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BIG SCIENCE. BIG IMPACT.



ORNL EMPLOYEE
BENEFITS GUIDE



2025

Employee Benefits Guide

ORNL offers you and your eligible family members a comprehensive and valuable benefits program.

We are pleased to provide you with this Employee Benefits Guide. It provides important information about your benefits to help you make your elections. See the [Summary Plan Description](#) at benefits.ornl.gov for more information about your ORNL benefits.

We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family. Review this Employee Benefits Guide and discuss your benefits options with your family.

You can enroll in any of these benefits during Open Enrollment, for an effective date of January 1. More information is found on the Benefits website.



ORNL Benefits Service Center (via ADP)

Enrollment Website: my.adp.com

Phone: 1-800-211-3622

TTY Service: <http://relayservices.att.com>

ORNL Benefits

Phone: 1-865-576-7766

Toll Free: 1-866-576-7766

Fax: 1-865-241-3213

Email: ornlbenefits@ornl.gov

Address: P.O. Box 2008, MS6465

Oak Ridge, TN 37831-6465

Plant Mail: MS-6465, Building 4007, Room 208



This Benefits Enrollment Guide highlights certain provisions of the benefit plans available to eligible employees (and their eligible dependents and beneficiaries) of UT-Battelle, LLC ("the Company"). Complete details are in your Summary Plan Description and plan documents. In case of a conflict between the information in this Enrollment Guide and the wording in either the official plan documents or the Summary Plan Description, the plan documents and/or Summary Plan Description always govern. The Company expects to continue these plans indefinitely, but reserves the right to terminate, suspend, withdraw, amend or modify them at any time without prior notice to participants to the extent permitted by law. Any change, termination of benefits or increase in costs to participants will be based solely on the decision of the Company and may apply to active employees, employees on leave of absence, former employees with coverage through COBRA, future retirees and current retirees as either separate groups, or as one group. In addition, the tax treatment of these benefits is subject to change without notice, as determined by federal, state or local tax authorities.

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Eligible Dependents

You may cover your eligible dependents under certain benefits.

For These Plans:	Your Eligible Dependents Include:
Medical, Dental, and/or Legal Insurance	<p>Your legal spouse</p> <p>Your children up to age 26. This includes your birth child, legally adopted child, or stepchild. You can cover your adult children until age 26, even if they do not live with you, are not dependents on your tax return, and/or are no longer students. Both married and unmarried children are eligible, although their own spouses and children do not qualify</p> <p>An unmarried adult disabled child over age 26 who has been certified by the claims administrator as incapacitated due to being physically, mentally, or developmentally disabled, incapable of self-support, and is fully dependent on you for support. The certification process must be within 30 days of reaching age 26, or in the case of a new hire, within 30 days from the date of hire, as long as the adult disabled child was covered under the previous employer's group medical plan</p>
Spouse and Child Life Insurance	<p>Your legal spouse</p> <p>Your unmarried children from birth to age 26</p> <p>An unmarried adult disabled child over age 26 who has been certified by the claims administrator as incapacitated due to being physically, mentally, or developmentally disabled, incapable of self-support, and is fully dependent on you for support. The certification process must be within 30 days of reaching age 26, or in the case of a new hire, within 30 days from the date of hire, as long as the adult disabled child was covered under the previous employer's group medical plan</p>
Accidental Death and Dismemberment (AD&D) Insurance	<p>Your legal spouse</p> <p>Your unmarried children from birth to age 19, or to age 26 if a full-time student</p>

Dependent Verification

To enroll your eligible dependents in the medical and/or dental plans, you are obligated to submit proof of dependent status for each dependent, which includes birth certificate, marriage certificate, or other documents that may be needed to prove eligibility.

Submit Documents to the Dependent Verification System

- If you enroll online, the ADP system will prompt you to upload your documents at the end of your enrollment session.
- If you do not submit your documents at the end of your online enrollment session or if you enroll by phone, ADP-DVS will send you a letter (via work email and/or home address) requesting the documents. The letter will provide detailed instructions on how to comply by the verification deadline stated in the letter.

Directory

For questions or more information about plan coverage or claims, contact providers directly or visit their websites. It is often best to deal directly with the plan providers because they are most knowledgeable about which services are covered and the status of your claims.

Healthcare Plans	Group Number
MEDICAL UnitedHealthcare 1-844-234-7925 www.myuhc.com	905404
PHARMACY Express Scripts 1-866-749-0097 www.express-scripts.com	
VISION Vision Service Plan (VSP) 1-800-877-7195 www.vsp.com	
DENTAL Delta Dental 1-800-524-0149 www.deltadentaloh.com	1053
Other Benefits Plans	
401(k) SAVINGS PLAN Schwab Retirement Plan 1-800-724-7526 www.workplace.schwab.com	
DEPENDENT CARE FLEXIBLE SPENDING ACCOUNTS HealthEquity WageWorks Pre-member Support: 1-866-735-8195 Member Services: 1-855-692-2959 www.healthequity.com/wageworks	
LEGAL INSURANCE WITH IDENTITY THEFT PROTECTION ARAG 1-800-247-4184 www.araglegalcenter.com Access Code: 18095or	
EMPLOYEE ASSISTANCE PROGRAM (EAP) Magellan Health Services On-site Counselor 1-800-888-2273 1-865-241-4673 member.magellanhealthcare.com	
DISABILITY AND FMLA The Hartford 1-800-882-2894 Fax: 1-833-357-5153 Email: GBinformationUpload@thehartford.com www.abilityadvantage.thehartford.com	
METLIFE LEGAL SERVICES Hyatt Legal Plans 1-800-821-6400 Will Preparation - HLP300437-1-G Available if you are enrolled in Basic Life Insurance Estate Resolution - HLP-ERS-300437-1-G Available if you are enrolled in Supplemental Life Insurance	
VOLUNTARY BENEFITS Metlife Accident Insurance Critical Illness Insurance Pet Insurance (contact MetLife to enroll) 1-800-438-6388 www.metlife.com/getpetquote	
VOLUNTARY BENEFITS OFFERED THROUGH ALLSTATE BENEFITS Whole Life Insurance with Long Term Care https://openenrollment.ornl.gov/long-term-care/	

When You Can Retire

For Salaried and ATLC employees whose Company Service Date is prior to April 1, 2012:

You can retire with a full pension:

- at age 65 or later, regardless of Company Service.
- at age 62 or later, with at least 10 years of Company Service.
- when your age and years of Company Service total 85 or more.

