2021 Annual Enrollment Guide





2021 Annual Enrollment: Wednesday, October 28 – Tuesday, November 10, 2020

Annual Enrollment is your annual opportunity to evaluate your options, decide if they meet your and your family's needs for the coming year, and make any necessary changes through **DuPont Connection** — your personalized benefits website and service center. This guide provides information about your 2021 benefits options and how to enroll through **DuPont Connection**.

Employees in Puerto Rico or on International Assignment

See the details for your 2021 medical plan information on the **dupontbenefits.com** site. Not all plans and programs described in this guide apply to you.

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Welcome to Your 2021 Benefits

At DuPont, we're transforming to create a better n:ow. That extends to our benefits, too!

We continue to offer a variety of great benefits to help you and your loved ones stay well, make informed healthcare decisions, and keep medical expenses down. But that's just the start.

Our goal for 2021 and beyond is to **transform** the way healthcare is delivered to you. To that end, we've expanded and enhanced our offerings to deliver a **better**, **more personalized health and benefits experience** to you and your family. The centerpiece of this transformation is **Accolade** — a **personalized**, **confidential**, **concierge-level service** to answer your medical, prescription drug, and behavioral health/substance abuse care questions, help you understand your medical benefits, and, beginning in January, support you throughout your healthcare journey.

Finally, DuPont believes choosing and using your benefits should be easy. Our **DuPont Connection** website and Service Center are here to help. Whether you have questions about your options during Annual Enrollment, want to learn more about managing your benefits, or just need help with the enrollment process, answers and support are available online and by phone.

At DuPont, your health and wellbeing matter.

This year has been like no other in living memory. COVID-19 has taken a toll on all of us — physically, emotionally, financially, and socially. As part of our ongoing commitment to your health and well-being, there will be no changes to your monthly premiums for medical, dental, and vision coverage for 2021.

Do I Need to Enroll?

New! Accolade

Medical Plan

Prescription Drug Coverage

Employee Assistance Program (EAP)

Dental Plan

Vision Plan

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Vacation Buying Program

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Do I Need to Enroll?

Review the What's Changing for 2021 information online on the DuPont benefits website at **www.dupontbenefits.com**. Then, take action through **DuPont Connection** to ensure the benefits you have in 2021 are right for you and your family.

We're making several important changes to our benefits for 2021 to give you more choice and flexibility while further simplifying and improving your healthcare experience. So it's important that you take the time to review your current coverage, as well as the benefit enhancements and new offerings for next year, before making your decisions.

Make Sure You Have What You Need for 2021!

If you don't complete the enrollment process using DuPont Connection during Annual Enrollment:

- Your Health Care and Dependent Care Flexible Spending Accounts (FSA) contribution amount(s) will **NOT** carry forward into 2021. If you want to contribute to any of the FSAs in 2021, you must actively enroll in those accounts and elect your contribution amount. If you don't take action, your contribution amount(s) will be set to \$0 and you won't have any FSAs in 2021.
- You'll miss out on the opportunity to purchase additional vacation days for 2021.
- Most of your current health and insurance coverage elections and eligible covered dependent(s) will
 continue into 2021 at 2021 premium rates;
- Your annual premiums for health coverage will not change for 2021;
- If your current medical carrier is Highmark Blue Cross Blue Shield, it will automatically change to Aetna for 2021; and
- Behavioral health/substance abuse coverage will be administered by Aetna, not ComPsych.
- Your HSA contribution amount(s) (which you make from your pay) will carry forward into 2021;
- If you are a participant in one or both of the Noncontributory and Contributory Group Life Insurance (NCGLI/CGLI) Plans, this coverage will end after December 31, 2020 and you will automatically participate in the Employee Life Insurance Plan. Evidence of Insurability (EOI) will not be required unless you increase supplemental coverage above the CGLI coverage level in force at the end of 2020. Your beneficiary designation will transfer to the Employee Life Insurance Plan;
- Your current employee and dependent life insurance and accidental death insurance coverage will also continue into 2021, unless you are currently enrolled in the \$10,000 basic life insurance coverage option, which won't be available after December 31, 2020. If you currently have \$10,000 of basic life insurance coverage, you will be defaulted into coverage of \$1x Pay, and EOI will be required. If you elect \$50,000 of basic life insurance coverage, EOI won't be required; and
- If you have \$50,000 of basic life insurance coverage, you will no longer receive the premium difference between 1x Pay and \$50,000 in your paycheck after 2020.

DuPont Connection: Online or by phone

You can access your personalized benefits information at any time on **DuPont Connection** at **http://digital.alight.com/dupont**. For enhanced security, you're required to set a new password every 90 days.

You can also get personal assistance and answers to your questions by calling the **DuPont Connection** Service Center at 1-833-253-7719

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New! Accolade: Personalized, Confidential Medical Benefits Support

Navigating the healthcare maze can be confusing, time-consuming, and stressful. Wouldn't it be so much simpler if you had one go-to person to handle everything for you? Good news! With Accolade, now you do.

Once you connect with Accolade, you and your covered family members will be assigned a dedicated Health Assistant for **personalized, confidential** support.

Starting **October 19, 2020**, you can connect with an Accolade Health Assistant for answers to your enrollment questions and help with medical plan option decisions. Call **1-877-383-4756**, Monday through Friday, from 8:00 a.m. to 11:00 p.m., Eastern Time (ET), visit **member.accolade.com**, or send a secure message via the **Accolade mobile app**.

Starting in January, you and your family can connect with your Accolade Health Assistant, who will be **your single point of contact**, to help with medical, prescription drug, and behavioral health/substance abuse care questions, big or small. Your dedicated Health Assistant will take the time to get to know you and understand your needs, while partnering with a team of doctors, nurses, and benefit specialists to support you in making the best healthcare decisions possible. **Accolade will replace your current medical carrier and ComPsych customer service and medical management functions.**

Questions About Your 2020 Coverage, Billing, and Claims?

Continue to contact your current medical (Aetna or Highmark Blue Cross Blue Shield) and behavioral health (ComPsych) carriers for assistance.

