

U.S. Assignees & Rotators Guide



Using this guide

Explore this interactive guide to understand your benefit plan options, the dependents you may cover, and the steps you need to take to enroll. You can read it front to back like a booklet or click a link for specific topics.

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Newly hired or transferred?

You must enroll within 60 days to participate in Health and Protection benefits.

For more detailed plan information, please refer to the appropriate Heath & Welfare and 401(K) Plan Summary Plan Descriptions on **BakerHughesBenefits.com/Assignee/US**.

This guide outlines the benefits offered to Baker Hughes for employees hired under legacy Baker Hughes legal entities. Employees who are hired under other legal entities may have a different benefit package offered. Please contact your Human Resources representative if you have questions.





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Medical

Please note that you'll always save with network providers. Our Medical plan allows you to receive medical care through the Cigna network of physicians, specialists, hospitals, and clinics at prenegotiated fees, which are usually lower than what you'd pay outside the network.

The chart below details some of the highlights of your medical coverage.

Plan feature	International	U.S. In-network	U.S. Out-of-network
Lifetime maximum	Unlimited	Unlimited	Unlimited
Deductible	No deductible	\$350 Individual/\$700 Family	\$350 Individual/\$700 Family
Coinsurance	100% of covered expenses	80% after plan deductible	60% after plan deductible
Preventive care	100% covered expenses	100% covered expenses	60% after plan deductible
Physician office visit	80% of covered expenses	80% after plan deductible	60% after plan deductible
Emergency Room	100% of covered expenses	80% after plan deductible	80% after plan deductible
Outpatient surgery	100% of covered expenses	80% after plan deductible	60% after plan deductible
Inpatient hospital	100% of covered expenses	80% after plan deductible	60% after plan deductible
Out-of-pocket maximum	In the US: \$2,350 Individual/\$4,700 Family Outside the US: \$2,000 Individual/\$4,000 Family		
Prescription Drug coverage	When you enroll in Medical, you automatically receive Prescription Drug coverage. Refer to the Prescription Drug Section for details.		

Save money on healthcare!

Take advantage of benefits that can help lower your out-of-pocket expenses, such as using network providers, in-network preventive care that's covered at 100%, and the Flexible Spending Accounts.

Learn More 🌐





Deductibles, coinsurance, and out-of-pocket maximums

Understanding Medical plan terminology will help you get the most from your health care dollars.

Medical			
Telemedicine		G	<u>L</u>
Prescription Drug			
Dental	Deductible	Coinsurance	Out-of-pocket maximum*
Vision			
Flexible Spending Accounts Advocacy	This is the amount you must pay each year before the plan begins to pay for services. The lower the deductible, the higher the premium you'll pay each	Coinsurance describes the cost-sharing between you and the plan for eligible expenses. For example, after you've satisfied your annual	This is the most you'll pay out of your own pocket (coinsurance and deductibles) in a year. Once you reach the out-of-pocket maximum, the plan pays 100% of the eligible
ISOS	paycheck.	deductible, you pay 20% coinsurance and the plan pays 80% coinsurance for in-network expenses, up to plan limits.	expenses for the rest of the year.

*Each covered person has an individual deductible and an out-of-pocket maximum, which can be met without reaching the Family limit. Once two or more individuals reach the Family deductible or out-ofpocket maximum, the individual limits no longer apply. $\mathbf{O} + \mathbf{O} + \mathbf{O} + \mathbf{O} = \mathbf{Family}$





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You and CignaLinks

CignaLinks, part of the Cigna Global Health Benefits, is a collaboration between Cigna and local health care insurers or administrators. The program enhances quality and service by providing access to local health care administrators in selected countries while maintaining the benefits and advantages of a global plan. When you access care through a CignaLinks doctor or hospital, you will benefit from higher discounts and less paperwork.

If you are an employee who is on assignment, rotating, or you are a local national from a CignaLinks country, you will automatically be enrolled in the CignaLinks program. You may be required to fill out some additional paperwork. Cigna or Human Resources will contact you if this is necessary and will provide all the details.

CignaLinks networks are currently available in the United Kingdom, Australia, Hong Kong, the Middle East (Saudi Arabia, United Arab Emirates, Kuwait, Bahrain, Oman, and Qatar), Canada, Singapore, China, Macau, Indonesia, Taiwan, Malaysia, Brazil, Spain, South Africa, and Nigeria. Customers in China and Taiwan have access to the provider network in Hong Kong and customers in Malaysia and Indonesia have access to the provider network in Singapore.

CignaLinks ID cards

For employees in Australia, the Middle East, Canada, Spain, Brazil, or Africa (South Africa and Nigeria), you will receive two cards—your Cigna Global Medical ID card and a separate card for the local insurance carrier. Make sure and use your local ID card when making claims in those countries. You will receive a dual-branded ID card for Greater China, Southeast Asia, and the United Kingdom.



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Learn more about your Medical benefits

- Register with Cigna at **www.cignaenvoy.com** after your hire date or transfer date (allow approximately two weeks for your enrollment to be updated with Cigna)
- Search for doctors in the Cigna network
- Order replacement ID cards or print a temporary ID card
- Make real-time inquiries into the status and history of your Medical, Vision, or
 Prescription Drug claims
- · Access health and well-being information





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Telemedicine

Telemedicine is a form of virtual health that allows you to see or talk to doctor from your mobile device or computer.

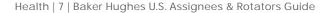
What's covered by Cigna Global Health Benefits®?