You can retire with a reduced pension:

- at age 50, with at least 10 years of Company Service.

For Salaried and ATLC employees whose Company Service Date is on or after April 1, 2012:

- You can retire with a full pension at age 65 or later, regardless of Company Service.
- You can retire with a reduced pension at age 50, with at least 10 years of Company Service.

Grandfathered NSPS employees:

You can retire with a full pension:

- at age 65 or later, regardless of Company Service.
- at age 62 or later, with at least 10 years of Company Service.
- when your age and years of Company Service total 81 or more.

You can retire with a reduced pension:

- at age 50, with at least 10 years of Company Service.

Determining Your Pension Benefit

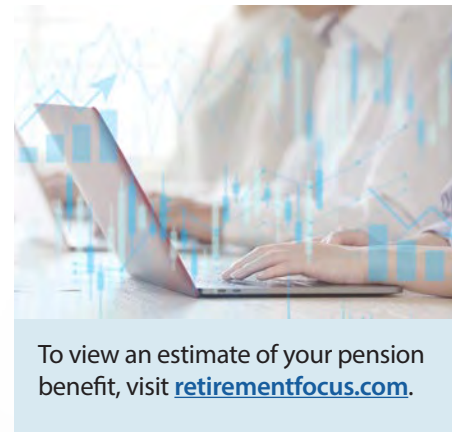
Your pension benefit takes into account your company service and salary and is calculated using formulas in your applicable pension plan. See the formula descriptions in the Summary Plan Description on the ORNL Benefits website for details.

Forms of Payment

There are several types of pension payments to choose from including:

- single life annuity
- 50 percent and 75 percent joint and survivor
- level income option (for those who commence their pension before age 62)
- lump sum option (for those whose actuarially equivalent lump-sum value is \$150,000 or less)

If you should die while you are still an active employee, the pension plan will pay a 50 percent survivor benefit if you have at least five years of Credited Service.



Important Notice

Coverage for your dependents will not be valid until such evidence is provided. Once the evidence is provided, coverage will be official back to the date of the qualifying event. If evidence is not provided within the time frame, your dependent's enrollment in the plan will be denied. If any claims were paid during the pending eligibility period, the claims will be invalid and recovered by UnitedHealthcare, Express Scripts, Vision Service Plan, and Delta Dental. You will be refunded appropriate premiums as if you never had the coverage for the family member.

Working Families

- If both you and your spouse work for UT-Battelle, each of you may enroll in benefits as employees, or one of you may be enrolled as a spouse. **Accordingly, you may not dually enroll as an employee and as a spouse. Also, only one of you may enroll your eligible dependent children.**
- If you are under age 26 and you and your parent work for UT-Battelle, you may enroll as an employee or be enrolled as a dependent, but not both.
- Contact ORNL Benefits 1-865-576-7766 before completing your elections if you are changing from spouse or dependent coverage to employee coverage.

Making Changes During the Year

Certain benefits can only be changed during Open Enrollment or due to a qualifying life event. Outside of Open Enrollment, you may only add or drop legal insurance, change your medical and dental coverage, or revise your Dependent Care Flexible Spending Account election if you have a qualifying life event, or when certain significant changes in cost or coverage happen.

You may drop Group Life or Accidental Death & Dismemberment insurance coverage at any time and for any reason.

Benefits Resources at Your Fingertips

Don't Wait. Be Prepared.

Get the most out of your benefits anytime, anywhere. Many ORNL benefits providers have created apps that help you view ID cards, find providers, and view claims and account balances. Find them on the Benefits website under Benefits/Mobile Apps.

Step 1. Text ORNL to 67936

Step 2. Click on the link in the text response

Step 3. iPhone®, tap the Share button; Android®, tap the Option button

Step 4. Click Add to Home Screen

A Qualifying Life Event Includes

- A change in your marital status
- The birth or adoption of a child
- A spouse or dependent's loss or gain of other group health plan coverage
- Death of a dependent
- A change in your employment status from Casual to Regular

See About Your Benefits in Your Benefits Summary Plan Description for more information.

You have 30 days from the date of a qualifying life event to change your benefits elections. Day one is the date of the event.

Note: Your employment status change from Temporary to Regular is not a qualifying life event.

Mobile Access to Your Benefits

Download the digital ORNL Benefits Wallet Card to your smartphone today.



Medical Plan Coverage

Comprehensive medical coverage is an important part of your ORNL benefits package. When you enroll in a medical plan, you and your covered family members have coverage to help pay for the costs associated with illness or injury.

Your ORNL medical plan includes:

- Medical coverage through UnitedHealthcare
 - Consumer Choice with a Health Savings Account (HSA)
- Prescription (Rx) drug coverage through Express Scripts
- Vision care through Vision Service Plan (VSP)
 - Basic and Enhanced Plan Option

Key Features

- You can use any doctor or health care provider available within the UnitedHealthcare nationwide network of providers or even a provider outside of the network.
- Preventive care, such as annual physicals and age-appropriate screenings, are provided at no extra cost to you when you use an in-network provider.*
- No referrals are required by the plan to see a specialist.

Your UnitedHealthcare Medical Network

UnitedHealthcare provides a network of doctors, facilities, and other health care professionals who have met the UnitedHealthcare quality standards and agreed to charge lower fees.

Is your doctor in the network? It is important to know if your providers are part of the UnitedHealthcare network for your medical plan. You may choose to receive care from network members or from providers not in the network. To locate a UnitedHealthcare network provider, access the UnitedHealthcare website at www.myuhc.com.

In-Network Care

When you use a participating provider for medical services, UnitedHealthcare covers those services at a higher percentage and the cost of the service provided is discounted, which lowers your out-of-pocket costs. Preventive care is covered at no extra cost, and your provider takes care of filing your claim with UnitedHealthcare.

Out-of-Network Care

When you receive care from a health care professional who is not a participating provider, UnitedHealthcare covers those services at a lower percentage. You are responsible for any amount above the allowed charges. Additionally, you may have to file your own claims with UnitedHealthcare.

Administrative services provided by United HealthCare Services, Inc. or their affiliates.

UnitedHealthcare

- Find In-network Providers
- Use your personal information to estimate health coverage expenses under the Consumer Choice medical plan.