Count on your Accolade Health Assistant to help you:

During Annual Enrollment	Starting in January
 Learn about medical benefits changes during Annual Enrollment Understand and compare your medical plan options for 2021 Choose the medical coverage that best meets your needs for 2021 Confirm a provider's current network status Connect with health and wellness programs, like Virgin Pulse Learn about tools and resources for your medical benefits, like the Medical Expense Estimator 	 Get the most from your medical, prescription drug, and behavioral health/substance abuse benefits Request a new, extra, or replacement member ID card, if needed (and receive the card by mail) Understand your medical plan options Understand and manage your medical care for both a new diagnosis and ongoing medical and behavioral health/substance abuse conditions (including pregnancy) Resolve medical billing and claims issues Confirm your provider is in-network Find a new in-network provider Schedule a doctor's appointment for you or your covered family member Learn about tools and resources for your medical benefits, like the Medical Expense Estimator Obtain prior authorization for a test or procedure Learn how a test or procedure is covered Prepare for a doctor's visit or hospital stay
And a lot	more!

How to Get Started

It's easy to connect with your Health Assistant – even on the go:

- Visit member.accolade.com
- Text 3YRK to 67793 to download the **Accolade mobile app**. Message and data rates may apply. Visit accolade.com for Accolade's privacy policy.
- Call **1-877-383-4756**, Monday through Friday, from 8:00 a.m. to 11:00 p.m., ET

You'll be given your Health Assistant's direct phone extension so you can connect with your Health Assistant whenever you have medical-related questions or concerns.

Alternatively, starting in January, you can call **DuPont Connection** at **1-833-253-7719** (select "Health and Wellness," then "Accolade Health Assistant") to be connected with your Accolade Health Assistant.

Going forward, you can continue to contact your Health Assistant through **DuPont Connection** (select Health and Wellness," then "Accolade Health Assistant"); once connected with Accolade, enter your Health Assistant's extension when prompted). Or, you can:

- Call Accolade directly at 1-877-383-4756 and enter your Health Assistant's extension when prompted
- If your Health Assistant isn't available, you can leave a voicemail, request a callback, or speak with another Health Assistant
- Access the Accolade website from work using single sign-on through **DuPont Connection** or from home at member.accolade.com
- Send a secure message to your Health Assistant through the **Accolade mobile app** (available from the App Store or Google Play).
- You can also text 3YRK to 67793 to download the **Accolade mobile app**. Message and data rates may apply. Visit accolade.com for Accolade's privacy policy.

Accolade Health Assistants are available Monday through Friday, from 8:00 a.m. to 11:00 p.m., ET. Outside of regular hours or on holidays, you'll be connected with Accolade's nurse line when you call. The nurse line is available 24/7/365.

The sooner you contact your Accolade Health Assistant, the sooner you can take advantage of this exciting service. To learn more about Accolade, visit the Accolade tile on the homepage of **DuPont Connection**.

Accolade does not practice medicine or provide patient care. It is an independent resource to support and assist you as you use the healthcare system and receive medical care from your own doctors, nurses, and healthcare professionals. If you have a medical emergency, please contact 911 immediately.

Not Enrolling in DuPont Medical Coverage for 2021?

Accolade can still answer your questions about benefit eligibility and enrollment, DuPont health and wellbeing programs, treatment decision support, and medications. You'll also have 24/7/365 access to Accolade's nurse line. Accolade services are provided to at no cost to you.

For Non-Medical/Behavioral Health and Substance Abuse Coverage Questions

Note that Accolade doesn't replace

DuPont Connection, the DuPont

Connection Service Center, or
the individual carriers when you
have questions or need help
with DuPont benefits other than
medical, prescription drug, and
behavioral health/substance
abuse — including the Healthy
Living Program, dental, vision, life
insurance, Health Savings Account,
Flexible Spending Account, the
Retirement Savings Plan, the
Employee Assistance Program,
vacation, pay, bonuses, and more.

Continue to reach out to those resources for support during and after Annual Enrollment, and throughout 2021.



Attention: Accolade Can Help With the Transition to Aetna

If you currently have coverage with Highmark Blue Cross Blue Shield (Highmark), or are currently receiving behavioral health/substance abuse care from a ComPysch network provider, you may have some questions and concerns. Accolade can help you with the transition to Aetna through:

- **Provider Search**: Accolade can help you confirm if your current providers are in the Aetna network. If a provider isn't in the Aetna network, you can work with your Accolade Health Assistant to find another innetwork provider who meets your needs.
- Transition of Care: If you or a covered family member is undergoing treatment for a serious condition and your current provider isn't in the Aetna network, you may be able to *temporarily* continue care with the out-of-network provider at in-network rates. If you think this applies to you, beginning **December 16, 2020**, you can call your personal Accolade Health Assistant at 1-877-383-4756 to learn more and ask for a Transition Coverage Request Form.

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Medical Plan

For 2021, U.S. mainland employees can choose to be covered by one of **three** medical plan options, giving you and your family choice and flexibility:

- The Core option,
- The Premium Saver option, and
- The Traditional Copay PPO option

All three options automatically come with prescription drug and behavioral health/substance abuse coverage; and they all offer comprehensive medical coverage provided through Aetna, our single, national medical plan carrier. Additionally, they all cover the same services, including 100% coverage for preventive care.

There will be no increase in monthly premiums for 2021. However, there are some important differences between the options, such as how you will pay for certain services and whether or not you can contribute to an HSA. Read on to learn more.

How the Medical Options Compare

The table on pages 8 and 9 shows a summary of your coverage under the three medical plan options. Medical plan premiums, deductibles, and out-of-pocket maximums vary based upon the coverage level you choose. Use the Medical Expense Estimator on **DuPont Connection** to estimate your total expenses under each medical option – including both out-of-pocket costs you pay when you receive care and your monthly premiums. More information about the medical plan options will be provided on **DuPont Connection** during Annual Enrollment.