- Telemedicine services are covered at the same coverage level and cost share as the same service if rendered through in-person consultation or contact subject to the same medical necessity criteria.
 - Must be provided by an appropriately licensed and credentialed health care professional (including primary care physicians and mental health professionals, etc.).
 - Coverage is provided per the terms and conditions of the policy and the health care professional's or vendor's contracting status: In- or out-of-network.
- Health care professionals, such as mental health professionals, primary care physicians, etc., may provide consultations via telemedicine.
- Telemedicine vendors, such as MDLIVE, Relay for Health, AmWell, etc., provide services for minor, non-urgent conditions.

Who can use telemedicine and how can they access services?

U.S. inpatriates (non-U.S. employees on an expatriate assignment in the U.S.), Third Country Nationals (non-U.S. employees on assignment in a country other than the U.S.) and U.S. expatriates (U.S. employees on assignment outside the U.S.) are eligible. This is how you can access services:

- Access services from any health care professional inside or outside the U.S. home country or locally via web, email, phone, etc.
- Be aware of potential treatment limitations (including prescriptions) when seeking services from a remote health care professional.
- Access services from a local telemedicine vendor for minor, non-urgent care.
- For employees not located in the U.S., we do not recommend seeking services from a U.S. telemedicine vendor due to licensing regulations and treatment limitations.





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Prescription Drug coverage

Prescription drugs can be essential for treating a variety of conditions and we all need them occasionally. They're also expensive, which is why Baker Hughes provides Prescription Drug coverage automatically with your medical coverage.

Because prescription drugs are a key driver of higher health care costs, it's smart to ask your doctor to prescribe generic equivalents whenever possible. Generics work the same as (or similar to) the more expensive brand-name drugs, but cost you—and Baker Hughes—much less.

Under the Cigna International plan, you automatically receive Prescription Drug coverage through Cigna, both within and outside the U.S.

Cigna Prescription Drug coverage (outside of the U.S.)

Under this plan, you will pay 20% coinsurance up to the \$2,000 Individual or \$4,000 Family out-ofpocket maximum (combined with Medical). In addition, please note that you will pay the full price of the prescription drug at the time of purchase then submit a claim form for reimbursement.

Cigna Prescription Drug coverage (within the U.S.)

While in the U.S., your prescription drug cost will vary depending on whether the prescribed medication is a generic, formulary brand, or a non-formulary brand drug. The cost for each drug category is shown on the next page.





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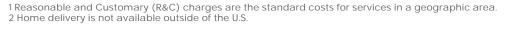
Prescription Drug costs

Prescription Drug coverage	Cigna International Prescription Plan (within the U.S.)²	Cigna International Prescription Plan (outside the U.S.)1
Deductible	N/A	N/A
Retail – generic	\$7 copay	
Retail – formulary brand	25% (\$30 minimum/\$60 maximum)	20% coinsurance (R&C applies) ¹
Retail – non-formulary brand	30% (\$60 minimum/\$100 maximum)	
Retail or Mail – specialty	30% (\$150 maximum)	N/A
Mail order or retail – generic	\$21 copay	
Mail order or retail – formulary brand	25% (\$90 minimum/\$180 maximum)	N/A
Mail order or retail – non-formulary brand	30% (\$180 minimum/\$300 maximum)	
	In the US: \$2,350 Individual/\$4,700 Family	In the US: \$2,350 Individual/\$4,700 Family
Out-of-pocket maximum	Outside the US: \$2,000 Individual/\$4,000 Family	Outside the US: \$2,000 Individual/\$4,000 Family
	Separate from Medical. Included in Medical out-of-pocket maximum.	Included in Medical out-of-pocket maximum.
ID card	Same card as Medical	Same card as Medical

Helpful Tip

Learn More 🌐

You automatically receive Prescription Drug coverage with your Cigna Medical plan.





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Cigna Dental

Good dental health is about more than a great smile

There's a clear medical connection between dental health and your overall health. Our Dental plan encourages preventive and diagnostic dental care and provides coverage for basic and major dental care as well as orthodontia services.

You can visit any licensed dentist you wish. However, if you use a dental provider who participates in the Cigna PPO network, you may pay less for care. There's no penalty for using a non-network dentist, but Cigna won't pay expenses that exceed the Reasonable and Customary (R&C) allowable amounts.*

When you incur a dental expense, you pay the full cost at the time of service unless you use a Cigna dental provider. You will need to file a claim through Cigna in order to be reimbursed. The claim form is the same one used for medical claims. If you have a question about a specific treatment, contact Cigna. Once you reach the annual dental maximum benefit, expenses will not be covered for the remainder of the plan year.

Type of service	Plan pays
Routine preventive services	100%
Basic care services	80%
Major care services	50%
Orthodontia (for dependent children under age 19 with a \$1,500 orthodontia lifetime maximum per child)	50%

Annual dental maximum benefit of \$1,500 per person (applies to preventive, basic, and major services combined)

*R&C allowable amounts are the standard costs for services in a geographic area.

Learn More 🌐





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Vision

Under the Cigna Worldwide plan, you automatically receive vision coverage. This coverage is designed to help you and your family take care of your vision needs anywhere in the world.

When you receive vision care services, you pay the full cost at the time of service. You will then submit a claim form to Cigna for reimbursement. The claim form is the same one used for medical claims. Cigna will reimburse expenses for routine vision exams and medically necessary care, but not cosmetic work. **Each covered member receives 100% of covered vision services up to \$350 per calendar year worldwide**.







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Flexible Spending Accounts

Nobody likes paying more in taxes than necessary. That's the idea behind Flexible Spending Accounts (FSAs). FSAs let you use pre-tax dollars to pay your share of eligible health care and dependent care expenses.

