



# EMPLOYEE BENEFITS GUIDE

01/01/2024 – 03/31/2024

# WELCOME

## YOUR BENEFIT OPTIONS

Toray provides a full range of benefits that address your needs now and in the future.

### TO YOUR HEALTH TO YOUR WEALTH

- Medical Insurance
- Prescription Drug Benefits
- Dental Insurance
- Vision Insurance
- Voluntary Benefits
- Life Insurance
- Disability Insurance
- Long Term Disability Insurance
- 401(k) Retirement Savings Plan

## ENROLLMENT INFORMATION

### Do I Need to Enroll?

Before deciding whether you need to enroll in Toray's health and group benefits, keep in mind that there are many reasons to take a close look at all the benefits and options Toray offers you, even if you're already covered under the Toray benefit plan(s).

For instance, you may experience changes from year to year. And there likely will be changes to what you pay for coverage each year. So, it's a good idea to make sure your benefits still fit you—and that you're not paying for more coverage than you need.

You must enroll if you want to:

- Elect your medical, dental, or vision coverage for next year.
- Contribute to the Health Care and/or Dependent Care Flexible Spending Accounts (FSA) or the Health Savings Account (HSA).
- Change your employee life insurance and spouse life insurance choices.

To enroll, visit <https://worforcenow.adp.com>

### Making Changes During the Year

Choose your benefits carefully. Medical, dental, vision and flexible spending account contributions are made on a pre-tax basis and IRS regulations state that you cannot change your pre-tax benefit during the year unless you have a qualified life event. Qualified life events include:

- Marriage or divorce
- Death of a spouse or dependent
- Birth or adoption of a child
- Your spouse terminating or obtaining new employment (that affects eligibility coverage)

You must notify and submit any applicable forms and/or documentation should be added/submitted to the HRIS within 30 days of the event. The Benefits Administrator will review your request and determine whether the change you are requesting is allowed. Only benefit changes which are consistent with the qualified life event are permitted.

### WHEN CAN I ENROLL?

**If you're enrolling during open enrollment**, as a benefits-eligible employee, you have the opportunity to enroll in or make changes to your benefit plans during our annual benefits enrollment period. Open Enrollment is **November 6, 2023** to **November 17, 2023** with your benefit choices being effective January 1, 2024 through March 31, 2024.

**If you're enrolling as a new employee**, you become eligible for most benefits on the first day of the month following date of hire and must enroll within 30 days of the date you become benefits eligible to have coverage for the rest of the plan year. Life and Disability benefits are effective on the first day of the month following date of hire.

You will also need to enroll for the next plan year's benefits during the annual enrollment period.

### DEPENDENT ELIGIBILITY

- Your legal spouse or registered domestic partner, or
- Your dependent children (including your step-child and legally adopted child) up to age 26, or
- Any dependent child who reaches the age limit and is incapable of self-support because of mental or physical disability.
- Toray requires all employees with dependents to submit supporting documentation to validate their dependents relationship in ADP.

### PAYING FOR YOUR BENEFITS

Some benefits are provided to you at no cost. The cost of other benefits, such as medical, dental, and vision, are shared by you and TAC. Additional benefits, such as supplemental life insurance are paid for you by you at discounted group rates. Having benefit options available means you can build a benefits program that meets your needs and your lifestyle.