If enrolled, myuhc.com

If not enrolled, www.whyuhc.com/ornl

1-844-234-7925

**The office visit for mammogram, Pap smear and maternity screening services are covered out-of-network, subject to out-of-network benefits.*

Pension Plan

The Pension Plan provides you with a dependable source of income in retirement. The amount of your pension benefit is based on your earnings and years of Company service. You can retire with a full pension benefit once you meet certain requirements — based on your Company Service Date — which are outlined later in this section.

Mandatory Contributions

Employees are required to make mandatory participant contributions to the Pension Plan in the following amounts:

- 2 percent of employee's compensation up to the maximum Social Security wage base for the year
- 4 percent of the employee's compensation above the Social Security wage base for the year
- No mandatory participant contributions may be made for compensation above the 401(a)(17) limit

Pension Plan Eligibility

Company employees, shown on the regular payroll and personnel records with Compensation reported by the Company on an IRS Form W-2, automatically become Pension Plan participants unless they are in one of the following excluded categories:

- leased employees,
- independent contractors,
- non-resident aliens who do not have earnings from the Company from sources within the United States,
- employees who have entered into a written agreement with the Company waiving the right to participate in the plan,
- IGUA represented employees (Security Police Officers or Central Alarm System Operators) hired on or after August 15, 2016.

Vesting

You are vested in the Pension Plan once you have 5 years of Credited Service. Being vested means you have a nonforfeitable right to receive a pension benefit. Vested benefits normally become payable at age 65. However, you can elect to receive a reduced benefit as early as age 50.

IGUA Bargaining Unit Employees

The Savings Plan for IGUA Employees at ORNL (IGUA Savings Plan) includes these options: Before tax and Roth 401(k). The tax advantages make it a smart way to save and invest for your future.

You can enroll in the IGUA Savings Plan at any time.

Beginning Thursday after your hire date:

- Go to www.workplace.schwab.com
- Click on Register Now
- Complete the requested information
- Schwab will email a link for you to continue the registration
- For additional assistance, contact Schwab at 1-800-724-7526

You can contribute from 1 to 40 percent of your pay (on a before-tax or Roth 401(k) basis, or any combination).

You may start, change, or stop your contributions at any time. You may also roll over contributions from a previous employer's plan.

Your Savings are Tax-Deferred

Your before-tax contributions, Company-matching contributions, and associated investment earnings are tax-deferred, which means you will not pay federal income taxes on these amounts until you take the money out of the IGUA Savings Plan.

Although your Roth 401(k) contributions are made with after-tax dollars, when you make a qualified withdrawal in the future, you are not taxed on the earnings of those contributions.

Annual Contribution Limits

Annual limits for employee pre-tax 401(k) and Roth 401(k) may change annually and are guided by the IRS. The annual limit does not include any Company-matching contributions.

ORNL Matches Your Contributions

ORNL will match 100 percent of each dollar of the first 6 percent of your eligible earnings. ORNL's total matching contribution is 6 percent of pay. The Company match is vested after you have three years of Company service.

Non-Elective Contributions

You may be eligible to receive a 3.5 percent of eligible earnings company non-elective contribution. For more information and eligibility requirements, please refer to your collective bargaining agreement.

Catch-Up Contributions

If you are age 50 or older, the IGUA Savings Plan allows for additional before-tax and Roth 401(k) contributions each year above the IRS's 401(k) annual contribution limit.

Schwab Online Resources

Visit www.workplace.schwab.com to:

- Enroll in the 401(k) plan
- Complete rollover forms
- Review account status
- Make account changes
- Access financial education information
- Review investment options, performance, and fees



Investment Education

Financial planning tools, calculators, and other resources are available on the savings plan website at: www.workplace.schwab.com.

For full details, review the information in your IGUA Savings Plan enrollment kit, included in your enrollment material.

Note: Employees classified as Temporary Postdoc, IGUA Bargaining Unit, or Temporary ATLC Bargaining Unit working less than 9 months, are not eligible to participate in the pension plan. See your Summary Plan Description for additional information.

Consumer Choice Medical Plan Features

The face of health care has changed over the last decade and, most likely, will continue to do so. The overriding theme of these changes is that we are all health care "consumers." Any time you go to the doctor or fill a prescription, you are essentially making a purchase. As with any purchase, you choose how and what you spend. You can, and should, even shop around. Here are a few tips to help you manage your out-of-pockets costs.

On the Consumer Choice Medical Plan, you can:

- Use the UnitedHealthcare network and negotiated costs for services
- Get no extra cost routine preventive care in your network
- See a doctor or specialist without a referral
- Visit the WellOne Clinic for convenient, on-site access to primary care