Remember these two important rules:

- Claims must be incurred during the plan year (January 1–December 31) and submitted to UHC by March 31 of the following year to be eligible for reimbursement.
- Due to IRS regulations, any amount left in your account at the end of the year will be forfeited.

How they save you money

You figure out how much you want to set aside each year and your contributions are deducted from each paycheck before taxes. That means you don't pay federal income tax, Social Security tax, and, in most cases, state income tax on your contributions.

Check It Out!

The amount you elect to contribute to a Flexible Spending Account is deducted equally from each paycheck. If you enroll after January 1, the amount of your FSA contributions is divided by the number of benefits-eligible pay periods remaining in the year. If your goal amount is not equally divisible by the number of pay periods, your actual contributions may be slightly less or more than your goal amount. You will be reimbursed up to the elected goal amount.





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Flexible Spending

Choose one or k	ooth FSAs
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Participation in the FSAs is completely voluntary. There are two FSAs available to you:

Health Care FSA		 Dependent Care FSA Use your pre-tax contributions to reimburse yourself for eligible dependent care expenses (not health care expenses) you incur, such as expenses for a qualifying day care or nursery school, so that you and your spouse (if any) can work or attend school full time. Dependents can be your children under age 13, or a dependent who lives with you and is physically or mentally incapable of self-care, regardless of age. The money must actually be in your account before you can be reimbursed. You do not need to be enrolled in a Baker Hughes health plan to participate in the Dependent Care FSA. 	
 You can only enroll in the Health Care FSA if you enroll in the Standard Plan or if you waive Medical plan coverage. Use your pre-tax contributions to reimburse yourself for eligible health care expenses you incur for you and your eligible dependents, such as your deductible, coinsurance, or other expenses not covered by a health care plan. You do not need to be enrolled in a Baker Hughes health plan to participate in the Health Care FSA. But, if you are enrolled, you cannot be enrolled in an HSA at any point during the year. You can be reimbursed for eligible expenses before the money is in your account, up to the total amount you elect to contribute for the year. Medical and Prescription Drug claims are submitted automatically. WW 			
Minimum contribution	\$60	Minimum contribution	\$300
Maximum contribution	\$2,750	Maximum contribution	\$5,000 for single taxpayers and for married taxpayers filing a joint return ⁴ \$2,500 for married taxpayers filing separate returns ⁴





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Benefits issues? Contact Advocacy.

The confidential participant Advocacy service can help you with unresolved health plan access or claims issues with your Medical, Prescription Drug, Dental, and Vision.

Advocacy will research your issue and work directly with the Claims Administrator and/or provider to resolve it on your behalf.

Before you request assistance from Advocacy, you must make at least one attempt to resolve the issue directly with the appropriate Claims Administrator and/or provider. After this attempt, if your issue is still unresolved, call the Baker Hughes Benefits Center.

A Baker Hughes Benefits Center representative will review the issue to determine next steps. If the issue requires Advocacy assistance, the representative will forward your issue to an advocate who will begin research. The advocate will contact you within two business days to provide an update on your issue.







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International SOS (ISOS)

Baker Hughes has contracted with ISOS to provide emergency evacuation services when adequate medical care is not available locally. Baker Hughes employees and their dependents on international assignment and/or traveling on company business are covered under the ISOS contract. ISOS provides the following medical, security, and travel assistance to Baker Hughes travelers and expatriates. You can:

- Speak to an Englishspeaking doctor 24 hours a day, 7 days a week
- Request a dispatch of prescription medication
- Get referrals to a doctor or dentist for emergencies
- Secure an evacuation or repatriation in the event of a serious injury

- Access country-specific information
- Check travel information in over 200 countries
- View summarized reports of health risks and situations around the world
- Check information on medical care and vaccination requirements
- Sign up to receive email health alerts that send travel health information to your PC, laptop, or wireless device

How to Use International SOS

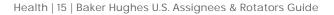
International SOS (ISOS) is the world's leading provider of medical assistance, security services, and outsourced customer care. The ISOS network includes a multilingual staff that operates 24 hours a day, 365 days a year.

In the event of an emergency, contact the nearest ISOS Alarm Center. If calling from Europe, the U.S., Africa, or the Middle East, call +44 20 8762 8008. If calling from Asia, Australia, or the Pacific Rim, call +65 6338 7800(call collect where available).

When placing a call to ISOS, make sure to provide the Baker Hughes membership number: 1CPA984.

Via Internet: www.internationalSOS.com (input membership number 1CPA984)

- Obtain destination reports
- Locate country guides
- Obtain health and travel security reports and warnings





Life Insurance Benefits

Accident (AD&D) Insurance Benefits

Business Travel Accident Insurance

Disability Benefits

Most people understand the need for life insurance, but if you're unable to work because of an illness or injury, the bills will keep coming even though your paycheck won't.

That's where Baker Hughes disability benefits can help. There are two kinds of disability coverage: Salary Continuation and Long-Term Disability.

Salary Continuation

Baker Hughes helps you prepare for unexpected absences by providing you with Salary Continuation at no cost to you.

The plan provides the continuation of your base pay during a disability for a period of up to 90 days or until recovery, whichever is earlier. If you are disabled for longer than 90 days, you may be eligible for Long-Term Disability.

Note: If an employee returns to his or her home country while receiving Salary Continuation, his or her hardship and Goods and Services allowance is stopped.