# MEDICAL INSURANCE

Blue Cross Blue Shield of Rhode Island



IN NETWORK BENEFITS	GOLD PLAN	SILVER PLAN	SAVER PLAN WITH HSA
<b>Annual Plan Year Deductible (1/1/2024 – 3/31/2024)</b>			
Single	\$200	\$500	\$2,500
Family	\$500	\$1,000	\$5,000
<b>Out-of-Pocket Maximum</b>			
Single	\$2,000	\$3,000	\$4,500
Family	\$4,000	\$6,000	\$9,000
<b>Out-of-Network Coinsurance</b>	20% after deductible	20% after deductible	40% after deductible
<b>Physician Services</b>			
Doctor's office visit	\$15 per visit	\$20 per visit	\$20 per visit after deductible
Specialist office visit	\$15 per visit	\$30 per visit	\$30 per visit after deductible
Preventive care	\$0 per visit	\$0 per visit	\$0 per visit
Diagnostic Lab and X-ray Services	\$0 per visit	\$0 per visit	\$0 per visit after deductible
<b>Hospital Services</b>			
Inpatient	\$0 per visit after deductible	\$0 per visit after deductible	\$0 per visit after deductible
Outpatient	\$0 per visit after deductible	\$0 per visit after deductible	\$0 per visit after deductible
Emergency Care	\$200 per visit (waived if admitted)	\$200 per visit (waived if admitted)	\$200 per visit after deductible (copay waived if admitted)
Urgent Care	\$15 per visit	\$30 per visit	\$30 per visit after deductible
<b>PRESCRIPTION DRUGS</b>			
<b>Retail (30-day supply)</b>			
Low-Cost Generic	\$10	\$10	\$10 after deductible*
Higher Cost Generics & Preferred brand	\$35	\$35	\$35 after deductible*
Non-preferred brand	\$50	\$50	\$50 after deductible*
Specialty	\$75	\$75	\$75 after deductible*
<b>Mail Order (90-day supply)</b>			
Low-Cost Generic	\$20	\$20	\$20 after deductible*
Higher Cost Generics & Preferred brand	\$70	\$70	\$70 after deductible*
Non-preferred brand	\$100	\$100	\$100 after deductible*
Specialty	Not Available	Not Available	Not Available
<b>PER PAYCHECK DEDUCTIONS</b>			
	<b>BI-WEEKLY RATE</b>	<b>BI-WEEKLY RATE</b>	<b>BI-WEEKLY RATE</b>
Employee Only	\$46.00	\$39.00	\$20.00
Employee & Spouse	\$125.00	\$105.00	\$40.00
Employee & Child(ren)	\$120.00	\$100.00	\$35.00
Employee & Family	\$185.00	\$165.00	\$60.00

\* Copays are applicable after the member has met the deductible except for certain preventive medications.

# MEDICAL INSURANCE

Blue Cross Blue Shield of Rhode Island



## CONTROLLING HEALTH CARE COSTS

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 network providers. You will receive a higher level of benefits if you use providers who participate in the network.
- Request generic rather than brand name prescription drugs. Generic medications, while just as effective, are considerably less expensive.
- Consider seeing your family physician rather than a specialist. Family physicians can often provide the same level of care for a variety of illnesses and conditions.
- Exercise and maintain a proper diet. The healthier you are the less vulnerable you are to disease, reducing doctor visits and prescription medicines.

If we become more aware consumers, we can each do our part to lower the cost of health care!

## TELEMEDICINE – DRs ONLINE

The Drs. Online app provides 24/7 access to top-rated, board-certified doctors via smartphone, tablet or computer devices. It is a convenient healthcare option when you are traveling, need routine care outside of normal provider hours, or simply can't see a doctor in-person. Register with your BCBSRI member ID once you receive your ID card. Doctors Online is ideal for common, non-emergency health concerns such as:

- Cold and flu symptoms
- Allergies
- Bronchitis
- Urinary tract infections
- Sinus problems
- Rashes



Drs. Online

Medical

★★★★★ 638



You can also schedule virtual behavioral healthcare appointments – either one-time or reoccurring – through Drs. Online. Licensed Therapists and board-certified psychiatrists are available for help with behavioral health concerns such as anxiety, depression, stress and ADHD.

## ACCESS NETWORK PROVIDERS, RESOURCES, AND MORE

[BCBSRI MEMBER PORTAL](#) –

[Member Portal \(bcsri.com\)](http://bcsri.com)

[BCBSRI MICRO SITE](#)–

<http://presentation.bcsri.com/90dd1f05/toray-advanced-composites>

[BCBS PROVIDER FINDER](#) – [Sapphire365](#)

[bcsri.sapphirecaresselect.com](http://bcsri.sapphirecaresselect.com)

**Select Network:**

- *HealthMate Coast-to-Coast* for Gold or Silver plan
- *Blue Solutions* for Saver Plan w/ HSA

[BCBS CUSTOMER SERVICE NUMBER](#) –

1-800-639-2227



# HEALTH SAVINGS ACCOUNT

If you enroll in the HSA Plan, you'll have access to a Health Savings Account (HSA). You can think of your HSA as a personal savings account for your health care expenses, with some impressive tax advantages. Please note you cannot enroll in a Health Savings Account if you are double covered, i.e. have Medicare or coverage in addition to the Toray Saver Plan with HSA.

## KEY BENEFITS OF A HSA

- Tax advantages
- Flexibility in how you spend your funds
- Your balance rolls over year after year
- Investment in your future care and retirement savings

## TRIPLE TAX ADVANTAGE

1. You can contribute to a HSA up to annual IRS maximums on a pre-tax basis.
2. Your account balance grows tax-free.
3. Funds are withdrawn tax-free when you pay for eligible medical expenses.

