

# 2021 BENEFITS ENROLLMENT GUIDE













WE ARE FREEPORT-McMoRAN.

# WE ARE FREEPORT-McMoRan.

The Enrollment Guide is designed to inform all eligible U.S. employees about Freeport-McMoRan's 2021 benefit plans. The changes described in these materials also are intended to modify benefit summaries contained in the Summary Plan Descriptions. The company reserves the right to amend, modify or terminate any plan, policy, cost or procedure at any time.

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# **FM BENEFITS 2021 OVERVIEW**

Welcome to Freeport-McMoRan! The company provides a competitive and comprehensive benefits package offering health and welfare benefits, paid time off, retirement, and more. Freeport-McMoRan employees also pay less for their benefits coverage than the national average when compared to mining and non-mining companies.

These benefits are available to you and your eligible dependents on your first day of employment. Some of your benefits are company paid, and you will pay a portion of other benefits. The company pays the greatest portion of your benefits, passing along only a fraction of the total cost to employees.

Your costs are outlined in this guide and your Personal Enrollment Form.

#### **Health Benefits**

- Three medical plan options through UnitedHealthcare, including a high deductible plan with company contribution to a Health Savings Account
- Two dental plan options through Delta Dental
- Vision plan through VSP
- Flexible spending accounts for health-care and dependent care expenses

#### **Financial Security Benefits**

- Company-paid disability, life and AD&D insurance with option to increase coverage for some plans
  - Short-term and core long-term disability coverage
  - **Life insurance** equal to 2x your base salary
  - Accidental death and dismemberment coverage at 2x your base salary
  - Basic spouse and child life coverage options
- Retirement savings plan managed by Schwab Retirement Plan Services
  - Automatic 100 percent match in the 401(k) on the first 5 percent of your contribution
    - Vests immediately
  - Enhanced company contributions with additional non-matching company contributions of 5 percent of your salary, shift differentials, overtime and eligible bonuses
    - Vests after 36 months of continuous service
  - Best in Class 401(k) plan, rated by PLANSPONSOR magazine in a comprehensive survey
- Company-paid online financial wellness program to help manage your finances by creating a budget, reducing debt and saving for retirement
- Group legal plan option with access to a nationwide network of attorneys

## **Quality of Life Benefits**

- Paid time off for vacation, sick time and holidays
- Employee Assistance Program for personal and professional concerns
- Tuition reimbursement to employees for further education
- Matching gifts and volunteer grants available to eligible non-profit organizations
- Adoption assistance for some adoption expenses
- College scholarship opportunities for children of full-time employees
- Auto, home and pet insurance plans at competitive rates

### **ELIGIBILITY**

You are able to elect coverage for yourself and all of your eligible dependents under the medical, dental, vision and dependent life benefit programs. Your benefit elections must be submitted within 60 days of your date of hire. The benefits you elect will be effective as of your date of hire, but you will not have coverage until the HR Service Center receives your completed election form.

FM Benefits offers four coverage categories:

• Employee Only • Employee + Child[ren] • Employee + Spouse • Employee + Family

You may choose different coverage categories for different plans. For example, you may elect Employee + Family medical and Employee Only dental.

Your eligible dependents include your legal spouse and your children under age 26.

Social Security numbers must be provided for all plan participants, including dependents. You will be required to provide documentation (see page 24) supporting dependent eligibility before coverage begins on any of the company's benefit plans. The required documentation must be received by the HR Service Center within the 60-day enrollment period.

#### CHANGE IN STATUS

Generally, the coverage you elect remains in effect for the entire plan year, which runs through December 31, 2021. If you experience a change in status during 2021, you may be eligible to change your coverage. Any change you make must be consistent with the change in your family circumstances.

An example of a change consistent with family circumstance would include adding your new baby to your medical coverage at the child's birth; however, the child's birth would not allow you to add your spouse to your dental coverage. Review the list of qualifying events for a change in status on **FM Benefits** on FM Web.

**Change in Status Form:** Submit the documentation and the completed **Change in Status Request Form** to the HR Service Center no later than 60 days after the event.

# EMPLOYEE SELF SERVICE AND TOTAL REWARDS

Download FM App for secure access to personal and company information on your smartphone:

- View your benefits, paid time off balances and pay information on Employee Self Service.
- See your total compensation the value of your pay, benefits and retirement including the company contribution on Total Rewards.
- Access FM Web for important company information and communications.

Find complete instructions on FM Benefits on FM Web under New Hire Information.

#### FLECTRONIC DELIVERY

Electronic delivery of materials keeps your information secure by eliminating the risk of lost or misplaced mail. It provides quick and easy access to your benefits information, with document links sent straight to your email. **During the national pandemic,** all benefit materials distributed by the company will be sent electronically. Paper copies are available upon request from the HR Service Center.



# MEDICAL AND PRESCRIPTION DRUG COVERAGE

FM Benefits offers three medical plan options administered by UnitedHealthcare. To get the most out of your plan, it's important to understand how each option works and impacts your cost.

Review complete information and costs on pages 8-9 and on **freeportmcmoran.welcometouhc.com**.

