

2024 Annual Benefits Open Enrollment

Employee FAQs

for U.S. Benefits Eligible Employees

1. When is Benefits Annual Open Enrollment?

This year's Annual Open Enrollment is scheduled for **October 17 - October 31, 2023**.

2. What do new hires need to do during Annual Enrollment?

New hires have 31 days from their date of hire to enroll in benefits. The effective date of coverage is the date of hire.

Employees hired on or after October 1 will need to complete dual enrollment – enroll for 2023 benefits and also enroll for 2024 benefits. New hires will receive two benefit confirmation statements one to confirm benefit elections for 2023 and a second to confirm benefit elections for 2024. If a new hire enrolls for 2023 benefits and takes no action to enroll or waive coverage, their benefit elections for 2023 will roll over to 2024, with the exception of an FSA (Limited Purpose FSA and Dependent Care FSA), both require an active enrollment.

3. What will happen to my current benefits if I do not take action during the Open Enrollment period?

If you do not enroll for 2024, your current benefits will carry over to 2024, except for your Limited Purpose Flexible Spending Account (LPFSA), and your Dependent Care Flexible Spending (DCFSA), which require an annual election. If you do not make an election for your LPFSA or your DCFSA, your elections will be reset to \$0 and you will not have these benefits for 2024. Annual Open Enrollment October 17 - October 31, 2023

4. How do I qualify for a lower medical premium in 2024?

Starting September 19, 2023, employees who wish to enroll in a Chemours medical plan for 2024 can save \$115 per month on their medical premiums by completing any of the three actions below. Screening results must be submitted by November 30, 2023 to receive savings in 2024. We will not accept late confirmations.

Your Screening Options

Schedule a Screening: Visit a Quest Diagnostics Patient Service Center.

Physician Results Form: Request your healthcare provider complete a physician form certifying you have successfully completed a biometric screening.

Self-Collection: Complete the biometric screening at home with a finger stick. Kits will be mailed to any employee electing this option. The last day to order at-home kits will be November 16, 2023. Kits may take some time to get to you and for you to return them, so please consider the time needed to complete this action before the November 30 deadline.

 IMPORTANT: You are required to activate your self-collection materials on the same day of your collection. Specimens returned without activation will not be tested or re-sulted.

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How to Get Started

Visit My.QuestForHealth.com to set up your account

Chemours is the Registration Key

Enter your **Employee ID Number** (found on your paystub or in WorkDay) and **Date of Birth** to confirm eligibility

Select your screening option

Visit the <u>Benefits Catalyst Page</u> on completing your biometric screening

Employees hired in 2024 have 31 days from their hire date to complete *and* submit biometric screening results. Medical coverage savings are pro-rated from date of hire.

On your paystub, the full medical deduction will be taken from your pay and then the credit is applied under Earnings.

5. I was hired in 2023 and already completed a biometric screening, do I need to complete another for 2024?

No, if you have already completed a biometric screening for 2023, you do not need to complete another and your results will automatically carryover and you will receive the credit in 2024.

6. What are the highlights and changes for 2024?

Healthcare Premiums. To keep pace with rising healthcare costs and claims experience and a more than 25% increase in prescription drug spend, Chemours must remain in-line with our cost sharing practices so employees will see a modest increase in premiums in 2024.

Compare the Medical Plans. The medical plan premiums, deductibles, and out-of-pocket maximums vary based on the coverage level you choose. You can use the MyChoice Recommendation Engine to do a comparison of both plans to see which option best meets your needs. To access, log onto MyChemoursBenefits.com.

Teladoc Primary360 Virtual Care. Primary360 is an integrated healthcare experience with dedicated Teladoc Primary Care Physicians and Care Teams building on the convenience and quality of acute care services and offering Primary Care to support integrated whole-person care.

Teladoc guarantees availability of a new patient visit in every county in all 50 states within 5 business days as a new patient and then 1-2 days for future visits.

Teladoc - Complete Chronic Care Plus Weight

Management. Livongo stand-alone programs yield both positive clinical impact however, many employees are living with more than one chronic condition.

This whole-person solution gives members access to the core elements of the stand-alone programs which they are eligible – including diabetes, diabetes prevention, hypertension, dyslipidemia, mental health, and weight management.

The weight management program is available as a standalone solution for folks who do not have a chronic condition diagnosis and uses the same methodology as the Livongo diabetes/hypertension management programs using a connected device (cellular scale), personalized weight-loss plan, food, and activity tracking and unlimited 1x1 expert coaching.