## ELIGIBLE EXPENSES

- Doctor and hospital visits
- Prescriptions
- Medical equipment
- Dental care
- Vision care

## INELIGIBLE EXPENSES

- Cosmetic surgery
- Teeth Whiteners
- Medicated shampoo and soap
- Multivitamins
- Health club dues

## HOW MUCH YOU CAN CONTRIBUTE TO YOUR HSA

Medical Plan Coverage Level	2024 Maximum Annual Cost
Employee Only	\$4,150
Employee+ Spouse, Child(ren), or Family	\$8,300
IRS Catch Up Provision: Individuals aged 55 and older	Additional \$1,000

For more information on HSAs and additional eligible expenses, view [www.irs.gov](http://www.irs.gov)

## DEBIT CARD

To make it easy to pay for eligible expenses, London Health will send you a debit card for your FSA or HSA. Anytime you have an eligible medical, dental, or vision expense, such as an office visit or a prescription copayment, your FSA or HSA funds are accessible via the London Health debit card. Simply swipe the card, just like you would a credit card.



# MEDICAL INSURANCE

Kaiser Permanente



**KAISER PERMANENTE**®

IN NETWORK BENEFITS	KAISER HMO	KAISER DED HMO
<b>Annual Plan Year Deductible (1/1/2024 – 12/31/2024)</b>		
Single	\$0	\$1,500
Family	\$0	\$3,000
<b>Out-of-Pocket Maximum</b>		
Single	\$1,500	\$4,000
Family	\$3,000	\$8,000
<b>Out-of-Network Coinsurance</b>	Not Covered	Not Covered
<b>Physician Services</b>		
Doctor's office visit	\$20 per visit	\$20 per visit
Specialist office visit	\$20 per visit	\$20 per visit
Preventive care	\$0 per visit	\$0 per visit
Diagnostic Lab and X-ray Services	\$10 per encounter	\$10 per encounter
<b>Hospital Services</b>		
Inpatient	Facility Fee: \$20 per procedure Physician/Surgeon Fee: No Charge	20% after deductible
Outpatient	Facility Fee: \$100 per day Physician/Surgeon Fee: No Charge	20% after deductible
Emergency Care	\$100 per visit	20% after deductible
Urgent Care	\$20 per visit	\$20 per visit
<b>PRESCRIPTION DRUGS</b>		
<b>Retail (30-day supply)</b>		
Low-Cost Generic	\$10	\$10
Higher Cost Generics & Preferred brand	\$25	\$30
Non-preferred brand	\$25	\$30
Specialty	\$25	20% coinsurance up to \$250
<b>Mail Order (100-day supply)</b>		
Low-Cost Generic	\$20	\$20
Higher Cost Generics & Preferred brand	\$50	\$60
Non-preferred brand	\$50	\$60
Specialty	Not Available	Not Available
<b>PER PAYCHECK DEDUCTIONS</b>		
	<b>BI-WEEKLY RATE</b>	<b>BI-WEEKLY RATE</b>
Employee Only	\$46.00	\$39.00
Employee & Spouse	\$160.00	\$140.00
Employee & Child(ren)	\$145.00	\$130.00
Employee & Family	\$200.00	\$185.00

## EXPERIENCE HEALTH CARE DESIGNED WITH YOU IN MIND

At Kaiser Permanente, your personal doctor is your best health advocate — they coordinate your care with a multi-disciplinary care team and make your health their top priority.

Kaiser combines care and coverage, which means their doctors, medical facilities, and health plan work together to deliver high-quality care that fits your needs. It's easier to see top specialists and get the latest treatments. It's the right care, when you need it.



### High-quality, personalized care

- From routine checkups to complex treatments
- For your health goals, whether it's building strength or reducing stress
- To help you feel your best, mentally and physically



### Convenient access

- With 24/7 care by phone or video<sup>1</sup>
- On one app that makes care easy to manage
- At facilities that offer more services in one stop



### Membership extras, including

- Popular self-care apps available at no cost
- Acupuncture, chiropractic care, and massage therapy at reduced rates
- Classes, services, and programs for total health<sup>3</sup>

## CARE THAT'S CONVENIENT

Kaiser makes it easy to get high-quality care when and where you want it. No matter how you connect, you'll always talk with a medical professional who can see your health history and pick up where you left off.