- Before enrolling, verify your doctors and facilities are in the network by visiting <u>myuhc.com</u> as you may pay less out of pocket when you choose in-network providers and services. All medical options allow you to visit physicians and specialists without a referral.
- If you are enrolled in another medical plan not offered by Freeport-McMoRan, you may choose to waive coverage and receive a \$50 monthly credit. To receive the credit, you must **complete this form**.

When you enroll, UnitedHealthcare will provide you with a combined medical and pharmacy member ID card. This ID card will provide one website and customer service number for your medical and pharmacy benefit needs.

#### **CDHP**

- Combined medical and prescription drug annual out-of-pocket maximum
- Negotiated discounted price for medical services and non-preventive prescriptions until you meet the deductible
- · Copay for preventive prescriptions before and after you meet the deductible
- Care from in-network and out-of-network providers
- Combined with a Health Savings Account and / or Limited Purpose Flexible Spending Account (see page 10 for additional details)

#### **PPO**

- Separate medical and prescription drug annual out-of-pocket maximums
- Must meet each deductible and out-of-pocket maximum on an individual basis
- · Negotiated discounted price for medical services until you meet the deductible
- Copay for all prescriptions before and after you meet the deductible
- Care from in-network and out-of-network providers
- Combined with a Health-Care Flexible Spending Account (see page 11 for additional details)

#### **EPO**

- Care from in-network providers only; out-of-network care is not covered
- Separate medical and prescription drug annual out-of-pocket maximums
- Generally, a copay is due when services are received (example: \$10 virtual visit copay)
- Must meet each deductible and out-of-pocket maximum on an individual basis
- Negotiated discounted price for some medical services until you meet the deductible
- Copay for all prescriptions before and after you meet the deductible
- Combined with a Health-Care Flexible Spending Account (see page 11 for additional details)

#### **Out-of-Pocket Maximums**

Each option has an overall limit - or out-of-pocket maximum - on what you are required to pay during the calendar year for health-care services.

Once you have reached your annual out-of-pocket maximum, the plan begins to pay 100 percent of the allowed amount for covered services.

Options vary on what counts toward your out-of-pocket maximum. For example, deductibles, copays and coinsurance count, but premium payments do not.

#### **OptumRx**

When you elect one of the three UnitedHealthcare medical plan options, your prescription drug coverage is provided by OptumRx. The prescription drug plan has a formulary or preferred drug list, which is subject to change. To determine if a drug is included on the preferred list or to look up the estimated cost of a medication at a pharmacy near you, visit **freeportmcmoran.welcometouhc.com/pharmacy-benefits**.

**Important Note about the CDHP:** If you enroll in the CDHP medical option, you will pay the full-negotiated, discounted price of your prescription medications until you meet the deductible.

Certain preventive drugs, however, are not subject to the deductible so you will be responsible only for the copay for those drugs. Examples of preventive drugs include tobacco cessation medication and some cholesterol-lowering medications. See the complete list at <a href="mailto:freeportmcmoran.welcometouhc.com/">freeportmcmoran.welcometouhc.com/</a> <a href="mailto:pharmacy-benefits">pharmacy-benefits</a>.

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The medical benefits in particular take some of the financial weight off of my shoulders. It's less stress.





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# SHARED FEATURES FOR ALL MEDICAL PLAN OPTIONS

Freeport-McMoRan's three medical plan options have a lot in common. No matter which option you choose, these services are available to you and your covered dependents:

- No-cost preventive care such as vaccines, some screening tests, including mammograms, and routine physicals covered in the network. No deductible applies.
- <u>Same prescription drug formulary</u>, a comprehensive list of all covered medications. For the CDHP option with a Health Savings Account, you will pay a copay for certain preventive drugs instead of a negotiated discounted price before you meet your deductible. To determine if a drug is included on the preferred list or to look up the estimated cost of a medication at a pharmacy near you, visit <u>freeportmcmoran.welcometouhc.com/pharmacy-benefits</u>.
- Identical services and covered benefits, such as emergency services, hospitalization coverage, maternity and newborn care, mental health and substance use disorder services, preventive and wellness care, chronic disease management, eye exams, and more.
- A shared network of <u>UnitedHealthcare providers and locations</u> meeting high quality standards. When you choose in-network care, you almost always will save money.
- <u>Virtual doctor visits</u> to connect you with a U.S.-based physician day or night on your smartphone, tablet or computer. You will save time and money, and appointments are available in as little as 20 minutes.
- <u>UnitedHealthcare mobile app</u> to keep your health information and claim details at your fingertips. Download UnitedHealthcare's free app from iTunes or Google Play.
- Real Appeal, a free program to help eligible employees and dependents lose weight and build healthy habits.
- <u>Diabetes Care Management</u> with Livongo, a technology-based solution that provides eligible medical plan participants a free wireless glucometer, unlimited test strips, and various tools and resources to assist in their diabetes care management.

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The company wants to keep their employees healthy and keep everything affordable for me by paying the vast majority of the cost. It's really great, and it's peace of mind in case something happens.