	Core Option	Premium Saver Option	Traditional Copay PPO Option
Medical Care Navigator/Advocate		Accolade	<u> </u>
Annual Deductible ^{1,2}	• In network: \$1,400/\$2,800	• In-network: \$2,800/\$5,600	• In-network: \$700/\$1,400
(individual/other coverage levels)	• Out-of-network ³ : \$2,500/\$4,000	• Out-of-network ³ : \$3,500/\$6,000	• Out-of-network ³ : \$1,800/\$2,600
Annual Out-of-Pocket Maximum ^{4,5}	• In-network: \$5,000/\$10,000	• In-network:	\$6,000/\$12,000
(individual/other coverage levels)	• Out-of-network ³ : No limit	• Out-of-net	work³: No limit
Covered Preventive Care ⁶		• In-network: 100% paid, no deductible	
		• Out-of-network ³ : 100%; no deductible	
Office and Facility Visits (primary care provider [PCP] office visits, [including outpatient behavioral health/ substance abuse visits], specialist office visits ⁷ , urgent care visits, retail clinic visits, and emergency room [ER] visits)	• In-network: You pay : • Out-of-network ³ : You pa		 In-network: Amounts not subject to the deductible. You pay: PCP office visit: \$30 copay Specialist office visit: \$45 copay Urgent care visit: \$45 copay Retail clinic visit: \$30 copay ER visit: \$250 copay, not waived if admitted Out-of-network³: You pay 40% after deductible
Teladoc® (Telemedicine) Non-emergency, general medical services	Fre	Free	
Teladoc Dermatology services	Before you meet the deductile: You meet the deductible: Yo	You pay a \$45 specialist copay	
Teladoc Behavioral health services	 Before you meet the deducent of the second of the	You pay a \$30 primary care provider copay	
	– \$19 (ongoing sessions wi	th a psychiatrist)	
Other Medically Necessary Care (Labs, X-Rays, hospitalization, surgery, etc.)		In-network: You pay 20% after deductible	
, , , , , , , , , , , , , , , , , , , ,		Out-of-network ³ : You pay 40% after deductib	ole
Prescription Drugs – Through CVS Caremark	(applies to retail [up to two fills] and mail or		
Generic		No charge after deductible	
Brand Formulary ⁸	\	ou pay 25% after deductible; \$125 maximum	8
Brand Non-Formulary ⁸	Y	ou pay 45% after deductible; \$250 maximum	٦ ⁸
Maintenance medications filled more than two times at a retail pharmacy other than CVS		You pay 45% after deductible; no maximum ^s	

	Core Option	Premium Saver Option	Traditional Copay PPO Option		
Associated Tax-Advantaged Accounts – Tl	nrough Bank of America				
Health Savings Account (HSA) ¹⁰	Ye	s	Not applicable		
	Use it to pay for eligible out-of-pocke and vision				
	Use it or keep it. Any money left ove over and is yo				
DuPont HSA Contribution ¹⁰	\$600 ind \$1,200 other co	Not applicable			
Your Optional Tax-Free HSA Contributions ¹¹		Up to \$3,000 individual/ \$6,000 ¹¹ other coverage levels			
Health Care Flexible Spending Account (FSA)	Optional Limited Purp You may contribute from \$120 to \$2,750 per y out-of-pocket dental and Use it or lose it: You'll forfeit any mo December 31, but have until April 15	Optional Traditional Health Care FSA: You may contribute from \$120 to \$2,750 per year on a before-tax basis to pay for eligible out-of-pocket medical, prescription drug, dental, and vision expenses.			
			Use it or lose it: You'll forfeit any money left over in your account as of December 31, but have until April 15 to file all claims from the prior year.		

- 1. Applies to medical, behavioral health/substance abuse, and prescription drug expenses combined.
- 2. All options have an "aggregate" deductible. This means that for all coverage level except "individual," the full family deductible must be met before coinsurance applies for any one covered individual. The full family deductible can be satisfied by one or a combination of eliqible family members.
- 3. Eligible expenses are limited to the amount of the charge that is the reasonable and customary (R&C) amount as determined by the carrier.
- 4. All options have an "embedded" or "individual" out-of-pocket maximum. This means that for all coverage levels, eligible expenses are paid at 100% for a covered individual as soon as that individual meets his/her individual out-of-pocket maximum.
- 5. The out-of-pocket maximum does not apply to fertility services. There is an infertility lifetime maximum benefit per family (including males and females) of \$15,000 for medical and \$10,000 for prescription drugs.
- 6. Coverage follows the standard preventive care quidelines of the Patient Protection and Affordable Care Act; includes prescription drugs classified by the quidelines as preventive.
- 7. Includes allergy testing, physical therapy, and chiropractic care in addition to other specialties. Chiropractic care has \$1,000 annual benefit limit.
- 8. Applies before and after deductible is met when a generic equivalent is not available (e.g., contains same active ingredients in the same strength). If a generic equivalent is available, you will pay the difference between the generic and brand cost; coinsurance will not apply.
- 9. Coinsurance for maintenance medications (i.e., 90-day + supply) filled more than two times at a retail pharmacy other than CVS applies pre- and post-deductible; however, you will never pay more than 100% of the cost of the medication. The coinsurance amount applies toward your deductible or out-of-pocket maximum.
- 10. Subject to eligibility; you must certify on DuPont Connection during Annual Enrollment that you meet the HSA eligibility requirements.
- 11. Includes any contributions made by your spouse/domestic partner, assuming your domestic partner qualifies as a tax dependent.

2021 Monthly Medical Plan Premiums (No increase from 2020)

	Core (Option	Premium Saver Option		Traditional Copay PPO Option		
Monthly Premiums ¹							
Coverage Levels	Without the \$40	With the full \$40	Without the \$40	With the full \$40	Without the \$40	With the full \$40	
NOTE: Medical rates do not reflect the \$50 tobacco user surcharge	Monthly Healthy Incentive Credit	Monthly Healthy Incentive Credit ¹	Monthly Healthy Incentive Credit	Monthl Healthy Incentive Credit ¹	Monthly Healthy Incentive Credit	Monthly Healthy IncentiveCredit ¹	
You only	\$85	\$45	\$55	\$15	\$85	\$45	
You + Spouse/Domestic Partner	\$200	\$160	\$130	\$90	\$200	\$160	
You + Child(ren)	\$145	\$145 \$105		\$55	\$145 \$105		
You + Family	\$250	\$210	\$160	\$120	\$250	\$210	

^{1.} In 2020, one-third of the full \$40 monthly Healthy Incentive Credit (HIC) for 2021 was earned in Q1 through Q3. If you achieved 4,000 points in Q1 through Q3, you earned the full \$40 monthly each quarter, and your monthly contribution is shown in the table above. If you earned 4,000 in only one or two of the quarters, your 2021 monthly contribution will be higher and can be found on DuPont Connection.

Two Ways to Save Even More on Your Premiums

Earn the Monthly Healthy Incentive Credit

When you participate in the Healthy Living Program (through Virgin Pulse) and meet the requirements to receive the Healthy Incentive Credit, you reduce your medical premiums for the following year!

In 2021, you can earn the Healthy Incentive Credit, on a quarterly basis, toward your medical premiums for 2022.

Look for information on the 2021 Healthy Living Program in early 2021 to see how to earn the Healthy Incentive Credit for 2022.

Bonus! By participating in the Healthy Living Program, you also have the opportunity to earn Pulse Cash, which you can redeem for gift cards and merchandise from the Virgin Pulse store.

Avoid the \$50 Monthly Tobacco User Surcharge

Supporting DuPont's global tobacco-free policy, a \$50 monthly surcharge will be added to your 2021 medical premiums if you are a tobacco user. Employees are required to attest to their tobacco use over the past three months during Annual Enrollment.