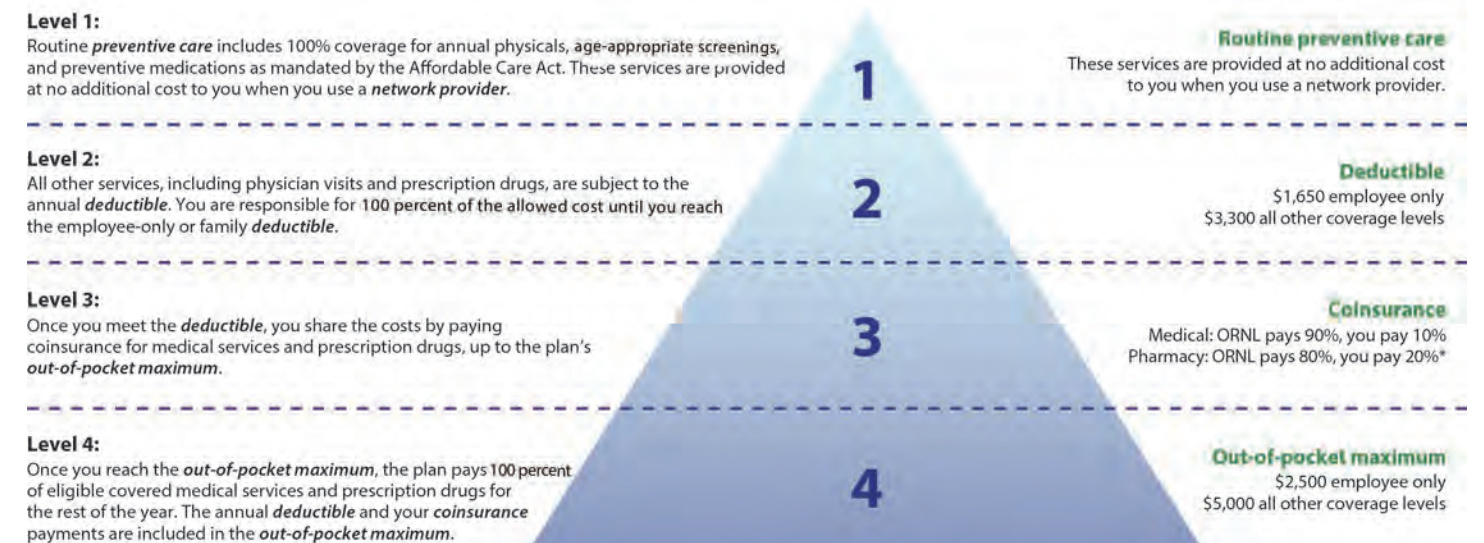
Consumer Choice with an HSA

The Consumer Choice plan is a consumer-driven health plan (CDHP) that pairs with an HSA to give you control over how you spend your health care dollars and to encourage you to budget and manage your health care expenses carefully. An HSA is a tax-advantaged bank account designed to help you save on qualified medical expenses. See the HSA section of this Guide for details. For a complete list of qualified medical expenses see *IRS Publication 502* at www.IRS.gov.

On Consumer Choice, you can choose to see any in- or out-of-network provider but will typically pay more out of pocket when you go out of your network. Preventive care is covered 100 percent when you see an in-network physician. No referrals are required by the plan to see a specialist.

Consumer Choice participants are accepted by the on-site WellOne Clinic.

What the Consumer Choice Plan Covers



*Minimum and maximum copayments apply to prescriptions. Check your plan documents for more details.

Key Medical Plan Terms

Deductible — The amount you must pay on your own toward your medical care each plan year (not including copays) before your plan begins to pay.

Coinsurance — The cost-sharing phase of your plan after your deductible has been met. ORNL pays a percentage of your expenses, and you pay the remaining percentage.

Copay — The fixed dollar amount required to be paid by you for certain covered services or products. ORNL pays the remainder of the covered cost.

Out-of-Pocket Maximum — The most you will pay out of your pocket for eligible health care expenses before ORNL covers your eligible expenses 100 percent for the rest of the plan year.

Express Scripts Prescription Drug Coverage

The ORNL medical plan includes prescription drug benefits, which are managed through Express Scripts. Be sure to use your Express Scripts ID card when filling prescriptions. Your out-of-pocket costs are based on one of three tiers: generic, brand preferred, and brand nonpreferred.

The preferred drug formulary includes over 1,800 drugs that may cost less than the nonpreferred drugs that are not included in the formulary.

ORNL participates in the following programs to help keep prescription costs as low as possible.

Prior Authorization

Certain prescription drugs may require a prior authorization to receive the prescription or full quantity that your doctor prescribes. If your drug requires this step, your doctor may need to provide additional information to Express Scripts before the drug may be covered under your insurance plan.

Smart 90 Exclusive

This program requires members to fill maintenance medications at any network retail pharmacy or through the Express Scripts home-delivery pharmacy, and at a 90-day supply. You can get up to three 30-day courtesy fills before you must make the switch to a 90-day supply. After three 30-day courtesy fills of a maintenance prescription, if you do not fill at a 90-day supply, you will pay the full cost of the medication and the cost of the prescription will not apply towards your deductible or out-of-pocket maximum.

Member Pays the Difference

This program is designed to incentivize members to select less expensive generic equivalents when available. If the member chooses to stay on the brand name drug, whether doctor or patient requested, the member will have to pay for the difference between the gross costs of the brand name drug and the generic drug, in addition to the generic copay/coinsurance. If there is a clinical reason why the member cannot take the generic drug, there is an Express Scripts appeal process for approval to pay only the brand name copay/coinsurance.

Express Scripts

- Review pharmacy benefit plan highlights
- Find a local participating pharmacy
- Compare prescription medication costs
- View National Preferred Formulary Exclusion List

www.express-scripts.com/ornl

(24/7) Enrollment Line: 1-866-749-0097

Rx coverage begins after deductible is met (\$1,650 individual/\$3,300 all other coverage levels) | 20% Coinsurance with Minimum and Maximums noted below

Prescription Drug Plan				
	Retail (up to 30-day supply)		Mail Order and Retail (up to 90-day supply)	
Your Coinsurance Costs	Minimum*	Maximum	Minimum*	Maximum
Generic	\$10	\$75	\$20	\$150
Preferred brand	\$25	\$150	\$60	\$300
Nonpreferred brand	\$40	\$250	\$100	\$500

Note: You will pay the actual cost if that cost is less than the minimum.

401(k) Retirement Savings Plan

Salaried and ATLC Bargaining Unit Employees

The Savings Plan for Employees at ORNL (Savings Plan) includes these options: Before-tax, Roth 401(k), and after-tax savings. The tax advantages make it a smart way to save and invest for your future.

You can contribute from 1 to 75 percent of your pay (on a before-tax, Roth 401(k), or after-tax basis, or any combination). You may start, change, or stop your contributions at any time. You may also roll over contributions from a previous employer's plan.

If you are a salaried employee and you do not take action to enroll or opt out, you will be automatically enrolled 30 days following your date of hire, and a pre-tax contribution of 3 percent of your eligible earnings will be deducted from each paycheck and put into an account set up for you in the Savings Plan. Unless you elect otherwise, your contributions will automatically be invested in the LifePath Index Portfolio fund that corresponds with the date on which you will reach age 65, which is the default investment for anyone who is automatically enrolled.

Your Savings are Tax-Deferred

Your before-tax contributions, Company-matching contributions, and associated investment earnings are tax-deferred, which means you will not pay federal income taxes on these amounts until you take the money out of the Savings Plan.

Although your Roth 401(k) contributions are made with after-tax dollars, when you make a qualified withdrawal in the future, you are not taxed on the earnings of those contributions.

Annual Contribution Limits

Annual limits for employee pre-tax 401(k) and Roth 401(k) may change annually and are guided by the IRS. The annual limit does not include any Company-matching contributions.

ORNL Matches Your Contributions

ORNL will match 50 percent of each dollar of the first 6 percent of your eligible earnings. ORNL's total matching contribution is 3 percent of pay. The Company match is vested after you have three years of Company service.