Life Insurance Benefits

Accident (AD&D) Insurance Benefits

Business Travel Accident Insurance

Long-Term Disability (LTD)

Becoming permanently disabled or having an extended disability can have devastating financial implications. Few people can afford to stop working for an extended period of time.

The LTD plan provides you with the continuation of a portion of your benefits base pay after a period of 26 weeks (the maximum benefit period for STD). Baker Hughes pays the full cost of this coverage:

LTD

- Pays 60% of your benefits base pay
- Maximum of \$25,000 per month*
- Up to age 65 or recovery per the terms

*Subject to a reduction by deductible sources of income or other disability earnings.

What is benefits base pay?

Benefits base pay means your base annual earnings, including any before-tax contributions you make through the benefits program. This does not include any overtime pay or bonuses. For certain benefit rate calculations, your benefits base pay is determined either in September, your date of hire, or your transfer date, whichever is later. Some field employees may have a gross-up rate in place of base salary.



Disability Benefits

Life Insurance Benefits

Accident (AD&D) Insurance Benefits

Business Travel Accident Insurance

Life Insurance Benefits

Nobody likes to think about it, but it's important to provide your family with some financial security in the event of your death.

Basic Life insurance

Baker Hughes pays the full cost of this benefit, which is based on your benefits base pay:

Your age when you die	Benefit amount
Under age 70	2x benefits base pay, rounded to the next higher \$1,000 if not already a multiple thereof (minimum \$50,000; maximum \$3 million)
Age 70 or over	Coverage is reduced by 50% the first of the year following your 70th birthday

Learn More 🌐

What is imputed income?

The IRS requires income tax to be paid on the premiums Baker Hughes pays on your behalf for employerpaid life (and Perquisite Life) insurance greater than \$50,000, which is known as "imputed income."

This taxable income is applied each pay period. Here are two things to remember about life insurance benefits and imputed income.

- The life insurance benefits themselves are not taxable.
- You pay income tax only on the premiums, not on the amount of the benefit.

For example, for \$100,000 in coverage on a 45-year-old employee, imputed income on the premium is only \$90 per year. You may elect to limit or cap your Basic Life insurance coverage at \$50,000 to avoid imputed income.

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Life Insurance Benefits

Accident (AD&D) Insurance Benefits

Business Travel Accident Insurance

Supplemental Life Insurance

You can buy additional life insurance for yourself, your spouse, and eligible dependent children through the Supplemental Life insurance plan. Depending on the amount of coverage you elect, you and/or your spouse may be required to provide Evidence of Insurability (EOI).

Coverage type	Coverage amount
Employee coverage*	1x to 8x benefits base pay rounded to the next higher \$1,000 if not already a multiple thereof (up to a maximum of \$2.5 million)
Spouse coverage	Choose from these benefit amounts:
Spouse coverage cannot ex-	• \$25,000 • \$50,000 • \$75,000 • \$100,000
ceed 100% of an employee's total life insurance coverage.	• \$150,000 • \$200,000 • \$250,000
Dependent child coverage	\$10,000 per covered child
You may elect child life coverage for your eligible dependents even if you are not enrolled in employee Supplemental Life.	If both you and your spouse are Baker Hughes employees, each of you and any of your dependents can be covered only once under the Supplemental Life insurance plan. Coverage can be through you or your spouse or a combination of the two of you, so long as no person is covered more than once, including your dependents.

*Coverage amount is reduced by 50% the first of the year following your 70th birthday.

What is EOI?

To elect certain supplemental insurance coverage levels, you (and your spouse) may be required to provide proof of good health, also known as Evidence of Insurability (EOI). If you are required to complete EOI, you will be notified at the time of enrollment.





Life Insurance Benefits

Accident (AD&D) Insurance Benefits

Business Travel Accident Insurance

Accidental Death & Dismemberment

This plan pays a benefit in the event of the accidental death, dismemberment, or paralysis of you or a covered family member.

The benefit is paid in addition to any life insurance you have. Baker Hughes pays the full cost of Basic AD&D coverage, and you can purchase Voluntary AD&D coverage for yourself and your family.

Basic AD&D insurance

The basic benefit is equal to 2x your benefits base pay rounded to the next higher \$1,000 if not already a multiple thereof (minimum \$50,000; maximum \$3 million).

If you elect to cap your Basic Life insurance coverage at \$50,000 to avoid imputed income, your Basic Accidental Death & Dismemberment coverage will also be capped at \$50,000.





Accident (AD&D) Insurance Benefits

Business Travel Accident Insurance

Life Insurance Benefits

Voluntary AD&D insurance

You pay the full cost of this coverage.

Coverage type	Coverage amount	
Employee coverage	Choose from these coverage amounts:	
	• \$25,000 • \$150,000	
	• \$50,000 • \$200,000	
	• \$100,000 • \$250,000	
	Amounts in excess of \$250,000 may not exceed 10x your benefits base pay.	
Employee + Family coverage	Based on the coverage levels above, if you elect Family coverage, the spouse and children benefit will be:	
	Spouse only – 50% of employee coverage amount	
	 Children only — 15% of employee coverage amount, up to \$20,000 per child 	
	 Spouse and children — 40% of employee coverage amount for your spouse and 10% of employee coverage amount for your children (up to \$20,000 per child) 	

Check it Out!

If both you and your spouse are Baker Hughes employees, each of you and any of your dependents can be covered only once under the Voluntary AD&D plan. Coverage can be through you or your spouse or a combination of the two of you.







Life Insurance Benefits

Accident (AD&D) Insurance Benefits

Business Travel Accident Insurance

Business Travel Accident insurance

The Business Travel Accident (BTA) insurance plan provides protection and peace of mind while traveling on company business.