To avoid the surcharge, tobacco users must complete three tobacco cessation coaching sessions by phone and a Tobacco Cessation Journey (both through Virgin Pulse) by **October 31, 2020, at 11:59 p.m., Central Time (CT)**. For more information, call Virgin Pulse at **1-888-671-9395**. Special requirements apply for employees on international assignment.

If you complete three tobacco cessation coaching sessions and a Tobacco Cessation Journey by March 31, 2021, the \$50 surcharge will be removed effective May 1, 2021. If you complete three tobacco coaching sessions and a Tobacco Cessation Journey between April 1 and June 30, 2021, the \$50 monthly surcharge will be removed effective August 1.

Hired on or after July 1, 2020?

You will not be required to complete the requirements to earn your credit in 2021. You are, however, still eligible to participate in all programs.

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Prescription Drug Coverage¹

You will be automatically enrolled in prescription drug coverage, administered through CVS Caremark, when you elect DuPont medical coverage. Your prescription drug costs will depend on if you choose to purchase drugs at retail or mail order, an in-network or out-of-network pharmacy, and the category of the drug on the CVS Caremark drug list (also called a formulary).

Information on how to view drug pricing, find an in-network pharmacy, and the 2021 formulary is available on the CVS Caremark website at **www.caremark.com**.

For a summary of your prescription drug coverage, see the table on page 8. For more information, see the Summary Plan Description on **DuPont Connection**.

1. Employees in Puerto Rico or on international assignment are eligible for alternative prescription drug coverage.

Employee Assistance Program (EAP)¹

ComPsych is the administrator of the Employee Assistance Program (EAP).

The EAP provides assessment, evaluation, and referral for behavioral health and substance abuse treatment for you and your covered dependents. This service, staffed by experienced clinicians, is available 24/7 by calling ComPsych at **1-800-435-7266**. (Employees in Puerto Rico should call **1-800-948-3913**). The EAP consultant will confidentially assess your situation and refer you to an EAP network provider who will meet your needs.

For all benefit-eligible employees and their dependents, up to six free EAP counseling sessions are available for each unique situation per year that is assessed by the EAP as a short-term counseling need. If additional care is needed beyond the six free EAP sessions, contact Accolade as you may be eligible to continue treatment under your DuPont Medical Plan coverage.

1. Employees on international assignment should use their medical carrier for behavioral health/substance abuse care.

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You have the choice between two dental plan options administered by MetLife®. When you use providers in the MetLife Preferred Dentist Program Plus (PDP Plus) network, you can limit your out-of-pocket costs. You can find PDP Plus dentists by visiting **www.metlife.com/mybenefits**, or by calling MetLife at **1-855-638-3944**. Using network dentists is recommended, but not required by the plan.

There will be no increase in monthly premiums for 2021. Premium contributions for each plan are shown below.

	High Option	Standard Option		
Coverage				
Annual deductible	\$50 per person, up to a maximum of \$150 per family	\$50 per person, up to a maximum of \$150 per family		
Applies to restorative care only				
Diagnostic and preventive care	Plan pays 100%¹	Plan pays 100%¹		
 2 regular cleanings per year or 4 periodontal cleanings with diagnosed condition (2 periodontal cleanings are in lieu of the 2 regular cleanings) 				
• Up to 2 routine exams per year				
 Dental X-Rays: Bitewing X-Rays — One time per year Whole mouth X-Rays — One time every 5 years 				
Restorative care	After the deductible, you pay 25% ²	After the deductible, you pay 50% ²		
Includes bridges, crowns, fillings, and other covered dental services				
Annual benefit limit	\$2,000/person	\$1,250/person		
Lifetime orthodontic limit ³	\$1,500 per covered individual, regardless of age	\$1,200/child (for children under age 19)		
2021 Monthly Premium ⁴ (no increase from 2020)				
You only	\$18	\$10		
You + Spouse/Domestic Partner	\$33	\$20		
You + Child(ren)	\$35	\$24		
You + Family	\$55	\$36		

- 1. For out-of-network claims, reasonable and customary (R&C) limits apply. R&C amounts are based on the 90th percentile, which means that 90% of providers in a geographic area charge no more than the R&C amount and 10% charge more.
- 2. The benefit for the Preferred Dental Provider Plus network dentist is determined on the network-negotiated amount. For out-of-network providers, R&C limits apply, where R&C amounts are based on the 90th percentile. Additional frequency limits may apply to certain covered dental services.
- 3. The lifetime orthodontic limit is a combined maximum for both options; however, the High Option provides an additional \$300 of lifetime coverage.
- 4. Premiums shown are on a monthly basis. The amount deducted from your pay may vary depending on your pay frequency.

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The DuPont Vision Plan offers comprehensive coverage through VBA. To receive the highest level of coverage, you can choose a provider from the nationwide VBA network of more than 16,000 vision care providers. You can use VBA or non-VBA providers; however, VBA providers offer the best convenience, quality, and value. Find a VBA provider by visiting **www.vbaplans.com**, or by calling **1-800-432-4966**.

New! A \$250 LASIK eye surgery benefit is available beginning in 2021, in- and out-of-network. LASIK eye surgery is available at a discount through TLC Laser Eye Centers® and QualSight® LASIK. Schedule a free LASIK eye surgery exam at a credentialed LASIK surgeon near you, and save up to 35% on the procedure. Call **1-877-437-6105** for information.

In addition, VBA also offers hearing benefits! Schedule a free hearing exam and save over 40% on premium aids with the latest technology through Your Hearing Network. For information, call **1-888-819-5333**.

There will be no increase in monthly premiums for 2021.

For more information, see the Summary Plan Description on **DuPont Connection**.