### Your health at your fingertips

- Get 24/7 care by phone or video
- Email your care team
- Schedule appointments
- View lab results and doctor's notes
- Refill prescriptions
- Check in for appointments
- Pay bills and view statements



## ACCESS NETWORK PROVIDERS, RESOURCES, AND MORE

KAISER MEMBER PORTAL –

[Kaiser Member Portal \(healthy.kaiserpermanente.org\)](https://healthy.kaiserpermanente.org)

KAISER CUSTOMER SERVICE –

1-800-810-4766

# DENTAL INSURANCE

Delta Dental of Rhode Island



BENEFIT	BUY-UP OPTION	BASIC OPTION
Policy Year Maximum	\$2,500	\$1,500
Policy Year Deductible (Single/Family)	N/A	N/A
<b>Preventive Services:</b> <i>Cleanings, Oral exam, X-rays</i>	100% Covered	100% Covered
<b>Basic/Minor Services:</b> <i>Fillings, Space Maintainers, Extractions</i>	100% Covered	100% Covered
<i>Root planning and scaling, soft tissue grafts, Occlusal adjustments, Crowns over natural teeth</i>	100% Covered	80% Covered
<b>Major Services:</b> <i>Bridges and crowns over implants, partial dental replacement, and surgical replacement</i>	50% Covered	Not Covered
Orthodontia Lifetime maximum	\$2,500	Not Covered
PER-PAYCHECK DEDUCTIONS	BI-WEEKLY RATE	BI-WEEKLY RATE
Employee Only	\$5.50	\$4.50
Employee & Spouse	\$10.00	\$9.00
Employee & Child(ren)	\$12.00	\$10.00
Employee & Family	\$20.00	\$15.00

## ACCESS NETWORK PROVIDERS, RESOURCES, AND MORE

DELTA DENTAL OF RI MEMBER PORTAL – [Welcome to Delta Dental of Rhode Island \(deltadentalri.com\)](https://www.deltadentalri.com)

DELTA DENTAL OF RI PROVIDER FINDER – [Find a dentist \(deltadentalri.com\)](https://www.deltadentalri.com)

**Select Network:**

- PPO Plus Premier – If enrolled in Buy-Up Plan
- PPO Premier – If enrolled in Basic Plan

DELTA DENTAL OF RI CUSTOMER SERVICE NUMBER  
401-752-6000



BENEFIT	IN-NETWORK		FREQUENCY
	<b>Exams</b>		
Routine Exam	\$20 copay		Every plan year
<b>Prescription Glasses</b>			
Prescription Glasses Copay	\$20 copay (Combined Lens and Frame)		
Frames	\$130 Allowance plus 20% off balance		Every other plan year
Lenses	Included in Prescription Glasses Copay		Every plan year
<b>Lens Enhancements</b>			
Standard Progressive		Covered in Full	
Premium Progressive		\$80-\$90 copay	
Custom Progressive		\$120-\$160 copay	
Additional Discounted Lens Option		Average of 40% savings	
<b>Contact Lenses</b>			
Contacts	\$0 copay, \$130 Allowance		Every plan year
Contact Exam Fit & Follow Up		Not to exceed \$60	
<b>PER-PAYCHECK DEDUCTIONS</b>		<b>BI-WEEKLY RATE</b>	
Employee Only		\$0.50	
Employee & Spouse		\$1.00	
Employee & Child(ren)		\$1.50	
Employee & Family		\$2.50	

**Extra Savings:**

- Glasses and Sunglasses – **Extra \$20 to spend on featured frame brands.**
- Routine Retinal Screening – No more than **\$30 copay on routine retinal screening** as an enhancement to a WellVision Exam.
- Laser Vision Correction – Average **15% off regular price or 5% off promotional price**

**ACCESS NETWORK PROVIDERS, RESOURCES, AND MORE**

VSP MEMBER PORTAL – [Member Portal \(vsp.com\)](https://www.vsp.com)

VSP PROVIDER FINDER – [Find an Eye Doctor Near Me | Optometrists & Ophthalmologists \(vsp.com\)](https://www.vsp.com)

**Select Network:**

VSP CHOICE

VSP CUSTOMER SERVICE NUMBER – 800-877-7195



# FLEXIBLE SPENDING ACCOUNTS (FSA)



Toray offers Flexible Spending Accounts (FSAs), through London Health, as a smart and convenient way to stretch your benefit dollars and receive real tax savings. For each year that you choose to participate in an FSA, you must elect the amount you want to contribute. Your election does not carry over from year to year; you must actively enroll to contribute to the FSAs.