BTA insurance provides an additional level of coverage in the event of your accidental death, dismemberment, or paralysis while traveling on authorized Baker Hughes business. BTA coverage is provided at **no cost to you**.

Coverage type	Coverage amount
Employee coverage	Coverage is up to 5x benefits base pay rounded to the next higher \$1,000 if not already a multiple thereof (minimum \$50,000; maximum \$3 million)
Spouse coverage (during relocation)	\$25,000
Dependent child coverage (during relocation)	\$10,000





Employee Stock Purchase Program

401(k) Plan

The Baker Hughes 401(k) Plan ("the 401(k) Plan") offers the opportunity to build financial security and retirement income for you and your family through a combination of your own and company contributions. Please refer to the **Summary Plan Description** posted on **BakerHughesBenefits.com** in the online Guide for more information.

Not only does the company double your money on the first 5% of pay you contribute each pay period, the company also makes a base contribution that kicks your savings into high gear.

Automatic enrollment and auto escalation

If you don't enroll or don't decline enrollment, you'll automatically be enrolled in the plan at a before-tax rate of 3% with a 3% company matching contribution. Amounts contributed through automatic enrollment will be invested in the 401(k) Plan's default fund—the the Target Date Fund based on your estimated retirement age.

Your contribution election will automatically increase annually by 1% until it reaches 10%. These auto-escalation increases typically occur during the first quarter of each year.

Remember, you may change your contribution rate and investment elections at any time. Visit **BakerHughesBenefits.com/assignees/us** to access your 401(k) account.





Employee Stock Purchase Program

401(k) Plan (continued)

Your contributions

You make contributions to the Baker Hughes 401(k) Plan through convenient payroll deductions.

You choose:

- How much to save, from 1% to 50% of total eligible pay
- If you want to save with before-tax, Roth, after-tax contributions, or a combination of all

Eligible pay includes all of your pay listed below that is paid up through the last payroll period in which termination occurs:

- Your regular base pay
- Overtime pay
- Shift differentials
- Commissions
- · Eligible bonuses paid during the year

The Internal Revenue Service (IRS) limits your before-tax and Roth contributions to \$19,500 in 2021. This includes any before-tax and/or Roth contributions you made to another employer within the same year.

Employee catch-up contributions

If you are age 50 or over on January 1, 2021, or will be turning age 50 in 2021, you are eligible to make additional pre-tax and/or Roth contributions into your 401(k) Plan account up to a maximum of \$6,500 in 2021. Catch-up contributions will be deducted at the same time as your 401(k) Plan contributions. This means if you elected to contribute 10% into the 401(k) Plan and 10% catch-up, your paycheck will be reduced by 20%. These contributions are separate election options and are not subject to employer matching contributions.





Employee Stock Purchase Program

Company contributions

The company helps you save for your future by making the following contributions:

Company base: The company will automatically contribute an amount equal to 4% of your eligible pay to your account each pay period, whether or not you contribute.

Company matching: For every dollar you save each pay period up to 5% of your eligible pay, the company will provide matching contributions of a dollar.

Vesting

You are always fully vested in your own contributions, the company's matching contributions, and any related earnings. Being "fully vested" means the money is yours to keep, even if you leave the company. You become 100% vested in the company base contributions and any related earnings when you:

- Complete three years of vesting service, or
- Retire from the company, or
- · Reach age 65 while still an active employee of the company, or
- Become permanently disabled or die while an active employee of the company.

Have money in another employer's 401(k)?

You can roll over your account from a previous employer's qualified plan or certain IRAs into the 401(k) Plan. For details, see the **Summary Plan Description** posted on **BakerHughesBenefits.com** in the online Guide or call the Baker Hughes Benefits Center at **1-866-244-3539** and press 2 with speak to a 401(k) representative.



Learn More 🌐



Employee Stock Purchase Program

Investment options

Whether you're a savvy investor or want a simplified approach to making investment decisions, the 401(k) Plan has got you covered with two distinct types of investment funds. Which approach you choose will depend on your comfort level with making investment decisions and how much time you want to devote to managing your investments.

Target Date Funds

Target date funds are designed to simplify your investment decisions by providing an investment option with an asset allocation that is appropriate for your age. The year in the Baker Hughes Target Date Funds refers to the approximate year (the target year) when you would retire and leave the workforce. You choose the Target Date Fund with the date closest to the year of your target retirement date (for many people, this may be age 65).

Each Target Date Fund begins with a larger allocation to aggressive (growth) investments, such as stock, when the target date is further off. This is because you have a longer period of time to ride out any short-term ups and downs in the market to gain more earnings on your investments over the long-term. The asset allocation for the Target Date Funds gradually changes over time to more conservative (income) investments, such as bonds and cash, which provide more stability as you get closer to your retirement date and your investment horizon shortens.

Core Funds

VS.

If you want more involvement in choosing and managing your investment mix, the 401(k) Plan offers seven Core Funds from which you can choose to build your own portfolio.

In choosing your own portfolio from the Core Funds, you should consider your retirement financial goals, risk tolerance, and time horizon.

Helpful Tip

For resources and tools that can help determine the investment strategy that's right for you, go to **BakerHughesBenefits.com/assignee/us.**

Naming a beneficiary

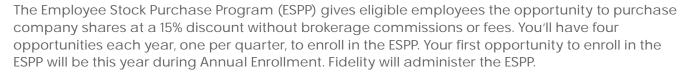
When you become a participant, you will have the ability to name a beneficiary. A beneficiary is the person you choose to receive your 401(k) Plan benefit in the event of your death. To designate a beneficiary, visit **BakerHughesBenefits.com/assignee/us** to access your 401(k) account or call the Baker Hughes Benefits Center at **1-866-244-3539** and press 2 to speak with a 401(k) representative.