	VBA Provider	Non-VBA Provider	Non-VBA Provider If No VBA Provider Within 35-Mile Radius			
Vision Care Service						
Eye exam	Plan pays 100%	Plan pays up to \$40	Plan pays 100%			
Eyeglass lenses and/or frames (one time per year) — includes polycarbonate lenses, scratch-resistant coatings, solid and gradient tints, blended bifocals, progressive lenses (except digital), UV coatings, and trifocal lenticular	Plan pays 100% after \$20 copay (the \$20 copay applies to lenses or frames but not both; the frames are covered with a wholesale value of up to \$60 [approximately \$150-\$180 retai])	Plan pays: • Single vision: up to \$40 • Bifocal: up to \$50 • Trifocal: up to \$75 • Progressive: up to \$75 • Lenticular: up to \$100 • Frames: up to \$50	 Plan pays 100% after \$20 copay per person for the materials Frames will be reimbursed up to \$130 Additional Lens Options such as: 1 Yr. Scratch, UV Coatings, Polycarbonate Lenses, Progressives (except Digital) and Tints will be reimbursed in full 			
Cosmetic contact lenses (in lieu of glasses, including exam)	Plan pays up to \$175 allowance toward the total cost	Plan pays up to \$175 allowance toward the total cost	Plan pays up to \$175 allowance toward the total cost			
VBA-approved, medically necessary contact lenses (in lieu of glasses, including exam)	Plan pays 100% of R&C	Plan pays up to \$300	100% of R&C			
LASIK eye surgery	Up to \$250 allowance toward the total cost on both eyes, once every eight years					
2021 Monthly Premiums¹ (no increase from	2020)					
You only	\$8.46					
You + Spouse/Domestic Partner	\$14.70					
You + Child(ren)	\$14.70					
You + Family	\$21.78					

^{1.} Premiums shown are on a monthly basis. The amount deducted from your pay may vary depending on your pay frequency.

Do I Need to Enroll?

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Health Savings Account (HSA)

When you enroll in either the Core or Premium Saver medical plan option (and certify that you meet the IRS eligibility criteria), a bank account will be opened in your name through Bank of America called a Health Savings Account (HSA). You will own and control this account for your healthcare expenses. Here's how it works

HOW IL WOLKS.		
Contribute \$	Grow \$\$	Use \$\$\$
DuPont contributes to your account—with your first regular pay of the new plan year for monthly paid employees, and by your second regular pay of the new plan year for bi-weekly and weekly-paid employees: • \$600 (if you cover yourself) • \$1,200 (if you cover more than yourself) You may contribute with tax-free deductions from your paycheck up to: • \$3,000 (if you cover yourself) • \$6,000 (if you cover yourself and others; also includes any contributions made by your spouse/domestic partner) • An additional \$1,000 if you are turning age 55 or older in 2021	Your account earns interest and once you reach \$1,000, you can invest in mutual funds¹ Funds can be withdrawn from investments for eligible expenses at any time without fees or penalties¹	Use the money for eligible healthcare expenses now, or at any time in the future Money you don't use rolls over each year
You pay less in taxes from your paycheck now	You don't pay any taxes on earnings	You don't pay taxes on the money from the account used to pay eligible healthcare expenses
= Tripl	e-tax adva	entage

Making Outside Contributions to Your HSA?

If you make a contribution to your HSA outside of payroll, remember to contact **DuPont Connection** to adjust your payroll deductions and avoid exceeding the IRS contribution limits.

1. All investing is subject to risk, including possible loss. Talk with your tax advisor about your situation, including tax implications.

Health Savings Account (HSA) Eligibility

Due to the tax-savings features of an HSA, there are Internal Revenue Service (IRS) eligibility requirements that you must meet. When you enroll, you will need to certify your eligibility for the HSA on **DuPont**Connection before you can receive the Company contribution. If you are not eligible for the HSA, you can still enroll in the Core or Premium Saver medical option, but you will not receive the Company contribution to the HSA.

You **may participate** in the HSA if you:

- Are not enrolled in Medicare;
- Are not enrolled in other health coverage, either as an individual or as a participant, unless that coverage
 is a qualifying high deductible plan as defined by the IRS (your covered dependents may have other
 medical coverage);
- Are not covered by a traditional Health Care Flexible Spending Account (FSA) or Health Reimbursement Account (HRA) (such as through a previous employer or spouse/domestic partner's FSA or HRA through their employer) at any time during the same plan year that pays or reimburses medical expenses; and
- Cannot be claimed as a dependent on someone else's tax return.

For domestic partner HSA eligibility rules, see the Summary Plan Description on **DuPont Connection**. **Important:** If you cover your domestic partner and his or her child(ren) who meet the eligibility requirements for medical coverage, and you do not claim them on your tax return, distributions from your HSA related to claims incurred by your domestic partner and/or his or her child(ren) will not be "qualified medical expenses." They will be taxable and may be subject to an additional 20% tax penalty.

Special IRS Rules Apply to the HSA

For Medicare-eligible employees (generally employees age 65 and older), the IRS requires that you decline the HSA if you are enrolled, or will be enrolled in Medicare in 2021. You should also contact Medicare for information while you are participating in the DuPont Medical Plan to maintain eligibility for an HSA and discuss with a tax advisor any tax implications for Medicare retroactive enrollment dating.

If you will be covered in 2021 by the Traditional Copay PPO option, you will not be eligible to make or receive Company contributions to your HSA, but you will be able to use funds in your HSA for reimbursement of out-of-pocket costs incurred while you're enrolled in the Traditional Copay PPO.

For more information, see the Summary Plan Description on **DuPont Connection**.

If You Are Planning to Enroll in Medicare Within the Next Plan Year

If you are planning to enroll in Medicare within the next plan year, it is important you understand Medicare A enrollment cannot be retroactively applied up to six months or to your 65th birthday, whichever is closer. You must stop your HSA contributions at least up to six months prior to enrolling in Medicare A to avoid tax penalties. For more information, please visit medicare.gov.

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Flexible Spending Accounts (FSAs)

Health Care FSAs

You will need to make an annual election if you want a Health Care FSA. There are two Health Care FSAs to choose from, depending on which medical plan option you elect for 2021.

- If you enroll in the Core or Premium Saver medical plan options, you can contribute to the **Limited Purpose Health Care FSA**.
- If you enroll in the Traditional Copay PPO option, you can contribute to the Traditional Health Care FSA.

You may also contribute to either Health Care FSA if you opt out of medical coverage or are an employee on international assignment.

Note: When using your debit card with Limited Purpose Health Care or Traditional Health Care FSAs paired with an HSA, eligible expenses will be paid from the FSA first, until available funds are exhausted, and then remaining eligible claim amounts will be paid from the HSA.

- You may need to submit receipts to Bank of America to validate any FSA claims. Claims may not be automatically processed.
- Be sure to plan your contributions carefully. You cannot change your Traditional Health Care FSA, Limited Purpose Health Care FSA or Dependent Care FSA contribution amount during the year unless you experience a qualifying life event that permits the change.
- Your FSA balances are available to reimburse eligible expenses you incur only between January 1 and December 31. FSA balances are based on a calendar year. Any money left in your account at the end of the year and not claimed by April 15th, will be forfeited according to IRS regulations ("use it or lose it").
- For a complete list of eligible expenses, visit **DuPont Connection**, or review **Publication 502 (Medical and Dental Expenses)** or **Publication 503 (Child and Dependent Care Expenses)** on the IRS website at http://www.irs.gov.