	Healthcare	Limited Purpose	Dependent Care	Commuter
<b>Annual Limit</b>	\$3,200	\$3,200	\$5,000	\$315 Parking \$315 Transit
<b>Eligible Enrollees</b>	All benefit eligible employees not enrolled in the BCBSRI Saver Plan with HSA	All benefit eligible employees	All benefit eligible employees	All benefit eligible employees
<b>Eligible Expenses</b>	Health care expenses, such as deductibles, copays, and prescriptions	Dental and vision copays, deductibles, and coinsurance	Dependent care, such as daycare, preschool, and elder care	Parking, mass transit expenses incurred for the purpose of commuting to and from work.
<b>Funds Available Date</b>	Full annual election available upon benefits effective date	Full annual election available upon benefits effective date	You can be reimbursed up to the amount available in your account	You can be reimbursed up to the amount available in your account
<b>Rollover Amount</b>	\$640	\$640	No rollover	These funds will continue to roll over month to month, year to year, as long as you're still employed

## IMPORTANT FSA RULES TO KEEP IN MIND

- The IRS has a strict “use it or lose it” rule. If you do not use the full amount in your FSA by the deadline, you will lose any remaining funds above the rollover limit.  
**Note:** Healthcare and Limited Healthcare FSA enrollees: You can rollover up to \$640 to the following plan year.
- You cannot transfer funds from one FSA to another.
- You cannot contribute to a Healthcare FSA if you have elected an HSA, but you can enroll in the Limited Purpose FSA.
- Once you enroll in the FSAs, you cannot change your contribution amount during the year unless your experience a qualified status change.

For more information on Flexible Spending Accounts, please contact our FSA plan administrator, London Health, at **1-800-343-2236**.

**NOTE:** These accounts are separate. You cannot use money from one account to pay for expenses that are eligible under the other. Claims must be incurred during the plan year.

## BASIC LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

When you first enroll in the Life Insurance Plan, you will need to designate a beneficiary. You can change your beneficiary at any time. Designating a beneficiary is done on ADP’s website: <https://worforcenow.adp.com>

Toray provides you with basic life insurance and accidental death and dismemberment (AD&D) coverage in the amount of **1.5x your annual base salary to a maximum of \$250,000.**

## VOLUNTARY LIFE / ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE

You can purchase supplemental life coverage for you and your family. You can elect additional voluntary term life insurance for:

<b>Yourself:</b>	\$500,000 maximum (\$150,000 Guaranteed Issue)
<b>Your Spouse:</b>	\$500,000 maximum (\$30,000 Guaranteed Issue)
<b>Your Child(ren):</b>	\$10,000 maximum

Voluntary life insurance and AD&D coverage is available for you and your family. AD&D provides additional coverage amounts if a death or injury occurs as a result of a covered accident.

In order to elect spouse and/or child(ren) coverage, you must first enroll into voluntary life insurance and/or AD&D for yourself. The cost for all voluntary coverages are fully paid by the employee, please refer to the plan summary for rate details. For any amounts over the guaranteed issue amount, a statement of health or evidence of insurability may be required for your voluntary coverage to be approved. A dependent child can be covered by voluntary child(ren) coverage until he/she reaches age 26.

Portability options may be available to convert this group plan to an individual plan upon separation from Toray.

<b>What does Guarantee Issue mean?</b>
Guarantee issue is the amount of insurance you may buy without the insurance company requiring you to provide evidence of insurability (EOI), or statement of Health. Guaranteed issue is available if you enroll when initially eligible.

## DISABILITY INSURANCE

If you are out of work for an extended period of time due to a disabling injury or illness, disability insurance is designed to replace a portion of your income, and help you maintain your lifestyle.

Unfortunately, avoiding disability is becoming more and more unlikely. According to the Social Security Administration, just over one in every four of today’s 20-year-olds will become disabled before they reach retirement age.\* At this rate, making sure that you have disability coverage in place is a smart move.

## SHORT TERM DISABILITY INSURANCE

Short term disability insurance replaces a portion of your income if an injury or illness forces you out of work for an extended period of time. Toray provides short term disability coverage at no cost to you and enrollment is automatic. If you are out of work and declared disabled, you will receive **60% of your weekly earnings up to \$2,308 per week.** For employees with state- sponsored disability programs, this benefit offsets with any applicable state disability benefits received (i.e., California Paid Family and Medical Leave).