Legal Plan Enhancements.

- Reproductive Assistance this service covers the participating employee and/or spouse for the first twenty (20) hours of legal services and court work related to reproductive assistance matters per calendar year.
 Reproductive assistance matters may include, but shall not be limited to, as permitted by law: surrogacy, gamete donation, sperm donation, embryo donation, egg donation, embryo adoption, etc.
- 4 hours of attorney services for non-covered matters in the Chemours Legal Plan such as: DUI, divorce, felony defense, etc.

Backup Care Connection through Aetna Resources for Living. Backup care services are now being offered through our Employee Assistance Program (EAP) provider, Aetna Resources for Living, in partnership with LifeCare. Backup care reduces the high cost of absenteeism by helping employees find and pay for short-term temporary child or adult care when they are scheduled to work and their regular arrangements are disrupts due to planned or unplanned events. Backup Care Connection offers the following options: referrals to network providers, referrals to licensed providers outside of network, and personal network.

24/7/365 access and instant booking via telephone and online. Reservations can be made up to 30 days in advance or at the last minute for emergency situations.

7. What are the advocacy services offered by Aetna A1A?

Aetna One Advocate, also called A1A, is confidential advocacy support that includes access to clinical specialists who can help you and your dependents who are enrolled in the Chemours medical plan.

You will be assigned your own personal advocate who always remains the first point of contact for you.

8. Will new ID cards be issued?

Medical & Prescription. A new medical insurance ID card and a new Express Scripts prescription card will be mailed to all employees who enroll in a Chemours medical plan for the first time, by December 31, 2023.

HSA. You will receive a new HSA debit card if you enroll in the HSA for the first time only.

FSA. You will receive a new FSA card if you enroll in the FSA for the first time only.

Vision. Vision ID cards are not required, and no ID card is required when you go to the eye doctor or service provider.

FSA Commuter. You will receive a new FSA debit card if you enroll in the FSA for the first time only.

If you do not receive your new ID cards by December 31, 2023 please contact The Chemours Benefits Service Center at (844) 215-5096.

9. How do I enroll or make changes?

There are 3 ways to enroll during Annual Open Enrollment:

- Call The Chemours Benefits Service Center (844) 215-5096 Monday through Friday, 8:00 am to 8:00 pm ET.
- 2. Online at <u>MyChemoursBenefits.com</u>. Live Chat connects you to an online Chemours Benefits Service Center Representative Monday through Friday, 8:00 am to 8:00 pm ET.
- 3. Download the MyChoice Mobile App from either the App Store or Google Play. To securely access your account online at

MyChemoursBenefits.com and locate your personalized QR code that shows on the homepage. If you don't access your QR code, you can create a new username and password through the app. Our company key is: chemourscompany (all lowercase)

10. Where can I get help with my benefits enrollment or help choosing any of my benefits?

Call The Chemours Benefits Service Center at (844) 215-5096. Representatives can answer your benefit questions and can take your enrollment by telephone. You can also call your Aetna One Advocate at (800) 417-2386 and your Advocate can provide you with guidance and support.

11. What is the definition of an eligible dependent? Do I need to provide documentation as proof of my dependent?

Your eligible dependents include: your spouse or domestic partner, your children (includes stepchildren, legally adopted children, a child placed for adoption, domestic partner's children, or any child whose coverage is your responsibility under the terms of a qualified release or court order).

To receive coverage for your dependents, you must provide proof, such as a birth certificate, marriage certificate or signed affidavit. If you do not provide proof, your dependents will be dropped from coverage. Dependent children are eligible to be covered until age 26 and their coverage will end on the last day of the month in which they turn age 26.

No person may be covered both as an employee and a dependent, and no person may be covered as a dependent of more than one employee.

12. How do I elect my beneficiaries?

401(k). Beneficiary elections can be made online at **benefits.ml.com**.

Life Insurance. Beneficiary elections and subsequent changes are made directly online at <u>MyChemoursBenefits.com</u>. There are no forms to complete when electing and/or changing beneficiaries for life insurance.

Health Savings Account. Beneficiary elections and subsequent changes are made directly online on the Bank of America portal at <u>myhealth.bankofamerica.com</u>.

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13. After I complete my benefits enrollment, can I get a statement that confirms all of my benefit elections?