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Monthly Cost of Coverage	CDHP	PPO	EPO
Employee Only	\$65	\$100	\$190
Employee + Child[ren]	\$75	\$130	\$270
Employee + Spouse	\$110	\$240	\$500
Employee + Family	\$120	\$280	\$560



	OOMS AND	II Health Plan
Feature <sup>1</sup>	UnitedHealthcare Network	Out of Network <sup>2</sup>
Annual Deductible	\$1,500 Employee Only coverage <sup>3</sup> \$3,000 Employee + 1 or more dependents <sup>3</sup>	
Annual Medical Out-of-Pocket Maximum	\$3,900 Employee Only \$7,800 Employee + 1 or more dependents	\$7,800 Employee Only \$15,600 Employee + 1 or more dependents
Physician Services		
Preventive Care Visit	No charge	60% (after deductible)
Primary Care Physician Visit	80% (after deductible)	60% (after deductible)
Specialist Visit	80% (after deductible)	60% (after deductible)
Virtual Visit	80% (after deductible)	Not Covered
Urgent Care Visit	80% (after deductible)	60% (after deductible)
Mental Health and Substance Use Visit	80% (after deductible)	60% (after deductible)
Hospital Services		
Inpatient	80% (after deductible)	60% (after deductible)
Outpatient	80% (after deductible)	60% (after deductible)
Emergency Room	80% (after deductible)	80% (after deductible)
Emergency Room	Con (unter deddetible)	50% (after deddetible)
Other Medical Services		
Ambulance	100% (after deductible)	100% (after deductible)
Chiropractic Care (up to 20 visits)	80% (after deductible)	60% (after deductible)
Durable Medical Equipment	80% (after deductible)	60% (after deductible)
Home Health Care / Skilled Nursing Facility	80% (after deductible)	60% (after deductible)
(up to 120 combined total visits)	COM (arter deddelible)	00% (arter deddelible)
Hospice Care	100% (after deductible)	100% (after deductible)
Infertility	80% (after deductible)	60% (after deductible)
Outpatient Lab and X-Ray	80% (after deductible)	60% (after deductible)
<b>Rehabilitation Services</b> Physical, Occupational, Pulmonary, Speech and Vision Therapy (up to 60 combined total visits)	80% (after deductible)	60% (after deductible)
Mental Health and Substance Use		
Inpatient	80% (after deductible)	60% (after deductible)
Outpatient	80% (after deductible)	60% (after deductible)
(applied behavior analysis provided in connection with autism)		
Pharmacy — OptumRx	CDHP with HSA⁴	
Annual Rx Out-of-Pocket Maximum	Included in medical out-of-pocket maximum	N/A
	medical out of pocket maximum	
Retail: 30-Day Supply / 90-Day Supply	<b>After Deductible:</b> \$10 generic / \$30 \$40 brand-formulary / \$120 \$60 non-formulary / \$180	
Mail: 90-Day Supply	After Deductible: \$20 generic \$80 brand-formulary \$120 non-formulary	

 $<sup>^{\</sup>mbox{\tiny 1}}$  Plan benefits, day limitations and visit frequencies are based on a calendar year.

 $<sup>^2</sup>$  Out of Network - If the billed amount is larger than the usual and customary in-network charge, you are responsible for the difference in cost.

# UnitedHealthcare PPO

# **Preferred Provider Organization**

# UnitedHealthcare **EPO**

#### **Exclusive Provider Organization**

UnitedHealthcare Network	Out of Network <sup>2</sup>	UnitedHealthcare Network Only
\$500 Individual \$1,000 Family	\$1,000 Individual \$2,000 Family	\$250 Individual \$500 Family
\$3,700 Individual \$7,400 Family	\$7,400 Individual \$14,800 Family	\$3,500 Individual \$7,000 Family
No charge	60% (after deductible)	No charge
80% (after deductible)	60% (after deductible)	\$25 copay
80% (after deductible)	60% (after deductible)	\$50 copay
80% (after deductible)	Not Covered	\$10 copay
80% (after deductible)	60% (after deductible)	\$60 copay
80% (after deductible)	60% (after deductible)	\$25 copay
000% ( ()	600// (1	<b>\$150</b>
80% (after deductible)	60% (after deductible)	\$150 copay (then 85% after deductible)
80% (after deductible)	60% (after deductible) 80% (after deductible)	85% (after deductible)
80% (after deductible)	80% (after deductible)	\$150 copay (then 85% after deductible,
		copay waived if admitted)
100% (after deductible)	100% (after deductible)	100% (after deductible)
80% (after deductible)	60% (after deductible)	\$50 copay
80% (after deductible)	60% (after deductible)	85% (after deductible)
`	· · · · · · · · · · · · · · · · · · ·	
80% (after deductible)	60% (after deductible)	85% (after deductible)
100% (after deductible)	100% (after deductible)	100% (after deductible)
80% (after deductible)	60% (after deductible)	85% (after deductible)
80% (after deductible)	60% (after deductible)	85% (after deductible)
80% (after deductible)	60% (after deductible)	\$50 copay
80% (after deductible)	60% (after deductible)	\$150 copay (then 85% after deductible)
80% (after deductible)	60% (after deductible)	85% (after deductible, Intensive Outpatient)
	PPO	EPO
\$4.450 Individual	N. /A	\$4,650 Individual
\$8,900 Family	N/A	\$9,300 Family
¢10 con	eric / \$30	\$10 generic / \$30
\$10 generic / \$30 \$40 brand-formulary / \$120 \$60 non-formulary / \$180		\$40 brand-formulary / \$120 \$60 non-formulary / \$180
¢20.	generic	\$20 generic
		\$20 generic \$80 brand-formulary
\$80 brand-formulary \$120 non-formulary		\$120 non-formulary
Ψ12O 11011	Torridal y	\$120 Hoff formulary

<sup>&</sup>lt;sup>3</sup> In the CDHP, the company deposits \$675 for Employee Only coverage or \$1,350 for Employee + 1 or more coverage into a Health Savings Account.