## LONG TERM DISABILITY INSURANCE

Toray also provides long term disability insurance to protect your finances when your disability continues beyond the period covered by the short-term disability plan. This benefit is also fully paid for by the company and enrollment is automatic.

<b>SHORT TERM DISABILITY</b>	<b>LONG TERM DISABILITY</b>
60% of weekly earnings up to \$2,308 per week	60% of monthly earnings up to \$10,000 per month

# ADDITIONAL BENEFITS

## EMPLOYEE ASSISTANCE PROGRAM (EAP)



Sometimes life can be challenging. That's why TAC provides an employee assistance program (EAP) to you and your family members – at no cost. Unum EAP is a **confidential**, professional resource for when you may need assistance with any type of personal concern. Unum consultants have experience assisting with various concerns. Unum will also connect you to and arrange community services and provide ongoing support and assistance.

EAP Counselors will assist you with concerns such as:

- Marital and relationship issues
- Alcohol and drug abuse
- Stress Management
- Family/Parenting problems
- Work relationships
- Wellness information
- Depression

Counselors are available to assist you 24-hours a day, 7 days a week by calling **1-800-854-1446**. You and your family members may use the services of Unum as often, and for as many reasons, as needed, regardless of where you live in the world.



## RETIREMENT SAVINGS 401(K)

Toray Advanced Composites provides a 401(k) program to all employees with up to 5% employer match that allows employees to contribute a portion of their wages pre- or post-tax into an individual account. These contributions accumulate tax free until an employee retires or terminates employment with Toray Advanced Composites.

For additional information regarding any of the plan provisions, please consult the 401(K)-guidebook available through the Benefits Administrator. Our 401(K) Plan administrator is Principal. You can contact them at 800-986-3343 or visit their website at [www.principal.com](http://www.principal.com).



# Glossary

## ACA (Patient Protection and Affordable Care Act)

Also called Health Care Reform, the intent of the Affordable Care Act is to make affordable health care available to all Americans. The ACA became law in March 2010. Since then, the ACA has required some changes to medical coverage—like covering dependent children to age 26, no lifetime limits on medical benefits, reduced FSA contributions, free preventive care, etc.

## Brand Name Drug

The original manufacturer's version of a particular drug. Because the research and development costs that went into developing these drugs are reflected in the price, brand name drugs cost more than generic drugs.

## Coinsurance

A percentage of costs you pay "out-of-pocket" for covered expenses after you meet the deductible.

## Copay (Copayment)

A fee you have to pay "out-of-pocket" for certain services, such as a doctor's office visit or prescription drug.

## Deductible

The amount you pay "out-of-pocket" before the health plan will start to pay its share of covered expenses.

## Generic drug

Lower-cost alternative to a brand name drug that has the same active ingredients and works the same way.

## HDHP

High-deductible health plans (HDHPs) are health insurance plans with lower premiums and higher deductibles than traditional health plans. Only those enrolled in an HDHP are eligible to open and contribute tax-free to a health savings account (HSA).

## Health Savings Account (HSA)

A health savings account (HSA) is a portable savings account that allows you to set aside money for health care expenses on a tax-free basis. You must be enrolled in a high-deductible health plan in order to open an HSA. An HSA rolls over from year to year, pays interest, can be invested, and is owned by you—even if you leave the company.

## Out-of-pocket maximum

The most you pay each year "out-of-pocket" for covered expenses. Once you've reached the out-of-pocket maximum, the health plan pays 100% for covered expenses.

## Plan year

The year for which the benefits you choose during Annual Enrollment remain in effect. If you're a new employee, your benefits remain in effect for the remainder of the plan year in which you enroll, and you enroll for the next plan year during the next Annual Enrollment.

## Preventive care

Health care services you receive when you are not sick or injured—so that you will stay healthy. These include annual checkups, gender- and age- appropriate health screenings, well-baby care, and immunizations recommended by the American Medical Association

## About This Guide

This guide highlights your benefits. Official plan and insurance documents govern your rights and benefits under each plan. For more details about your benefits, including covered expenses, exclusions, and limitations, please refer to the individual summary plan descriptions (SPDs), plan document, or certificate of coverage for each plan. If any discrepancy exists between this guide and the official documents, the official documents will prevail. Toray reserves the right to make changes at any time to the benefits, costs, and other provisions relative to benefits. Refer to the portal or contact Human Resources for additional information.

NOTE: This statement is intended to summarize the benefits you receive from Toray. The actual determination of your benefits is based solely on the plan document 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.

Updated  
01/2024