When you are done making your benefit elections online, save and submit them. A benefits confirmation statement will be mailed to you. You can also access and print a copy of your benefit elections for your records online at <u>MyChemoursBenefits.com</u>.

14. What is a "qualified life event"?

Qualified life events include:

- A change in status, including marital status, commonlaw marriage where recognized by state law, divorce, death of a spouse, legal separation, and change in the number of dependents (including through birth, death, adoption, legal guardianship, and placement for adoption).
- Open Enrollment for your dependent's employer.
- Employment status (any changes in your spouse's or your other dependents' employment status that result in gaining or losing eligibility for coverage).
- Entitlement to Medicare or Medicaid.
- Exhaustion of COBRA continuation coverage.

15. What are plan deductibles?

The annual deductible is the dollar amount of covered expenses that you must pay before the medical plan starts paying benefits. The deductible applies to both medical and prescription expenses combined.

The deductibles for 2024 for individual/family coverage under the Chemours medical plans are:

Choice Plus Medical Plan. In-network \$1,600/\$3,200; out-of-network \$2,500/\$4,000

Choice Medical Plan. In-network \$3,000/\$6,000; out-of-network \$3,500/\$6,000

16. What are the medical plan out-of-pocket maximums?

If you enroll in a Chemours medical plan, there is a cap or maximum amount that you will pay for your medical and prescription expenses combined for both in-network and out-of-network expenses. The out-of-pocket maximums for the Chemours medical plans for 2024 are:

Choice Plus Plan. In network \$5,000 for any one family member and \$10,000 for other coverage levels; Out-of-network \$15,000 for any one family member and \$30,000 for other coverage levels.

Choice Plan. In-network \$7,000 limited for any one family member and \$14,000 for other coverage levels; Out-of-network \$15,000 for any one family member and \$30,000 for other coverage levels.

17. Why do I seem to have to pay each time I go to the doctor or when I go to fill a prescription?

Chemours medical plans are high-deductible health plans. That means that except for most preventive medical care and preventive prescription medications, all of your healthcare (including prescriptions) is subject to the deductible and coinsurance. Once you've met your annual deductible, you pay the applicable coinsurance until you reach your annual out-of-pocket maximum, and then the plan pays 100% of covered in-network medical and prescription expenses.

18. Does Chemours offer a Flexible Spending Account (FSA)?

Chemours offers three (3) types of Flexible Spending Accounts:

Limited Purpose Healthcare FSA. The LPFSA can only be used for qualified dental and vision expenses. The LP FSA cannot be used for medical and prescription expenses.

Dependent Care FSA. The DCFSA can be used to pay for qualified childcare expenses. To be eligible to participate in the DCFSA, both parents must work outside of the home and the child must be under 13 years old or older who is not able to take care of him/ herself.

Commuter FSA. You can reduce your commuting expenses when you set aside pre-tax money through payroll deductions for qualified transit and parking expenses. You can enroll in the Commuter FSA and make changes to your payroll deductions at any time during the year. If you change your payroll deduction to have \$0 (zero) dollars deducted, you will no longer be enrolled in the Commuter FSA Plan. You can continue to submit claims for ninety (90) days following the date that you end participation.

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19. What is a Health Savings Account (HSA)?

When you enroll in a Chemours medical plan, you may be eligible for a Health Savings Account. If you are covered by another health plan that does not qualify as a highdeductible health plan or by Medicare, the IRS requires that you decline enrollment in an HSA. When you open an HSA, it is your personal savings account, and the money will remain in your account until you spend it. You can enroll in the HSA and make changes to your HSA payroll deductions at any time during the year.

The U.S. Patriots Act is a federal law requiring financial institutions to verify the identity of individuals who open an account. When you open an HSA with Bank of America for the first time, Bank of America will ask you for the required information. Not providing it may result in the inability to open your HSA.

20. Does Chemours provide employer contributions to a Health Savings Account (HSA)?

Yes, the Company provides one-time contribution of \$600 (single coverage) or \$1,200 (for other tier coverages). If you are enrolling in a Chemours Medical Plan for the first time and you are eligible for a Health Savings Account, your account will be opened automatically. If you are a new hire, your HSA Company contribution will be prorated based on your date of hire.

21. How does Medicare work with Chemours health coverage?

Whether Medicare or Chemours pays first depends on a number of things. If you have questions about who pays first, call Medicare BCRC (855) 798-2627. Be sure to tell your doctor or healthcare provider if you have health coverage with Chemours in addition to Medicare. This will help them send your bills to the correct payer.