Note: Postdocs, except certain named fellows, are not eligible for the Company match.

Catch-Up Contributions

If you are age 50 or older, the Savings Plan allows for additional before-tax and Roth 401(k) contributions each year above the IRS's 401(k) annual contribution limit.

You can enroll in the Savings Plan at any time.

Beginning Thursday after your hire date:

- Go to www.workplace.schwab.com
- Click on Register Now
- Complete the requested information
- Schwab will email a link for you to continue the registration
- For additional assistance, contact Schwab at 1-800-724-7526

Voluntary Benefits Offered through Allstate Benefits

Whole Life with Long Term Care

Employees can elect Whole Life Insurance with an Accelerated Death Benefit for Long Term Care. If you elect to enroll in this benefit, the premium is guaranteed for life and will be deducted from your paycheck on an after-tax basis.

Whole Life Insurance from Allstate Benefits is a type of insurance coverage that provides you with a death benefit that accumulates cash value along the way. You can elect a benefit amount from \$25,000 to \$175,000. You can also purchase Whole Life Insurance coverage for your spouse from \$10,000 to \$75,000. When you purchase this coverage, it also includes an Accelerated Death Benefit for Long Term Care at no additional cost. This benefit pays 6 percent of your death benefit for up to 34 months of treatment for qualified long term care services and is paid in addition to your death benefit, providing you with an affordable option for Long Term Care coverage.

Long term care is an important option to consider as 70 percent of people over the age of 65 will require long term care and the average nursing home cost is more than \$93,000 each year. Long term care often causes financial strain as nearly 50 percent of families are not prepared for the expense.



Vision Care

Vision benefits are included as part of your medical plan. Vision Service Plan (VSP) provides the Signature Choice plan for all ORNL medical plans. The plan features include:

Vision Service Plan		
Frequency	Basic Vision Plan In-Network	Enhanced Vision Plan In-Network
Examination	Every Calendar Year	Every Calendar Year
Lenses	Every Calendar Year	Every Calendar Year
Frame	Every Other Calendar Year	Every Calendar Year
Benefits with a VSP® Network Provider		
Allowances		
Retail Frame Allowance	\$120	\$200
Feature Frame Brand Allowance	\$140	\$220
Walmart and Sam's Club Frame Allowance	\$65	\$110
Costco Frame Allowance	\$65	\$110
Elective Contact Lenses	\$120	\$200
VSP Light Care	N/A	Frame and lens allowance can be used toward nonprescription sunglasses or nonprescription blue light filtering glasses

Laser vision correction is provided at reduced cost through VSP network doctors and contracted laser surgery centers. See the Vision Care section of the Summary Plan Description.



Health Savings Account

Consumer Choice participants who meet IRS eligibility requirements can open a Health Savings Account. An HSA is a special bank account, only offered on Consumer Choice plans, that allows you to save money tax free for use on qualified medical, dental, vision, and prescription expenses for you and your family. Some services and items not always covered by your medical plan.

You own your HSA. The money in your account is yours to keep, even if you change employers, change health plans, or retire.

Note: An HSA, administered by Optum Financial™, is automatically opened on your behalf when you elect Consumer Choice and indicate that you are HSA eligible on the ADP benefits enrollment website. You can access your Optum HSA account at: www.myuhc.com.

Triple Tax Advantages

HSAs offer unique tax-advantages to help you save money:

- You can make tax-free contributions
- You can grow your funds tax free through interest or investments if your account balance is \$2,000 or more
- You can spend funds tax free on qualified medical expenses

Employee HSA Elections

- Your election defaults to \$0 on January 1 each calendar year, so you must re-elect your contribution amount during Open Enrollment if you want contributions to start again the following January.
- HSA elections can be changed any time during the year without a qualifying life event. The change will be effective on the first day of the month after the election is made. You must contact the ADP Benefits Service Center to make HSA changes.

Annual Contribution Limits

For 2025, you can contribute a maximum of \$4,300 for Employee Only and \$8,550 for all other coverage levels to your HSA. This maximum includes ORNL's contribution as well as your own.

Note: If you are 55 or older, you can contribute an additional \$1,000 to your HSA.

You can spend your HSA funds on qualified medical expenses for yourself and any tax dependents, even those not covered on your health plan.

Use your HSA funds on qualified medical expenses for:

- You and your spouse
- All dependents you claim on your tax return

HSA Eligibility Rules

- You must be enrolled in Consumer Choice
- You cannot be covered by any other non-CDHP
- You cannot be enrolled in Medicare Part A or TRICARE®
- You or your spouse cannot be enrolled in a Health Care Flexible Spending Account
- You cannot be claimed as a dependent on another individual's tax return

For additional information, see *IRS Publication 969* at www.irs.gov.

ORNL Contributes:
Employee Only Coverage \$500
All Other Coverage Levels \$1,000

Voluntary Benefits Offered through MetLife

Accident Insurance

Accident insurance is a supplemental insurance policy designed to provide a financial benefit to help cover the costs of being injured in an accident. Accident insurance plans pay benefits based on the type of treatment needed or expense incurred when the insured is injured in an accident. The more expensive the treatment(s), the more the policy will pay out. Benefits payouts do not depend on the participation in other employer insurance offerings.

You'll have a choice of two plans (called the "Low Plan" and the "High Plan") that provide payments in addition to any other insurance payments you may receive.

You may elect this benefit during your new hire benefits enrollment at ADP. Changes can only be made within 30 days of a qualifying life event or during Open Enrollment.

Critical Illness Insurance

Critical illness insurance is a special form of insurance that provides policyholders with a lump sum payment in the event of a catastrophic diagnosis. The policyholder can use the money they receive however they like. Many put it toward medical bills while others use it to replace lost wages while they go through recovery. Types of illnesses covered included are (but not limited to) heart attack, cancer, organ transplants, Parkinson's Disease, and ALS.

Employees will be offered a choice of the following benefit amount options: \$15,000 or \$30,000. The cash can help you focus on getting back on track. Best of all, the payment is made directly to you, and is paid regardless of any other insurance you may have. It's yours to spend however you need, including for your or your family's everyday living expenses.

You may elect this benefit during your new hire benefits enrollment at ADP. Changes can only be made within 30 days of a qualifying life event or during Open Enrollment.

Pet Insurance

Pet Insurance can help reimburse you for covered unexpected veterinary expenses for your pet. You may purchase this insurance directly from MetLife.