<sup>&</sup>lt;sup>4</sup> You pay the negotiated discounted prescription price before you meet your deductible. Deductible waived for preventive drugs.

## HEALTH SAVINGS ACCOUNT

The Health Savings Account is for employees enrolled in the Consumer Driven Health Plan option. Freeport-McMoRan will contribute a prorated portion of your CDHP annual deductible to your Health Savings Account each month, and your total will be less than the amount illustrated. You will receive your first contribution on the first paycheck of the month following your enrollment date.

Along with the company contribution, you also may contribute pretax dollars to your HSA to lower your taxable income and offset your out-of-pocket health-care costs.

You are eligible to enroll in the CDHP and make or receive contributions to an HSA in 2021 if you are not in another qualified high deductible health plan, enrolled in Medicare or claimed as a dependent for tax purposes. Read complete details on FM Benefits on FM Web.

Complete information about your HSA account, including terms and conditions, will be included in your Optum Bank HSA welcome packet and also will be online at **optumbank.com**. Learn more about the CDHP option and how to use your HSA by going to FM Benefits on FM Web and selecting New Hire Information.

Coverage Category	Total IRS Amount Allowed for 2021* Per Year	Freeport-McMoRan Contribution Per Year	Maximum Employee Contribution* Per Year
Employee Only Coverage <sup>1</sup>	\$3,600	\$675	\$2,925
Employee + Child[ren], + Spouse or + Family Coverage <sup>1</sup>	\$7,200	\$1,350	\$5,850

<sup>\*</sup> CDHP medical plan option members age 55 or older in 2021 may contribute an additional \$1,000 to an HSA. The total amount allowed is subject to change at the discretion of the IRS, and you will be notified of any change.

# **HSA Advantages**

- The money in your HSA can be used to pay for your and your family's (spouse and children claimed on a tax return<sup>2</sup>) qualified health-care expenses including copays, deductibles and coinsurance for medical, prescriptions, dental and / or vision and is easy to access with a debit card provided to you by Optum Bank.
- For an updated and complete list of eligible health-care expenses, go to **optumbank.com** and search for qualified HSA expenses.
- Your HSA is a personal bank account, and the funds are yours to keep. Any funds you do not use during the calendar year automatically roll over from year-to-year, allowing you to save for future health-care expenses, including those you incur after retirement.
- Once your HSA reaches a balance of \$2,000, you may choose to invest the amount above \$2,000 into mutual fund options available as part of the Optum Bank HSA. Any investment earnings, such as interest or dividends, are income tax-free. Complete information is available at <a href="https://optumbank.com">optumbank.com</a>.

<sup>&</sup>lt;sup>1</sup> These amounts represent the full IRS amount allowed for 2021 and the full company contribution. When you move to this option as a new hire in 2021 or due to an eligible change in status, the company will make prorated contributions to your account.

<sup>&</sup>lt;sup>2</sup> For the CDHP medical plan option, an adult child must still be a tax dependent in order for their medical expenses to qualify for payment or reimbursement from a parent's HSA, per IRS rules. An adult covered under a parent's high deductible plan can contribute money to a separate Health Savings Account to cover their medical expenses. More information is available at <a href="mailto:optumbank.com">optumbank.com</a>.

# FLEXIBLE SPENDING ACCOUNTS

Three different FSAs are available allowing you to set aside pretax dollars from your paycheck to use for eligible 2021 expenses. You must actively enroll each year to participate in a:

- Health-Care FSA (for employees enrolled in EPO or PPO options or those who waive medical coverage)
- Limited Purpose FSA (for employees enrolled in the CDHP option)
- Dependent Care FSA (for dependent day care or elder care)

**Use It or Lose It!** Calculate your 2021 FSA contributions carefully. Under IRS rules, you can carry forward up to \$550 from a Health-Care or Limited Purpose FSA into 2022 without reducing the maximum amount you can contribute. You will lose all unused funds from a Dependent Care FSA, per IRS rules.