Employee Stock Purchase Program

Employee Stock Purchase Program (ESPP)



Contributions are deducted on an after-tax basis from each paycheck based on your election of up to \$3,000 per quarter. Your contributions add up between the offering date and the purchase date. The purchase date for payroll contributions is the last day of March, June, September, and December on which trading in Baker Hughes common stock is conducted on the New York Stock Exchange.







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Your Baker Hughes benefits: The big picture

Sure, your paycheck is important. But there's so much more to your Total Rewards at Baker Hughes.

Baker Hughes offers a variety of benefits that help you manage and protect your health and your family's health.

Your benefits and compensation collectively form the Total Rewards you receive for working at Baker Hughes. Our Total Rewards package is not only competitive within our industry, it's designed to be comprehensive enough to meet the varying benefit needs of our employees.

Total Rewards at Baker Hughes

Your Total Rewards consists of base pay, benefits, and other compensation.

Baker Hughes role:	Your role:
 Provide quality benefits to protect you and your family and help you prepare for retirement. 	 Learn about and choose your benefit coverage carefully to meet your needs and your family's needs.
Ensure our programs are competitive in the marketplace and within our industry.	 Be a smart health care consumer. Get involved in your health care — ask
 Manage costs and plan designs to keep our programs sustainable over the long term. 	questions about treatment alternatives and provider quality and efficiency.
 Provide decision-making tools and other resources to help you choose and use your 	

Newly hired or transferred?

benefits wisely.

Your personal Total Rewards data will be available about 60 days after you enroll.

If you have questions about eligibility for any of your benefits, contact the Baker Hughes Benefits Center

🛛 Learn More 🌐



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Before you enroll

Take just a second to review this page to make sure you enroll, on time and get the coverage you need for yourself and your family.

Health and Protection benefits

- If you plan to cover dependents, make sure they're eligible.
- You have 60 days from your date of hire or transfer to enroll, or else you will receive default coverage.
- Once you receive your first paycheck, you can enroll in your benefits.

If you need medical care before you enroll in your health benefits:

- Call the Baker Hughes Benefits Center to have coverage verified with a provider, or
- Pay for the services yourself (you will be reimbursed for eligible expenses after you've enrolled)

Retirement benefits

Summary Plan Descriptions explain these plans in greater detail and are available online at **BakerHughesBenefits.com/assignee/us**

401(k) Plan

You can enroll in the 401(k) Plan and make changes to your elections at any time by visiting **BakerHughesBenefits.com/assignee/us** online or by calling the **Baker Hughes Benefits Center** during its hours of operation. If you do not enroll or if you do not decline enrollment in the 401(k) Plan, you will receive default coverage.

Employee Stock Purchase Program

Purchase company shares at a 15% discount without brokerage commissions or fees.

Explore this guide!

Even if you've enrolled for benefits before, it's smart to make sure you understand all of your Baker Hughes benefits.







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Planning to enroll dependents?

Learn More 🌐

These are considered eligible dependents for your Health and Protection benefits:

Family member	Eligibility requirements	
Your spouse	 Your legal spouse of opposite or same gender, including common law in states recognizing common law marriage, or a legally separated spouse in states recognizing legal separation 	
Your children	 Your dependent children up to age 26 regardless of whether they are married, full-time students, or eligible for other group health plan coverage 	
	 Your unmarried dependent children up to any age who are supported by you because of mental or physical disability; the disability must have occurred during the period in which they were an eligible dependent (up to age 26) 	

- Your biological children
- Your adopted children and children placed for adoption
- Your stepchildren
- Foster children in your care
- Any children for whom you have legal custody
- Any children for whom there is a Qualified Medical Child Support Order (QMCSO)
- Those who are in full-time military service
- Parents, siblings, grandparents, nephews, nieces, etc., under the Medical, Dental, or Vision plans. They may qualify under the Flexible Spending Accounts, but only if they meet the requirements. Refer to IRS publications 502 and 503 for additional information.
 - www.irs.gov/publications/p502
 - www.irs.gov/publications/p503

Helpful Tip

You'll need the Social Security Number (SSN) of any dependent you cover. If you have not received an SSN for a dependent by the time you enroll, be sure to update his or her information with the Baker Hughes Benefits Center once you receive it.

Be sure to update your beneficiaries for life insurance and AD&D insurance.

Check it out!

All Baker Hughes employees are required to comply with the dependent eligibility verification process for all dependents covered under the Baker Hughes Health & Protection benefit plans.



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How to enroll

Whether for the first time or during Annual Enrollment, enrolling is a snap — especially online!

There are two ways you can enroll in your benefits: online or by phone.

Online — BakerHughesBenefits.com/assignee/us	By phone — Baker Hughes Benefits Center
From BakerHughesBenefits.com/Assignee/US , click on <i>Enroll, Change, or Review</i> Benefits. And then select <i>Health & Protection Benefits</i> .	Call the Baker Hughes Benefits Center
The first time you access the enrollment system, you will need to create a new user ID and password. Here are the steps you will need to follow:	1-847-883-0945 (worldwide) 1-866-244-3539 (within the U.S.)
 You will need your work email, employee ID or Social Security Number to start the process. An email will be sent to the email address on file for you with an authentication code. Type that code into the box on the screen. 	Health & Protection representatives are available Monday - Friday, 7:00 a.m. to 7:00 p.m. CST.
 Then the site will ask you to type in a mobile phone number where you can receive a text. This is called multi-factor authentication. 	
 Check your text messages for a code to type into the box on the screen. 	
 Create a password at least eight characters long. The site will require you to include a combination of capital and lowercase letters, numbers, and symbols. 	
 Each time you log in, you will be required to use multi-factor authentication (sending your mobile phone a text with a code). 	
Access is available 24 hours a day, seven days a week.	
	1
Make Changes?	