Time Away from Work

Vacation

You accrue vacation starting on your first day of work. For employees hired after 1/1/1996. ATLC and IGUA bargaining unit employees refer to your collective bargaining unit agreement.

Vacation hours per year for full-time employees	Years of Service
120	0–9
160	10–19
200	>20

Vacation accrues weekly until you reach the yearly maximum. Employees can carry over up to 200 hours of vacation (not holidays) to the next year. Vacation is prorated based on scheduled hours for part-time employees. Vacation is prorated based on hours worked for casual employees. Employees hired on or before 1/1/1996 receive their vacation as a lump sum on Jan. 1.

Parental Leave

Parental leave provides salaried employees with paid time off to assist in the care and well-being of their newborn or newly adopted child. Full-time employees receive 120 hours and part-time employees receive 60 hours of parental leave per birth or adoption event. ATLC and IGUA bargaining unit employees refer to your collective bargaining unit agreement.

Paid Leave

Paid leave is offered upon proper approval, for absences associated with occasional illness, injury or personal business. Full-time exempt (monthly) employees are eligible for up to 24 hours/year. Non-exempt (weekly) are eligible for up to 48 hours/year. Part-time exempt employees are eligible for up to 16 hours/year. Part-time non-exempt (weekly) are eligible for up to 32 hours/year. Benefit hours are reduced by half if hired after July 1. ATLC and IGUA bargaining unit employees refer to your collective bargaining unit agreement.

Holidays

ORNL observes the following holidays: New Year's Day, Martin Luther King's Birthday, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving, day after Thanksgiving, Christmas, and a day related to Christmas. Each year salaried employees may select an additional "floating" holiday, which provides one extra day off on a day of their choice. Instead of a floating holiday, ATLC and IGUA have an additional day related to Independence Day.

Other Types of Leave

You also receive paid holidays, funeral leave, jury duty, and military training and emergency duty.

Wellness Program

A healthy lifestyle is key to a healthy and productive workforce at ORNL, and better managing health care costs. ORNL's Wellness Program is fully integrated across several program areas, including benefits, safety, occupational health, and disability.

Employees have many opportunities to maintain and improve their health through a comprehensive program of fitness and educational activities. Seminars and health screenings, along with a variety of campaigns for exercise, fitness, nutrition, and weight loss are offered throughout the year.

Rally

Rally, our UnitedHealthcare Wellness Program partner, provides an online health program, also available to spouses, with educational resources, interactive tools, and healthy lifestyle programs. Sign up for Rally at www.myuhc.com.

Once you are registered on the Rally website, you can complete the Health Survey and get immediate, confidential results. You will be provided with specific health suggestions and follow-up actions that are designed to help you make simple changes to your daily routine, set smart goals, and stay on target. The information may help you better understand your health and adopt lifestyle changes that can improve your well-being.

Rally will recommend missions for you: simple activities designed to help improve your diet, fitness, and mood. Start easy, and level up when you're ready. You can also earn Rally coins, which you can use for chances to win great rewards. Rack up coins by joining missions, pushing yourself in a challenge, and even just by logging in every day.

More Information

Employees should visit the internal ORNL Wellness Program Website for detailed Rally registration instruction and more information.



Fitness Centers

ORNL has three fitness centers open 24 hours a day, 7 days a week, for use by UT-Battelle employees, Postdocs, Visiting Scientists/Users, ORNL DOE Site Office personnel, and staff-augmentation subcontractors. Users may access the facilities with an employee badge once they have completed the ORNL Fitness Facility Access Training.

Group Exercise Classes

ORNL offers group fitness classes including BodyPump, yoga, spinning, and additional classes scheduled throughout the year. You must be a UT-Battelle employee and have completed the ORNL Fitness Facility Access Training to be able to register for classes.



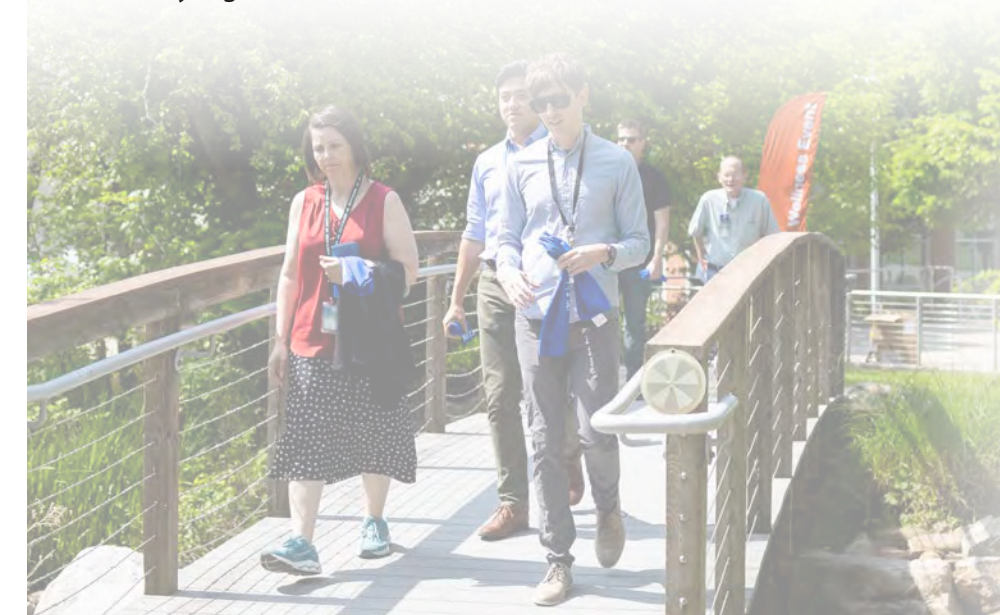
Access to Childcare

ORNL partnered with the Emory Valley Center to develop a high quality childcare facility that gives priority enrollment to children of ORNL employees. The Little Learning Lab opened in October 2024 and serves approximately 100 children ages 6 weeks through 5 years old. For additional information, visit www.littlelearninglab.org.



Onsite Health Care

ORNL offers the WellOne Clinic, an onsite medical clinic that delivers nonoccupational medical services to all employees, subcontractors, other staff, and visitors. Its experienced and qualified medical team will provide specialized services for primary, acute, wellness, and preventive care. The clinic is operated by MedExpress, which is owned by UnitedHealth Group's Optum division.