FSA Type	Eligible Expenses Include	Ineligible Expenses Include
Health-Care: \$100-\$2,750	<ul> <li>Copays, coinsurance, deductibles</li> <li>Eyeglasses, contacts, eye exams, Lasik</li> <li>Hearing care</li> <li>Orthodontia and other dental care</li> <li>Over-the-counter medications</li> <li>Prescription drugs</li> <li>Smoking cessation programs</li> </ul>	<ul> <li>Cosmetic surgery not medically necessary</li> <li>Dues for athletic or health clubs or spas</li> <li>Insurance premiums</li> <li>Non-prescription sunglasses</li> <li>Vitamins or food supplements taken for general health</li> <li>Weight loss programs for general well-being</li> </ul>
Limited Purpose: \$100-\$2,750 per year*	<ul> <li>Dental expenses</li> <li>Eligible medical and prescription drug expenses after plan deductible is met</li> <li>Over-the-counter medications</li> <li>Vision expenses, such as eye exams, eye glasses or Lasik</li> </ul>	
Dependent Care: \$100-\$5,000 per year*	<ul> <li>Au pairs, housekeepers or nannies primarily responsible for dependent care</li> <li>Before-school and after-school care</li> <li>Day camp</li> <li>Day care center</li> <li>Elder care</li> <li>Nursery school / preschool expenses</li> </ul>	<ul> <li>Clothing</li> <li>Overnight camp</li> <li>Overnight care in a convalescent nursing home</li> <li>Private school for a schoolage child, or transportation to and from the private school location</li> </ul>

<sup>\*</sup> Maximum contribution allowed by IRS rules. The total amount allowed is subject to change at the discretion of the IRS, and you will be notified of any change.

For an updated list of eligible dependent care expenses and health-care expenses, go to <u>irs.gov</u>. Savings and flexible spending accounts are considered voluntary benefits, and limits are subject to change, which is why employees must actively enroll each year to participate and make contributions.

# HSA AND FSA COMPARISON CHART

	Health Savings Account	Health-Care Flexible Spending Accounts
Available to all employees, regardless of the medical plan enrollment	<b>No</b> – HSAs only are available to employees participating in the CDHP option.	Yes - Employees in the PPO, EPO or who are not enrolled in our medical plan are eligible to open an FSA.  Employees in the CDHP may open a Limited Purpose FSA to maximize their tax savings on anticipated health expenses.
Maximum total contribution for 2021*	\$3,600 for Individuals \$7,200 for Families	\$2,750
The company will make contributions to your account	<b>Yes*</b> - The company will make prorated contributions to your HSA.	<b>No</b> - The company does not make contributions to FSAs.
Contributions are pretax dollars from your paycheck	<b>Yes</b> - The funds in your HSA are pretax dollars from your paycheck.	<b>Yes</b> - The funds in your FSA are pretax dollars from your paycheck.
Funds earn interest	<b>Yes</b> - Your HSA funds can earn interest. Investment options also are available once you reach a balance of \$2,000.	<b>No</b> - FSA funds do not earn interest.
Funds can be used to pay for eligible health-care expenses, including copays and coinsurance, deductibles, dental and vision expenses, and prescriptions	<b>Yes</b> - You may use your HSA funds for any eligible health-care expense.	Yes - You may use your FSA funds for any eligible health-care expense. Limited Purpose FSA funds only can be used on eligible dental and vision expenses or for medical expenses after the plan deductible is met.
Funds can be used now or in the future, including in retirement	<b>Yes</b> - HSA funds are yours to keep. You can use your money for health-care expenses now or in the future.	<b>No</b> - Any money contributed to an FSA must be used during that calendar year. Funds in excess of \$550 remaining at the end of 2021 will be forfeited.
Funds may be used for eligible purchases for all family members claimed on your tax return	<b>Yes</b> - You may use your HSA money to pay for eligible medical expenses for all family members claimed on your tax return.	<b>Yes</b> - You may use your FSA money to pay for eligible medical expenses for all family members claimed on your tax return.
Monthly fees apply	<b>No</b> - There are no monthly fees for your HSA.	<b>No</b> - There are no monthly fees for FSAs.
Funds roll over from year-to-year	<b>Yes</b> - Your funds will roll over year-to-year so you can start saving for future medical expenses now.	<b>No</b> - Any remaining funds at the end of 2021 in excess of \$550 will be forfeited.
If you leave the company, your funds are yours to take with you	<b>Yes</b> - Your HSA funds are yours to keep if you leave or retire.	<b>No</b> - Funds in your FSA will be forfeited if you leave or retire.

<sup>\*</sup> When you select this option as a new hire in 2021 or move to this option due to an eligible change in status, the company will make prorated contributions to your account. The full company contribution for 2021 would be \$675 to your HSA if you enroll in Employee Only, or \$1,350 if you enroll in Employee + Child[ren], + Spouse or + Family.

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The company cares about my health.

We get great benefits for the job we
do, and it's not only for you – it's
reasonable to cover your whole family.





**JAMIS** 

# DENTAL

Delta Dental offers the flexibility to choose any dentist when you need dental care, but you will save the most when you use a dentist in the Delta Dental PPO Plus Premier network.

To review in-network providers, visit **deltadentalaz.com** or call 1-800-352-6132.