During Annual Enrollment, if you wish to make changes, you must contact the **Baker Hughes Benefits Center** directly and speak with a representative.





How to enroll (continued)

There are two ways you can enroll in your benefits: online or by phone.

Picture	Online	By phone — Baker Hughes Benefits Center
ou Enroll	401(k) Plan	Call the Baker Hughes Benefits Center
g Dependents	From BakerHughesBenefits.com/Assignee/US , click on <i>Enroll, Change, or Review</i> Benefits. And then select 401(k) Plan.	1-847-883-0945 (worldwide)
Enroll	The first time you access the enrollment system, you will need to create a new user ID and password. Here are the steps you will need to follow:	1-866-244-3539 (within the U.S.) 401(k) representatives are available
u Enroll	Select REGISTER. This is where you'll create your 401(k) user ID and password.	Monday - Friday 7:00 a.m. to 9:00 p.m.
on't Enroll	 Create a username and password after providing required 5 data points (shown below) and entering a verification code sent to you by text or email. These are the five required data points: 	and Saturdays 8:00 a.m. to 4:30 p.m. CST.
inges	1. Social Security Number	
	2. ZIP / Postal Code	
es)	3. Last Name (generally includes suffix: e.g., JR. SR., III)	
	4. Date of Birth (MM/DD/YYYY)	
	5. Numeric portion of street address or P.O. Box	
	 For your added security, the system requires multi-factor authentication. Depending upon your situation, additional verification steps may be required to authenticate your identity. 	





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After you enroll

Enrollment confirmation

If you make changes to your elections during Annual Enrollment, you'll receive a confirmation statement of your health and insurance elections at your Baker Hughes email address. If you find any errors, contact the Baker Hughes Benefits Center immediately.

Insurance identification cards

If you are enrolling for the first time (or making changes during Annual Enrollment), you'll receive ID cards for these benefits as shown:

Benefit plan	Insurance ID card	Vendor
Medical plans	Yes	Cigna Global Health Benefits
Prescription Drug plans	Yes	Use your medical card
Dental	No	Cigna Global Health Benefits

You will not receive an ID card for the Vision plan or the Dental plan. In addition, you will not receive a card for the Flexible Spending Accounts.

Dependent eligibility verification

All Baker Hughes employees are required to provide proof of dependent eligibility for any new dependents added to coverage under the Baker Hughes Health & Protection benefit plans.

If you add dependents to your coverage, you will receive notification and information on the required proof of eligibility. If you do not submit acceptable documentation by the deadline provided, those dependents will be removed from the plans for which they were enrolled and will not have coverage.

Additionally, if a dependent becomes ineligible, you must notify the Baker Hughes Benefits Center immediately. Intentionally covering ineligible persons under these plans may be subject to discipline, up to and including termination.



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If you don't enroll

Benefit plan	Newly hired employees	Current employees who remain eligible but don't enroll during Annual Enrollment
Medical (includes Prescription Drug coverage)	You Only coverage*	Same coverage you currently have
Dental	No coverage	Same coverage you currently have
Flexible Spending Accounts (FSAs)	No participation	To continue participation in the Dependent Care FSA and the Health Care FSA, you must re-enroll during annual enrollment. If you do not re-enroll your coverage amount will default to \$0.
Salary Continuation	Automatic coverage	Automatic coverage
Long-Term Disability (LTD)	Automatic coverage	Same coverage you currently have

*You will need to pay for the default Medical and Prescription Drug coverage.

If you're an existing employee transferring within Baker Hughes, your default coverage may be different. Visit **BakerHughesBenefits.com/assignee/us** online or contact the **Baker Hughes Benefits Center** to verify your coverage.



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If you don't enroll (chart cont.)

Learn More 🌐

Benefit plan	Newly hired employees	Current employees who remain eligible but don't enroll during Annual Enrollmer
Accidental Death & Dismemberment (AD&D) insurance Automatic coverage (Basic only)		Same coverage you currently have
Business Travel Accident (BTA)	Automatic coverage	Automatic coverage
401(k) Plan	Automatic participation for employee before-tax contributions (3%), company match (3%), and company base contributions (4%) invested in a Target Date Fund based on your estimated retirement date. You will be enrolled in auto escalation, which automatically increases your contribution by 1% each year, to a maximum contribution of 10%.	Not applicable as 401(k) elections can be changed at any time

If you're an existing employee transferring within Baker Hughes, your default coverage may be different. Visit **BakerHughesBenefits.com/assignee/us** online or contact the **Baker Hughes Benefits Center** to verify your coverage.





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Making changes to your benefit elections

When life changes you can change your benefits as shown below by visiting **BakerHughesBenefits.com/assignee/us**.