To Get Started, Follow These Easy Steps:

- Log on to www.myuhc.com. (You will need to register if this is your first time on the UnitedHealthcare website)
- Once you have logged in, click on **View your Rewards** and learn how to earn them. This will take you to the Rewards Program
- The first time you access Rally, you will need to register on the Rally website also. After the first time, you will only need to sign into your www.myuhc.com account to access the Rally Program

Dental Plan Choices

Beginning in 2025 ORNL will offer two dental options, Delta Dental Basic Plan and Delta Dental Enhanced Plan.

In-Network

Preventive Care Visits

Under both plans, two preventive care visits each calendar year for cleanings and X-rays are covered in full. The chart below is a summary of the covered services under each plan.

Summary of Dental Plan Benefits		
Covered Services	Delta Dental Basic Plan	Delta Dental Enhanced Plan
Calendar Year Maximum	\$1,500	\$3,000
Lifetime Orthodontic Maximum	\$1,500	\$3,000
Lifetime Maximum	N/A	N/A
Annual Deductible per member <i>(applies to basic and major services)</i>	\$50 per member	N/A
Orthodontics	Covered 50% of the allowed amount up to the \$1500 maximum for dependents up to age 26	Covered 50% of the allowed amount up to the \$3000 maximum for all covered members

Note: Members with certain high-risk medical conditions, such as diabetes, heart conditions, or high-risk pregnancies, may be eligible for additional prophylaxes (cleanings) or fluoride treatment.

Using a Delta Dental Network Dentist

You may choose any dentist. Your out-of-pocket costs are likely to be lowest if you choose a dentist in the Delta Dental Preferred Provider Organization (PPO) network. PPO dentists agree to accept payment according to the PPO Dentist Schedule, and, in most cases, this results in a reduction of their fees. Delta Dental may also pay a higher percentage for covered services if you go to a PPO dentist.

If you go to a non-PPO dentist who participates in Delta Dental Premier, the fee reduction is not the same as with the PPO dentists. However, Premier dentists agree to accept Delta Dental's maximum Approved Fee as payment in full for covered services. If you go to a nonparticipating dentist, you will be responsible for any difference between Delta Dental's allowed fee and the Dentist's Submitted Fee, in addition to any copay.

Out-of-Network

If you go to a nonparticipating dentist, you will be responsible for any difference between Delta Dental's allowed fee and the Dentist's Submitted Fee, in addition to any copay.

Accessing Delta Dental of Ohio Plan

1. Visit the Delta Dental website at www.deltadentaloh.com
2. Click Find a Dentist
3. Product Selection: Click Delta Dental PPO and Delta Dental Premier

Note: Delta Dental time-based services, such as cleanings and X-rays, carry over from any previous Delta Dental plan. Charges for services that exceed the limitations are not covered under the plan.

Company-Provided Benefits

You are automatically enrolled or covered under these plans, which are provided by ORNL.

Employee Assistance Program

The Employee Assistance Program is a confidential counseling service available to you and your eligible dependents to help solve personal problems that may affect your health, family life, or job performance. You may have up to five sessions per personal problem or concern, per year. It is available 24 hours a day, 7 days a week.

Disability

The ORNL disability plan is designed to protect your income if you are unable to work due to pregnancy or non-occupational illness or injury. Family and Medical Leave (FML) runs concurrent with any disability leave you take. See the Summary Plan Description for more information.

Short-Term Disability

ATLC and IGUA Bargaining Unit employees should refer to their bargaining unit agreements.

Short-term disability continues part of your pay for up to 180 calendar days (six months) of disability, based on your length of service. For salaried employees, you accrue one month of disability benefit for each month of Company service, up to a total of six months of benefit. The following three tiers of benefit payments apply:

- **Tier 1:** 100 percent of pay for the first 42 calendar days (6 weeks) of disability
- **Tier 2:** 80 percent of pay for the next 42 calendar days (6 weeks) of disability
- **Tier 3:** 60 percent of pay for the remaining 96 calendar days (14 weeks) of disability

If you have been employed by UT-Battelle for less than six months, the plan provides continuing income for 30 days for each completed month of service as of the first day of disability, based on the percentages above.

Long-Term Disability

Long-term disability continues up to 60 percent of your pay after you have been disabled for 180 calendar days, with benefits payable up to \$15,000 for salaried employees, up to \$5,000 for ATLC and IGUA bargaining unit employees until you reach age 65 or your disability ends.

Business Travel Accident Insurance

In the event of your accidental death as a result of a covered accident while on business travel, an amount equal to four times your annual salary (maximum amount of coverage is \$500,000) will be paid to your Group Life insurance beneficiary, if any, or your Estate, unless you designate otherwise. This plan also provides for disability or dismemberment benefits.



Legal Insurance with Identity Theft Protection

In today's world, legal is everywhere. Because no matter where you are in life — starting your first job, getting married, buying a home, preparing for retirement or somewhere in between — it's likely you'll experience events that have potential legal ramifications.

Identity Theft Protection

If you or a family member are a victim of identity theft, this service provides access to:

- **Identity theft case specialists** who will help you determine appropriate steps to begin recovery and help you monitor the progress of your recovery.
- **Toll-free legal advice** from a Telephone Network Attorney to assist with legal-related problems that the theft of your identity may have caused.

For more information, visit:

www.araglegalcenter.com | Access Code: 18095 or

You may also call 1-800-247-4184 to speak with an ARAG customer care specialist or email Service@ARAGlegal.com.

**Eligibility, coverage, limitations and exclusions are governed by a separate coverage document. Please see the identity theft plan summary for details.*



Dependent Care Flexible Spending Account

What is a Dependent Care Flexible Spending Account (DCFSA)?

DCFSA is a tax-advantaged account that allows you to use pre-tax dollars to pay for qualified dependent care expenses. When you enroll you choose how much money you want to contribute to your DCFSA account per IRS guidelines. Your contributions are deducted from your pay in equal installments throughout the year before taxes are withheld.