22. What are some of the differences between a Health Savings Account (HSA) and The Limited Purpose Healthcare FSA (FSA)?

Depending on what your individual needs are, there are advantages to both the HSA and the FSA programs. The table below shows some of the primary differences between the two programs.

Health Savings Account (HSA)	Limited Purpose Healthcare FSA
Can be used for medical, prescription, dental, and vision expenses.	Can be used for dental and vision expenses only.
A personal savings account, the money is yours for the rest of your life, even if you retire or leave Chemours. Your account earns interest, and once your HSA balance reaches \$1,000, you can invest it in mutual funds.	"Use it or lose it" benefit. If you do not use the funds in your Limited Purpose Healthcare FSA by December 31 each year, you will forfeit unused funds.
Chemours contributes \$600 for individual coverage and \$1,200 for family coverage to eligible employees' HSA.	No contribution from Chemours.
Annual 2024 IRS limit is \$4,150 for individual and \$8,300 for family coverage (includes your contributions and Chemours contributions). If you are age 55 and older, the IRS allows you to contribute up to an additional \$1,000.	The 2024 IRS limit for the Limited Purpose Flexible Spending Account is \$3,200.
Individual contributions: you can elect how much you want deducted from your paycheck at any time during the year.	Individual contributions: you elect how much you want deducted from your paycheck only during annual enrollment; no changes to the amount are allowed during the year.

23. What is Chemours doing to help with the increases in medical premiums and deductibles?

Chemours currently spends approximately \$118M for employee benefits. We have invested significantly in the plan design to support our employees needs including offering contributions to employee's Health Savings Accounts of \$600 or \$1200, depending on the coverage tier elected. We also encourage employees to get an annual biometric screening to save \$115 per month on their medical premiums.

Additionally, Chemours continues to invest in concierge programs such as Livongo and Hinge Health to assist employees with managing chronic and musculoskeletal related conditions and potentially eliminating the need for continued care and medications. For 2024, we will add a weight management program to this portfolio. These programs are available at no cost to employees.

24. Will there be an increase to the dental or vision premiums in 2024.

No, there will not be any increase to the dental or vision premiums for 2024.

25. Why doesn't Chemours increase the Health Savings Account company contribution amount?

The HSA is available via what is called a high deductible health plan. The Internal Revenue Service (IRS) dictates the design of these plans. Chemours has very little flexibility to adjust the contributions because of these guidelines.

26. Why do medical plan deductibles continue to increase?

The IRS establishes the minimum deductible amounts allowable under a high deductible health care plan. Chemours must align with these mandates to remain compliant.

27. Why does Chemours choose to offer high deductible health plans vs. PPO plans?

Chemours believes high deductible plans provide a fair and equitable approach for our employees while supporting our focus on employee wellness. Via the plan design, preventative care is always covered at 100%. When employees use the plan, they pay for those services. This encourages employees to maintain their wellness and be good consumers of healthcare. In a "traditional" PPO design, employees pay more upfront and less at the time they consume services. Our philosophy is to maintain a solid base plan for all employees at a lower cost point. When employees receive services they then share in the cost of the services.

28. Is there a cost decision tool available that helps employees decide which benefit options may work best for them?

Yes, this year we have the MyChoice Recommendation Engine available in the enrollment portal to assist employees in finding plans that best match your needs.

29. Why the switch from Bright Horizons to Backup Care Connection through Aetna Resources for Living?

The Chemours leadership team was not happy with the services that were provided by Bright Horizons. Frankly, we felt they were underserving our employees. We believe by partnering with Aetna we can provide better services to our employees at a lower cost.

30. What services does LifeCare Backup Care Connection offer to help employees in rural areas?

Backup Care Connection offers the following options:

- Referrals to Network Providers specialists can refer you to more that 2,100 centers & nearly 950 in-home care agencies in a nationwide network.
- Referrals to Licensed Providers Outside of Network specialists can refer you to providers outside of their network for a reimbursement for the full cost of care minus a low employee co-pay.
- Personal Network if you prefer to use you own friends or family to provide care, you'll authorize care in advance and then will be reimbursed up to a maximum of \$75 per day. (More details can be found at chemours.com/benefits).

Go right to the benefits site! Scan the code with your phone camera.