Benefit plan	When changes can be made		
Health and Protection benefits	You can make changes during the Annual Enrollment period (typically held during October or November each year) for benefits effective January 1 of the following year.		
	You can also make modifications if you have a change in family status, such as the birth or adoption of a child, marriage or divorce, or if you have a change in employment status that affects your benefits eligibility. In most cases, you will need to notify the Baker Hughes Benefits Center within 31 days of the date of the change. The effective date will be the same day as the status change (for example, your baby's birth date or your date of marriage). For more information, access		
401(k) Plan	BakerHughesBenefits.com/assignee/us or call the Baker Hughes Benefits Center. You can make changes to your 401(k) Plan contribution amounts and investment elections at any time.		

If you leave Baker Hughes

If your active benefits terminate, you and your dependents may be eligible for continuation of Medical, Prescription Drug, Dental, Vision, and Health Care Flexible Spending Account benefits under the Consolidated Omnibus Budget Reconciliation Act of 1986 (COBRA). If you elect to continue any coverage under COBRA, you will automatically receive the Employee Assistance Program (EAP) at no additional cost.

For more information about COBRA, please refer to the Health & Welfare **Summary Plan Description** on **BakerHughesBenefits.com/assignee/us**.



Learn More 🌐



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2021 monthly premium rates

Here's how much you'll pay each pay period if you enroll in these health plans.

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family		
Medical Monthly Premium Rates						
Cigna International Medical	\$113	\$279	\$249	\$386		
Dental Monthly Premium Rates						
Cigna International Dental	\$9	\$20	\$26	\$37		

*The out-of-network plans have the same rates.

Baker Hughes pays the full cost of these benefits:

- Salary Continuation
- Core Long-Term Disability
- Basic Life insurance
- Basic AD&D insurance

- Business Travel Accident insurance
- 401(k) Plan company base contribution
- Long-Term Incentives







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Deduction Authorization

As a Baker Hughes employee, I understand that I may be eligible for Health and Welfare benefit coverage. Certain benefits are provided and paid for by Baker Hughes. Other plans and coverage levels require an employee contribution. Upon election of any level of coverage which requires an employee contribution via payroll deduction, I hereby authorize Baker Hughes to deduct the applicable contribution from my paycheck as required. I realize that premium amounts may be adjusted by the benefit providers/administrators or Baker Hughes and that I will be notified in writing of such changes.

Baker Hughes accepts no liability or responsibility for paying any employee portion of premiums. Paychecks are prepared biweekly. Depending upon timing of plan election, payroll deduction of retroactive premiums may be necessary.

If during the course of employment with Baker Hughes I am approved for a Leave of Absence (LOA), I understand I will be required to pay my employee contributions for coverage in place prior to leave. Payment of these premiums for continuation of coverages will be deducted from my paycheck. If I am not receiving pay during the leave, the benefit deductions will go into arrears and will be deducted from my regular pay upon my return to work.

Upon termination of employment, it may be necessary for Baker Hughes to deduct the remainder of any employee contributions for the current month's coverages, in addition to any outstanding amounts.



Resources



Benefit plan	Provider	Phone number	Website
Enrollment, Eligibility, Summary Plan Descriptions, and Advocacy	Baker Hughes Benefits Center	1-866-244-3539 or 1-847-883-0945 (worldwide)	BakerHughesBenefits.com/assignee/us
Medical (includes Prescription Drug, Dental, and Vision)	Cigna Worldwide	1-800-441-2668 (worldwide) 302-797-3100 (collect) 302-797-3150 (fax)	www.cignaenvoy.com
401(k) Plan	Baker Hughes Benefits Center	1-866-244-3539 or 1-847-883-0945 (worldwide)	BakerHughesBenefits.com/assignee/us
Flexible Spending Accounts (FSAs)	UnitedHealthcare (UHC)	1-866-743-6549 or 1-866-802-8572 (worldwide)	www.myuhc.com
Salary Continuation	HR Service Center	1-713-466-2050	BakerHughes.TotalRewards @bakerhughes.com
Long-Term Disability (LTD)	HR Service Center	1-713-466-2050	BakerHughes.TotalRewards @bakerhughes.com
Life and Accidental Death & Dismemberment (AD&D)	Baker Hughes Benefits Center	1-866-244-3539 or 1-847-883-0945 (worldwide)	BakerHughesBenefits.com/assignee/us
Employee Stock Purchase Program	Fidelity	1-800-544-9354 or 1-800-544-0275 (worldwide) or Visit <u>fidelity.com/globalcall</u> for local toll-free numbers	www.netbenefits.com









Contact information

This document includes information about the benefits programs offered by Baker Hughes. If you have difficulty understanding the information contained in this document, please contact the Baker Hughes Benefits Center.

Este documento contiene la informacion de los programas de beneficios de salud y bienestar de Baker Hughes. Si tuviera alguna dificultad para entender alguna parte de este documento, por favor contacte al Centro de Beneficos.

Tài liệu này có thông tin về Các Chương Trình Quyền Lợi về Y Tế & Phúc Lợi và Các Chương Trình Hưu Trí của Baker Hu Incorporated có hiệu lực vào ngày 1 Tháng Giêng, 2021. Nếu quý vị có bất cứ câu hỏi nào về thông tin trong tài liệu n xin liên lạc Benefits Center.

Please note that the information presented in this document is only a summary. The actual eligibility requirements, benefits, terms, conditions, limitations, and provisions that govern these plans are contained in the plan documents or group insurance contracts. If, in our efforts to make the plans easy to understand, any of the plan provisions have been omitted or misstated, the official plan documents or insurance contracts are the final authority. The legal documents also govern the administration of the plans and payment of benefits. In case of any dispute, the information in the plan documents or contracts will prevail. The company intends to continue the plans described in this document indefinitely. However, the company reserves the right to amend, cancel, change carriers, or discontinue all or any part of the plans at any time.