See the chart on page 63 of the Summary Plan Description on **DuPont Connection** for a comparison of the two Health Care FSA options.

Dependent Care FSA

You will need to elect a Dependent Care FSA during Annual Enrollment if you want one for 2021. With a Dependent Care FSA, set aside tax-free money to pay for day care for your child who is under the age of 13 or for a spouse/domestic partner or dependent age 13 or over who is not able to take care of him/herself. The day care expenses must be necessary for you to work. If you are married, the expenses must also be necessary for your spouse to either work or attend school full-time.

Based On Your Tax Status	You Can Set Aside
If single or married filing jointly	\$120 to \$5,000
If married filing jointly and your spouse's employer offers a dependent care account	Up to \$5,000 in total between the two accounts
If your spouse earns less than \$5,000 per year	Up to the amount of your spouse's earned income (special income limits may apply if your spouse is a full-time student or is physically or mentally unable to provide self-care)
If married filing separate returns	Up to \$2,500

If you are considered a highly compensated employee, your contributions to this account may be limited.

For more information, see the Summary Plan Description on **DuPont Connection**.

Domestic Partners Must Be Dependents

You cannot claim healthcare or dependent care expenses for a domestic partner or a domestic partner's child(ren) unless they are considered by the IRS to be your dependents.

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Life Insurance

Employee Life Insurance

DuPont automatically provides you with basic life insurance coverage equal to your annual pay. You don't pay anything for this coverage, and you don't have to enroll to receive it. (Company-paid basic life insurance coverage over \$50,000 is subject to imputed income taxes.)

DuPont will no longer offer the \$10,000 basic life insurance coverage level after 2020. If you currently have \$10,000 of basic life insurance coverage, and take no action, you will be defaulted to 1x Pay, and Evidence of Insurability (EOI) will be required. If you elect \$50,000 of basic life insurance coverage, EOI won't be required.

Employees who elect or continue to have \$50,000 of basic life insurance coverage will no longer receive the premium difference between 1x Pay and \$50,000 in your paycheck after 2020.

During Annual Enrollment, you can make changes to your current life insurance coverage.

Employee Life Insurance Amounts

\$50,000	1x annual pay	2 x annual pay	3 x annual pay	4 x annual pay	5 x annual pay	6 x annual pay	7 x annual pay	8 x annual pay
250,000	17 dilliodt poy	2 / drillodt poy	3 K dilliddt pay	i k dililodi poy	3 K dilliddt pdy	o n drillodt pay	7 A dilliddt pdy	o k dililodi poy

Monthly premium rates are decreasing for 2021

Employee Life Insurance Rates ¹ Monthly premiums per \$1,000 of coverage							
Age at 1	2/31/21	Age at 1	12/31/21				
Under 25	\$0.014	50-54	\$0.153				
25–29	\$0.016	55–59	\$0.253				
30-34	\$0.024	60-64	\$0.395				
35-39	\$0.037	65-69	\$0.709				
40-44	\$0.050	70-74	\$1.232				
45-49	\$0.088	75+	\$1.838				

^{1.} Premiums are shown on a monthly basis. The amount deducted from your pay may vary depending on your pay frequency.

Evidence of Insurability (EOI)

If you elect a level of coverage that is greater than your 2020 coverage amount, you will need to provide EOI (health information) during the enrollment process through **DuPont Connection**. Coverage will take effect if and when the EOI is approved by **Securian Financial**.

Is Your Domestic Partner a Beneficiary?

For your domestic partner or child of a domestic partner to qualify as your beneficiary, he or she **must** be specifically designated as a life insurance beneficiary by you. Default payment rules do not apply to domestic partners or children of domestic partners.

Noncontributory and Contributory Group Life Insurance (NCGLI/CGLI) Plans

If you are a participant in one or both of the Noncontributory and Contributory Group Life Insurance (NCGLI/CGLI) plans, this coverage will end after December 31, 2020, and you will automatically participate in the Employee Life Insurance Plan. EOI will not be required unless you increase supplemental coverage above the CGLI coverage level in force at the end of 2020. Your beneficiary designation will automatically transfer to the Employee Life Insurance Plan.

Spouse/Domestic Partner Life Insurance

You can choose from these life insurance coverage amounts for your spouse/domestic partner:

\$10,000	\$25,000	\$50,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	\$350,000	\$400,000

Monthly premium rates are decreasing for 2021

Spouse/Domestic Partner Life Insurance Rates¹ Monthly premiums per \$1,000 of coverage			
Age at 12/31/21 Age at 12/31/21			12/31/21
Under 25	\$0.018	50-54	\$0.202
25-29	\$0.022	55-59	\$0.337
30-34	\$0.032	60-64	\$0.526
35-39	\$0.049	65-69	\$0.944
40-44	\$0.066	70-74	\$1.641
45-49	\$0.115	75+	\$2.060

^{1.} Premiums are shown on a monthly basis. The amount deducted from your pay may vary depending on your pay frequency.1

Evidence of Insurability (EOI)

If you elect a level of coverage that is greater than your 2020 coverage amount, you will need to provide EOI (health information) during the enrollment process through **DuPont Connection**. Coverage will take effect if and when the EOI is approved by **Securian Financial**.

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Child Life Insurance

You can elect dependent life insurance for your eligible children (including your domestic partner's eligible children) in these amounts: \$5,000, \$10,000, or \$20,000 per child. The coverage amount you select covers each of your eligible children for that amount — regardless of the number of children you have.

Child Life Insurance Rates ¹ Monthly premiums per \$1,000 of coverage		
Child(ren)	\$0.037	

^{1.} Premiums are shown on a monthly basis. The amount deducted from your pay may vary depending on your pay frequency.

Accidental Death Insurance

No one can predict an accident, so DuPont helps you protect yourself and your family from the financial hardships a serious accident can cause. You automatically have Company-paid accidental death insurance coverage equal to 1x your annual pay. This coverage is in addition to your employee life insurance benefit and pays a benefit to your beneficiaries if you die in an accident. Also, if you are permanently injured in an accident, a percentage is paid for specific losses, such as a limb or eyesight.

Additional Accidental Death Insurance

You can also purchase coverage for your spouse/domestic partner and eligible children.