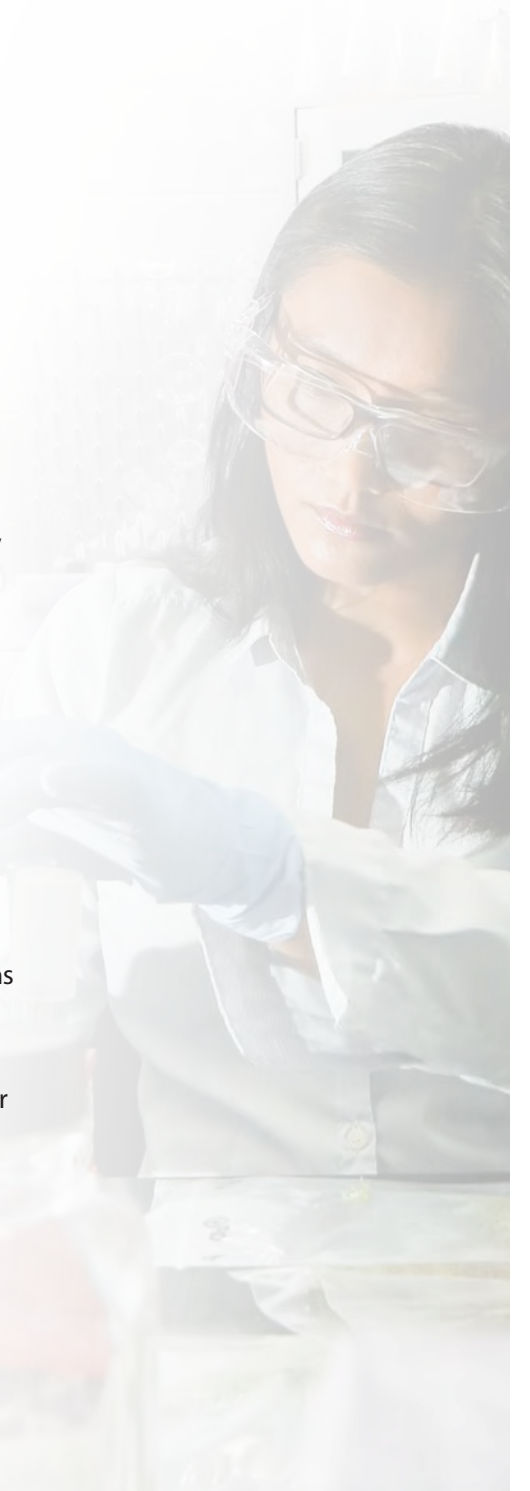
You may contribute from \$100 to \$5,000 on a pre-tax basis to your Dependent Care FSA. How much you contribute depends on what you expect to pay an individual or facility to provide day care for your eligible dependents. For more information, visit the ORNL Benefits website.

Important DCFSA Rules

Because DCFSA's are regulated by the IRS, there are some rules to remember.

- **Eligibility for reimbursement.** The care must enable you (and your spouse, if you are married) to work, look for work, or attend school full-time.
- **Determine your contributions carefully.** Once you've made your DCFSA election, you cannot change your contributions during the year unless you experience a qualifying life event. You have 30 days from the date of the qualifying event to change your DCFSA election. To be eligible for reimbursement, the care must enable you (and your spouse, if you are married) to work, look for work, or attend school full-time.
- **The grace period.** IRS regulations provide for a 2½ month grace period for DCFSA only, which will allow you to file claims for expenses incurred through March 15, 2025.
- **Use it or lose it.** Be sure to estimate your expenses and DCFSA contributions carefully. IRS rules prohibit the return of any unused funds. However, you have until March 31, 2025, to request reimbursement from HealthEquity.
- **No double-dipping.** You can only claim eligible expenses once — either for reimbursement from your DCFSA or as a tax credit on your federal income tax return.

For more detailed plan information and a list of eligible and ineligible expenses, visit the HealthEquity website at www.healthequity.com/wageworks. In addition, IRS Publication 503 ("Child and Dependent Care Expenses") contains a detailed explanation of eligible and ineligible dependent care expenses. This publication is available online at www.IRS.gov or by calling 1-800-829-FORM (3676).



Life Insurance

Life insurance protects your loved ones from the potentially devastating financial losses that could result if something happened to you. It provides financial security, helps to pay off debts, helps to pay living expenses, and helps to pay any medical or final expenses.

Group Life Insurance

Evidence of Insurability is required if you elect life insurance 30 days after your hire date.

Basic Life Insurance

Coverage: The amount of coverage is 2x your salary (rounded up to nearest \$1,000). Services include:

- Preparation of wills and codicils for you and your spouse

Cost: The cost is shared equally by you and the Company. Your monthly premium amount is \$0.195 per \$1,000 of coverage. For example, with a salary of \$50,000, your coverage amount is \$100,000 and your cost is \$19.50.

If you enroll in Basic Life, you may also enroll in Supplemental, Spouse and/or Child Life.

Supplemental Life Insurance

Coverage: You may elect an additional 1x to 8x your salary, up to a maximum benefit of \$1,000,000. Coverage includes the following services:

- Probate services to settle your estate upon your death

Cost: You pay the full cost of the coverage, which is based on your age.

Spouse Life Insurance

You may purchase life insurance coverage for your spouse.

Coverage: \$10,000 to \$50,000 in increments of \$10,000.

Cost: You pay the full cost of the coverage, which is based on the age of your spouse.

Child Life Insurance

You may purchase life insurance coverage for your unmarried children from birth up to 26 years of age.

Coverage: \$10,000 for each dependent child.

Beneficiary Designation

When you log on to the ADP Portal to enroll in your benefits, you will be asked to complete a beneficiary designation for your Basic and Supplemental Life Insurance.

Be sure to have the following information for each beneficiary before you begin the enrollment process:

- Name
- Address
- Social Security Number (optional)
- Date of Birth

Accidental Death and Dismemberment (AD&D)

AD&D Insurance pays a benefit in addition to your group life coverage if you are severely injured or die as the result of an accident. It covers accidents both on and off the job, at home and away, 24 hours a day. You do not have to enroll in Basic Life to elect AD&D.

You may enroll, cancel, or make changes to your AD&D insurance anytime during the year. No qualifying event or evidence of insurability is required. AD&D Insurance is available on an optional contributory basis. Coverage is available in increments of \$10,000 from \$20,000 to \$500,000 (maximum of 10X salary). It can provide extra financial security for you and your family in the event of accidental death, dismemberment, or paralysis. Additional benefits payable as the result of a covered injury that results in a covered loss include but are not limit to:

- Day Care Benefit
- Higher Education Benefit
- Home Alteration and Vehicle Modification Benefit

