to the year you turn age 65

## Time Off with Pay

### Vacation

Your years of company service as of December 31 determine the amount of vacation for the respective calendar year:

- Initial year – one vacation day for each full month of work up to a maximum of 10 days
- 1 but less than 5 years: Two weeks
- 5 but less than 15 years: Three weeks
- 15 or more years: Four weeks

### Holidays

Many Caterpillar locations observe the holidays listed below. For holidays observed at your location, speak with your local HR department.

|                               |                                  |
|-------------------------------|----------------------------------|
| New Year's Day                | Christmas Eve                    |
| Good Friday                   | Christmas Day                    |
| Memorial Day                  | Regularly scheduled days between |
| Independence Day              | Christmas Day and New Year's Eve |
| Labor Day                     | New Year's Eve                   |
| Thanksgiving                  |                                  |
| Friday following Thanksgiving |                                  |

## Compensation

- Competitive wages
- Automatic wage increases after the first 12 months and 24 months of work
- Night shift premium of \$1.00
- Overtime pay (1.5x) for work performed over 40 hours weekly
- Double-time pay for work on Sundays and holidays
- Paid lunch period
- Lump sum payments of 4% in 2024 and 2026
- Wage increases of 4% in 2025, 2027 and 2028

## Employee Assistance Program (EAP)

EAP is a voluntary, confidential benefit available at no cost to employees and eligible dependents to help resolve a variety of personal issues.

- 24/7 emergency assistance, short-term counseling & referrals for issues such as mental health, substance abuse, stress, relationships, debt management & child/elder care
- Up to 6 counseling sessions per person per year for each issue
- Access EAP services at 1-866-228-0565 or [CaterpillarEAP.com](http://CaterpillarEAP.com)