Coverage Amounts				
Coverage For:	Option A	Option B	Option C	Option D
You only	\$500,000	\$250,000	\$100,000	\$50,000
You / your spouse or domestic partner	\$500,000/	\$250,000/	\$100,000/	\$50,000/
	\$300,000	\$150,000	\$50,000	\$25,000
You / each eligible child	\$500,000/	\$250,000/	\$100,000/	\$50,000/
	\$100,000	\$50,000	\$25,000	\$10,000
You / your spouse or domestic partner / each eligible child	\$500,000/	\$250,000/	\$100,000/	\$50,000/
	\$300,000/	\$150,000/	\$50,000/	\$25,000/
	\$100,000	\$50,000	\$25,000	\$10,000

Accidental Death Life Insurance Rates (monthly premiums) ¹ (No change from 2020)				
Coverage For:	Option A	Option B	Option C	Option D
You only	\$8.50	\$4.25	\$1.70	\$0.85
You + Spouse/Domestic Partner	\$13.60	\$6.80	\$2.55	\$1.28
You + Child(ren)	\$11.70	\$5.85	\$2.50	\$1.17
You + Family	\$16.80	\$8.40	\$3.35	\$1.60

^{1.} Premiums are shown on a monthly basis. The amount deducted from your pay may vary depending on your pay frequency.

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New Benefit Programs

For 2021, you'll have two new benefit options to further support your and your family's well-being: MetLife Legal Plan and Pet Insurance. For the Legal Plan, you pay for coverage through after-tax paycheck deductions. For Pet Insurance, you'll be direct-billed by Nationwide.

MetLife Legal Plan

This benefit provides representation for a range of legal concerns, including money matters, home and real estate, estate planning, family and personal matters, civil lawsuits, elder care, and traffic and criminal matters. Services are provided by a nationwide network of attorneys, at no additional cost to you.

You can choose from two coverage levels: coverage for just yourself, or coverage for you and your family. You can enroll in (or change) coverage on **DuPont Connection** during Annual Enrollment or if you experience a qualifying life event during the year.

MetLife Legal Plan Rates¹ (monthly premiums)		
Coverage For:		
You only	\$13.75	
You + Family	\$19.75	

1. Premiums are shown on a monthly basis. The amount deducted from your pay may vary depending on your pay frequency.

For more information, see the Benefits Library on the **dupontbenefits.com** website.

Pet Insurance

Pet Insurance, offered through Nationwide®, provides coverage for your pet's injuries and illnesses, and if you choose, preventive care. You can use any vet, worldwide. Plan are available for dogs, cats, birds, and exotic pets, with discounts when you cover multiple pets. Plus, you receive free 24/7 access to **vet**helpline® for quidance on any pet health concern.

You can enroll in (or drop) coverage anytime, not just during Annual Enrollment. To learn more, visit **http://benefits.petinsurance.com/dupont** or call Nationwide at **1-877-738-7874** to get a price quote or to enroll. You'll enroll for coverage through Nationwide, **not DuPont Connection**.

For more information, see the Benefits Library on the **dupontbenefits.com** website.

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Vacation Buying Program

The Vacation Buying Program allows you to buy additional vacation time for the following year with before-tax payroll contributions. All mainland U.S. employees and expatriates on international assignment are eligible. Employees in Puerto Rico are not eligible for the Vacation Buying Program.

How the Vacation Buying Program Works

Annual Enrollment is your chance to buy. You buy additional vacation time for the upcoming year during each Annual Enrollment. You must make a new election for any extra vacation you wish to buy for the next year, as your election won't carry forward. Your election will remain in effect for the entire plan year, and you cannot change your election during the plan year except for the cash-out provision noted below.

You buy with before-tax dollars. You'll pay for any extra vacation time with before-tax dollars withheld from your paycheck each pay period.

You may buy up to an additional 40 hours of vacation time each year. However, if your average scheduled work week is less than 40 hours, you can only buy up to the number of hours you work in an average week.

The deadline to request a cash-out of 2020 purchased vacation through eTime is November 15th. If you miss this deadline, please contact the HR Direct Service Center by November 30th and they will process the request for you. If you intend to use your purchased vacation in December, these hours must be entered into eTime by December 20th or you will automatically receive a cash-out of unused purchased vacation in your last pay of the year.

Refer to the Vacation Buying Guide in the Benefits Library section of this site for additional information.

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Enroll

Choose Well With Useful Tools

What to Expect After You Enroll

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Enroll

Beginning Wednesday, October 28, 2020, at 9:00 a.m., Eastern Time (ET), you can review and enroll in your DuPont 2021 benefits coverage through DuPont Connection.

Online: http://digital.alight.com/dupont

Take action with your health and insurance benefits using this personalized website no later than **Tuesday, November 10, 2020 at 11:59 p.m., Central Time (CT)**. It gives you the benefits information you need and makes enrollment easy and quick. For enhanced security, you will be required to set up a new password for the site (your user ID will remain the same). Your password for the website will expire every 90 days. After the 90 days, you can also log on to DuPont Connection via Single Sign-On (SSO) using your Azure Multi Factor Authentication (MFA).

Once you're logged on, follow the instructions that pop up on your screen to enroll. If you experience any problems enrolling through the website, call **DuPont Connection at 1-833-253-7719.**

By Phone: 1-833-253-7719

Call **DuPont Connection** and a representative will guide you through the enrollment process and take your elections by phone. Representatives will be available Monday through Friday, from 9:00 a.m. to 6:00 p.m. ET. Language assistance is available.

When you call, you'll be asked to confirm your identity by entering your date of birth and, in some cases, your Social Security number. Then say "Annual Enrollment" for enrollment assistance. (You may also need to set up a separate, new PIN when you call. Follow the instructions when prompted on **DuPont Connection**.) You'll then be connected to a representative.

Using DuPont Connection for the First Time

If you are using **DuPont Connection** for the first time, you will need to create a user ID and password.

Here's how:

Go to DuPont Connection at http://digital.alight.com/dupont; and

• At the logon page, simply click on the "Are you a new user?" link.

You will be asked to provide the last four digits of your Social Security number and your date of birth to establish your user ID and password.

Once you're logged on, click "Make Your Annual Enrollment Choices" in the message box that pops up on your screen.

If you haven't set up your password online, enter your home ZIP code. You'll also be prompted to create a password, which will expire every 90 days. You'll use your password when you log on to or call **DuPont Connection**. (If you have trouble creating a password, you can still speak to a representative who will help you create it.)

Count on Accolade for Annual Enrollment Support, Too!

Starting October 19, call Accolade at **1-877-383-4756** to be connected with your **Accolade Health Assistant.**

Your Health Assistant can explain the medical plan changes for 2021, help you understand and compare your medical plan options, confirm if your provider will be in-network in 2021, and help you choose your medical coverage for next year.