Monthly Cost of Coverage	No Ded.	\$50 Ded.
Employee Only Employee + Child[ren] Employee + Spouse	\$24 \$44 \$46	\$13 \$21 \$22
Employee + Family	\$72	\$31

Feature	Delta Dental No Deductible Option	Delta Dental \$50 Deductible Option
Annual Deductible	None	\$50 per person / \$150 per family
Annual Maximum Benefit	\$2,250 per person	\$1,500 per person
Preventive Services	Plan pays 100%; 4 visits per calendar year	Plan pays 100%; 2 visits per calendar year, no deductible applies
Basic and Routine Services	Plan pays 80%; you pay 20%	Plan pays 80%; you pay 20%
Major Services	Plan pays 80%; you pay 20%	Plan pays 50%; you pay 50%
Orthodontia	Plan pays 80%; you pay 20% (children and adults)	Plan pays 50%; you pay 50% (children 18 years and under)
Lifetime Orthodontia Benefit	\$2,000 per person	\$1,500 per child

#### Please note:

- Both Plan options cover the same preventive, diagnostic, basic, major and orthodontia services. The cost of exams, routine x-rays and cleanings does not count toward your annual maximum benefit under either option.
- If you see an out-of-network provider for non-preventive care, payments will be based on allowable charges only. You will be responsible for any charges above the allowable limit.
- Eligible expenses incurred outside the U.S. will be reimbursed at a lower out-of-network rate.
- If a new enrollee or eligible dependent has orthodontic treatment in process under another dental plan or with a different company, treatment can be continued when enrolling in this dental plan.

# **VISION**

With VSP, you may visit any vision provider, but you will pay lower copays and save the most when you visit providers within its network. For laser vision correction, the average discount is 15 percent. To locate a provider near you, visit **VSP.com** or call 1-800-877-7195.

Monthly Cost of Coverage	Vision
Employee Only	\$10
Employee + Child[ren]	\$14
Employee + Spouse	\$15
Employee + Family	\$18

Feature	In Network	Out of Network
Vision Exam	\$15 copay	Plan pays up to \$50
Lenses and Frames	After \$20 copay, plan pays full cost of most lenses and up to \$200 for frames	Plan pays up to \$70 for frames and up to:  • \$50 for single vision lenses  • \$75 for bifocal lenses  • \$100 for trifocal lenses  • \$125 for lenticular lenses
Anti-reflective lens coating (glasses)	\$20 copay	N/A
Contact Lenses (In lieu of glasses)	Plan pays up to \$130 for lenses (no copay) and full cost of medically necessary lenses after \$20 copay	Plan pays up to \$105 for lenses and up to \$210 for medically necessary lenses

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The company's generous medical plan coverage leaves me worry-free if something were to happen.

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# FINANCIAL AND WELLNESS

## SHORT-TERM DISABILITY

The company automatically provides short-term disability coverage through MetLife at no cost to you if you are unable to work due to illness or injury. You do not need to elect coverage. After a seven-day waiting period, you may be eligible to receive short-term disability benefits that pay a percentage of your base pay per the schedule shown below.

Years of Service	Benefits Paid at 80% of Your Base Salary	Benefits Paid at 60% of Your Base Salary
Less than 1	0 weeks	25 weeks
1 but less than 5	6 weeks	19 weeks
5 but less than 10	13 weeks	12 weeks
10 but less than 15	16 weeks	9 weeks
15 but less than 20	19 weeks	6 weeks
20-plus years	25 weeks	0 weeks

Please note: One week equals seven consecutive days.

Short-term disability benefits may generally be paid for up to a maximum duration of 25 weeks and can be managed using the MetLife portal at <u>mybenefits.metlife.com/freeportmcmoran</u>. If you remain unable to work, you may become eligible for long-term disability.

# LONG-TERM DISABILITY

The company provides long-term disability coverage at 50 percent of your base pay at no cost to you, up to a monthly maximum benefit of \$10,000. You may elect optional long-term disability coverage to increase your benefit to 60 percent of your base pay, up to a monthly maximum benefit of \$15,000. If you elect to increase your long-term disability coverage outside of your new hire enrollment period, you may be required to provide Evidence of Insurability.

# LIFE AND AD&D

At no cost to you, the company provides basic life and basic accidental death and dismemberment coverage equal to 2x your annual base pay (up to a maximum coverage amount of \$2 million) through MetLife. You also receive \$10,000 of basic spouse and / or child life coverage at no cost. You may elect to purchase supplemental life and / or supplemental AD&D coverage as illustrated in the table below. You will be required to provide Evidence of Insurability for some increases in employee or spouse life coverage. Basic life and AD&D insurance coverage reduces at age 65 and again at age 70.

Feature	Employee Life	Employee AD&D	Spouse Life	Child Life
Company- Provided Coverage	2x annual base pay up to a maximum coverage amount of \$2 million	2x annual base pay up to a maximum coverage amount of \$2 million	\$10,000	\$10,000 per child
Supplemental Coverage	1x, 2x, 3x, 4x, 5x, 6x or 7x your annual base pay up to a maximum coverage amount of \$2 million	1x, 2x, 3x, 4x or 5x your annual base pay up to a maximum coverage amount of \$1 million	\$50,000 or 1x, 2x, 3x, 4x or 5x your annual base pay up to a maximum coverage amount of 100% of your basic life plus supplemental life coverage, not to exceed a maximum coverage amount of \$250,000	\$10,000 per child

At no cost to you, the Accelerated Benefit Option allows you or your covered spouse to access death benefits, up to 80 percent, should you or a covered spouse become terminally ill. Under IRS regulations, the value of company-paid employee life insurance amounts over \$50,000 is counted as taxable income for you and will show on your paycheck.