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Choose Well With Useful Tools

In addition to viewing and managing your benefits, a variety of easy-to-use tools will be available on **DuPont Connection** during Annual Enrollment to help you choose the benefits that are right for you and your family next year, including:

- 2021 DuPont benefits website: Connect to dupontbenefits.com through DuPont Connection.
- Health Plan Comparison Chart: View a side-by- side comparison of key plan provisions
 such as coinsurance, deductibles, out-of-pocket maximums, and prescription drug coverage.
- **Medical Expense Estimator**!: Estimate your total annual expenses under each medical option including both the out-of-pocket costs you pay when you receive care and your monthly premiums.

What to Expect After You Enroll

If You	You Will Receive
Enroll online through DuPont Connection	A confirmation of enrollment emailed to your preferred email address if you have an electronic delivery preference, or mailed to your home address during enrollment.
Enroll by phone through DuPont Connection	A confirmation of enrollment emailed to your secure mailbox on DuPont Connection if you have an electronic delivery preference, or mailed to your preferred address.
Add a new dependent to coverage	In mid-January, the Dependent Verification Center will reach out to you by mail and ask you to submit proof of your dependent(s)' eligibility, such as a birth or marriage certificate, domestic partnership certificate, or an Affidavit of Domestic Partnership. If you enroll a domestic partner, the Affidavit of Domestic Partnership must be completed, notarized, and returned to the Dependent Verification Center, along with two forms of proof of financial interdependency and other documents when requested.
Take no action during Annual Enrollment	A confirmation of enrollment mailed to your preferred email address after the enrollment period ends.

^{1.} Not available to employees in Puerto Rico. and on international assignment.

ID Cards

New medical ID cards will be mailed to you in December.

• As mentioned, because Accolade will be your main contact for all of your medical, prescription drug, and behavioral health/substance abuse care needs beginning in 2021, you'll see Accolade's phone number on your new Aetna medical plan ID card.

During the year, you can also access your ID cards on your carriers' websites or on your smartphone.

If you participate for the first time in 2021 in the Health Savings Account (HSA), Limited Purpose Health Care or Traditional Health Care Flexible Spending Account (FSA), or Dependent Care FSA through Bank of America, a Welcome Letter and new debit card will also arrive in the mail from Bank of America after you enroll. You will receive and need only one card if you have any combination of HSA or FSA accounts through DuPont and can use the same card to access funds.

If you are participating in any accounts for 2020 and already have a debit card, continue to use your existing card in 2021 (or until the card expiration date) — even if you enroll in the Traditional Health Care FSA for the first time in 2021.

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Other Important Plan Information

Resources

Your 2021 Benefits Resource Contact List

If You Need Information About	For 2021, Contact
Your DuPont benefits, including enrolling in, confirming, or making changes to your health and insurance elections	DuPont Connection 1-833-253-7719 • http://digital.alight.com/dupont
Core, Premium Saver, and Traditional Copay medical plan options	Accolade 1877-383-4756 · member.accolade.com
	Aetna www.aetna.com
Prescription drug benefits	CVS Caremark 1-844-212-8696 · www.caremark.com
Coverage for specialty medications	CVS Specialty 1-800-237-2767
Health Savings Accounts (HSA), Limited Purpose Health Care Flexible Spending Account (FSA), Traditional Health Care FSA, and Dependent Care FSAs	Bank of America 1-877-319-8115 · https://myhealth.bankofamerica.com
Dental benefits	MetLife 1-855-638-3944 · www.metlife.com/mybenefits
/ision benefits	VBA 1-800-432-4966, Option 5 • www.vbaplans.com
Estimating how much life insurance you may need	Securian Financial www.LifeBenefits.com/insuranceneeds
Travel assistance	Securian Financial www.LifeBenefits.com/travel
Legacy planning	Securian Financial www.securian.com/legacy
Healthy Living Program	Virgin Pulse 1-888-671-9395 · www.myhealth.dupont.com
Legal Plan	MetLife 1-855-638-3944 · www.metlife.com/mybenefits Info.legalplans.com (for information prior to enrollment)
Employee Assistance Program (EAP)	ComPsych 1-800-435-7266 · www.guidanceresources.com Access Code: DUPONTEAP (Employees in Puerto Rico should call 1-800-948-3913)
Teladoc®	Teladoc 1-800-TELADOC (1-800-835-2362) • www.teladoc.com/dupont
Pet Insurance	Nationwide® 1-877-738-7874 · http://benefits.petinsurance.com/dupont

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Other Important Plan Information

Other Important Plan Information

Summaries of Benefits and Coverage (SBCs)

The federal government requires all employers and insurers to provide a Summary of Benefits and Coverage (SBC) for each medical plan option. All employee medical plans across the country must produce an SBC using identical format, wording, and coverage examples. This allows you to compare the DuPont Medical Plan options with other employer and individual medical plans that may be available to you. For more information on the benefit plan options offered by DuPont, please refer to this Enrollment Guide and Summary Plan Descriptions on the **DuPont Connection** website.

Any inconsistency between the SBC and the Plan Documents will be governed by the Plan Documents. Visit **DuPont Connection** at **http://digital.alight.com/dupont** for the applicable DuPont SBCs. You may also receive paper copies, free of charge, by calling **DuPont Connection** at **1-833-253-7719**. SBCs for 2021 will be available by mid-October.

Women's Health and Cancer Rights Act of 1998 (WHCRA)

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- · Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. Therefore, deductibles and coinsurance apply. If you would like more information on WHCRA benefits, call your medical carrier.

Summary Plan Descriptions (SPDs)

For more detailed summaries of all of your benefit plans, see the Employee Health, Insurance, and Other Benefits Summary Plan Description (SPD) available on **DuPont Connection** at http://digital.alight.com/dupont. Like SBCs, any inconsistency between the SPD and the Plan Documents will be governed by the Plan Documents.

Any descriptions of benefit plans contained in this document provide only general information. Employees should refer to the plan document and summary plan description of the applicable plans for a more complete description of the plans' terms. If there is any conflict between (a) the information provided in this document, and/or any other oral or written representations made by anyone regarding a plan, and (b) the legal documents of a plan (including the plan document or summary plan description for the applicable plan), the plan legal documents will govern. DuPont reserves the right to amend, modify, or terminate any compensation or benefit program at any time. This document does not create any third-party beneficiary rights or alter one's status as an "at will" employee of DuPont, as applicable. It does not alter one's terms or conditions of employment with DuPont in any way. This document is subject to applicable laws and applicable collective bargaining agreements and collective bargaining obligations.

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