# **Evidence of Insurability**

As a new employee, you may choose any supplemental life coverage from 1x to 7x your annual base pay for yourself without providing Evidence of Insurability. You may be subject to Evidence of Insurability if you:

- Exceed the guarantee issue amount of \$1 million for either employee life or supplemental life.
- Elect or increase your supplemental life coverage by more than one level in the future.

You may elect \$50,000 of spouse life coverage within 60 days of becoming eligible, or within 60 days of getting married, without providing Evidence of Insurability.

#### **Beneficiaries**

Ensure your life and AD&D benefits are paid how you want - complete the <u>MetLife Beneficiary Designation</u> Form and return it to the HR Service Center.

# BUSINESS TRAVEL ACCIDENT INSURANCE

The company provides you with business travel accident coverage equal to 5x your annual base pay at no additional cost, in the event you die while traveling on company business. If you want to designate a beneficiary for this insurance, complete the **BTA Beneficiary Form**.

# **RETIREMENT SAVINGS**

The Employee Capital Accumulation Program, your 401(k) savings plan, helps you save for retirement with a company contribution equal to 5 percent of your pretax base pay, as defined by the Plan, and an additional dollar-for-dollar match to your 401(k) contributions, up to the first 5 percent.

The company contribution, called Enhanced ECAP, is 100 percent company funded whether or not you make contributions. You will become fully vested in your Enhanced ECAP account and its investment earnings after 36 months of continuous service with Freeport-McMoRan.

Your contribution and the 5 percent company match - plus any investment earnings from your contribution and the match - vest immediately. If you leave the company, the money is yours to keep. Most companies require you to stay three to five years in order to keep matching contributions.

You will receive full enrollment and Plan information, including how to manage your account online and how to access online and in-person retirement advice at no cost to you, from Schwab Retirement Plan Services. You also can get information by calling 1-800-724-7526 or visiting **workplace.schwab.com** to set up your account. Here are the Plan highlights:

- Beginning 60 days after your date of hire, you automatically will be enrolled in the Plan and will start contributing 5 percent of your pretax base pay into a traditional 401(k) account, unless you opt out or have made a different election.
- The company's plan is designated a **Best in Class 401(k) plan** by PLANSPONSOR magazine. The comprehensive survey rates plans using a proprietary system of more than 30 criteria related to plan design, oversight / governance and participant outcomes.
- Name a beneficiary by calling Schwab or going online. If you do not name a beneficiary, your benefit
  will go to your spouse. However, if you are unmarried or have not been married for at least a year, your
  benefit will go to your estate.
- The annual IRS contribution limit is \$19,500 in 2021. Employees 50 or older may make a catch-up contribution of an additional \$6,500.
- Both the website, <u>workplace.schwab.com</u>, and the mobile app, Schwab Workplace Retirement, let you check your current balance, performance and retirement projections, change your contribution rate, and access retirement education and investment strategies.
- The Plan offers you an excellent opportunity to design your own investment strategy using a wide variety of funds in addition to online, on the phone and face-to-face instruction to help you understand and reach your retirement goals.
- The Plan allows you to choose from a traditional 401(k) account, a Roth 401(k) account or a blend of the two. With a traditional 401(k), you pay no taxes on contributions when deposited to your Plan account. Instead, you pay taxes on the contributions and any earnings when you withdraw the money in retirement. A Roth 401(k) provides no tax break on contributions; any earnings are tax-free at withdrawal, as long as certain criteria are met.
- You can start, stop or change your contribution at any time.

Consider going online and setting an Annual Savings Adjustment timed with any merit increase - you can add more value by investing some or all of the increase toward your retirement. This feature lets you set up an automatic, annual increase to your contribution and grow a bigger nest egg for retirement.

**Please note:** Your account with Schwab has an automatic Annual Savings Adjustment feature that will automatically increase your contribution by 1 percent each year. You can opt out within the Schwab website, or you can set your own annual adjustment and timing.

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Our 401(k) is second to none. It's incredible. I know of very few companies that have anything as good as this. It's made the possibility of retirement a reality.

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# **QUALITY OF LIFE**

# GUIDANCERESOURCES - EMPLOYEE ASSISTANCE PROGRAM

GuidanceResources offers more than the traditional Employee Assistance Program. From confidential counseling to resources to help with work-life balance, GuidanceResources offers solutions to life's challenges:

- Confidential emotional support for anxiety, depression, stress, grief, loss and life adjustments, and relationship / marital conflicts
- Work-life solutions for qualified referrals and resources for everything on your to-do list, from finding a moving company to locating child care
- A variety of resources and tips to help employees and managers stay connected, focused and productive while working remotely
- Legal guidance for divorce, adoption, family law, wills, trusts and more
- Financial experts with advice on retirement planning, taxes, relocation, mortgages, insurance, budgeting and more
- Online resources with articles, podcasts, videos, slideshows, training and expert advice

This confidential service is provided to you and your family at no cost. The program will cover up to five sessions annually, per person, for each assessed issue.

Contact a GuidanceConsultant 24/7, who will answer your questions and, if needed, refer you to a counselor or other resources. Call 1-833-962-0716 or go online to **GuidanceResources.com** and use the company code Freeport-McMoRan. You also can download the app GuidanceNow from iTunes or Google Play.

# FINANCIAL WELLNESS

<u>SmartDollar</u>, an online program from financial expert, radio host and best-selling author Dave Ramsey, will help you reach your financial goals with an easy-to-follow, step-by-step plan to help you get out of debt, pay off your mortgage, save for retirement and make your money work for you.

Freeport-McMoRan offers one free account for each employee through SmartDollar to help you manage your money and your budget to reduce or eliminate the stress and anxiety caused by money concerns. You are encouraged to share this account with your spouse.

Set up your free, confidential and secure account on your desktop computer or mobile device:

- 1. Go to <u>smartdollar.com/enroll/fmi6618</u> or text Freeport to 33789 for a link. The system will authenticate you as a Freeport-McMoRan employee using your eight-digit employee ID number. If your ID number is less than eight digits, insert zero(s) on the front.
- 2. Set up a password and share a work or personal email address. You will receive an email verifying your account as well as email instructions on how to make the most of your financial journey.

# **EDUCATION ASSISTANCE**

Receive up to a maximum of \$5,250 per year in tuition reimbursement for approved participation in your program of study.

### GROUP LEGAL PLAN

The group legal plan provides you with advice and representation for many personal legal matters. You receive access to a nationwide network of attorneys through MetLife Legal Plans, Inc. If there is no

Monthly Cost of Coverage	Legal	
Employee	\$14.50	

attorney in your area, or if you elect to use an attorney who is not on the list, the plan can reimburse you up to a set fee schedule. You are responsible for paying any amounts in excess of the fee schedule.

Legal plan services include preparation of wills, trusts and powers of attorney; real estate matters; identity theft defense and debt collection defense; tax and bankruptcy questions; family law, including adoption and guardianship issues; and elder law matters.

To see a list of participating attorneys or to learn more about services offered, call MetLife's Client Service Center at 1-800-821-6400 or visit <a href="https://info.legalplans.com/sponsor/">https://info.legalplans.com/sponsor/</a>.

#### PAID TIME OFF

The paid-time-off program allows you to take time off for vacation, personal illness, family illness or other reasons. In addition to paid holidays, you earn time off based on your years of service with the company. See the chart on FM Benefits on FM Web for your accrual of PTO hours.

# EMPLOYEE MATCHING GIFTS

The Freeport-McMoRan Foundation double matches your first \$1,000 contributed to eligible non-profit organizations. Any amount above \$1,000 will be single matched up to \$40,000 annually.

# EMPLOYEE VOLUNTEER FUND

Volunteer a minimum of 25 hours a year with an eligible non-profit organization and the organization may receive a \$250 or \$500 grant.

# ADOPTION ASSISTANCE

The company may reimburse you up to \$5,000 for qualified expenses related to the adoption of an eligible child.

# COMPANY SCHOLARSHIPS

Freeport-McMoRan may award college scholarships to children of full-time employees.

# AUTO, HOME AND PET INSURANCE

Employees receive competitive rates on auto and home insurance through Farmers Insurance and on pet insurance through MetLife. See details on <a href="auto/home insurance">auto/home insurance</a> or <a href="pet insurance">pet insurance</a>. Premiums can be set up via payroll deduction.

# **NEXT STEPS**

# ENROLLMENT CHECKLIST

Review this guide and the information in your Enrollment Packet for details about FM Benefits 2021.
Complete and return your Personal Enrollment Form along with your Beneficiary Form within 60 days of your date of hire to the HR Service Center. You will be required to provide documentation supporting dependent eligibility before coverage begins.
Confirm all dependents you plan to cover meet the eligibility requirements. You can cover your legal spouse and / or your children under age 26. You will need to submit required documentation (see page 24) supporting eligibility to the HR Service Center within 60 days of your hire date.
Complete your beneficiary information for life and AD&D insurance, ECAP and your HSA account (if applicable). If you do not name a beneficiary and you are married, your HSA becomes your spouse's HSA. If you are not married at the time of your death, the funds will go to your estate and may be subject to taxation.
Learn more about your benefits with a unique, online experience. Go to <b>Benefitsfair.online/Freeport- McMoRan</b> to visit our virtual benefits fair and explore your benefit options.
Review the <u>required compliance notices</u> for medical benefits as well as specific <u>information related to COVID-19</u> .
Take advantage of the member websites and / or mobile apps (see page 23) to manage your health and retirement plans anywhere, anytime.
Set up multi-factor authentication and download FM App for secure access to personal and company information on your smartphone. Find instructions on FM Benefits on FM Web under <b>New Hire Information</b> .

# CONFIRMATION STATEMENT

You will receive your FM Benefits 2021 confirmation statement by email after you have completed and returned your Personal Enrollment Form. Please review and report any errors in writing to the HR Service Center by fax at 602-366-7330, by email at HRSC@fmi.com or by mail at 333 N. Central Ave., Phoenix, AZ 85004-2189.

# **DEFAULT COVERAGE**

If you do not make any benefit elections within the first 60 days of your employment with Freeport-McMoRan, you automatically will be enrolled in the following default coverage for Employee Only:

- PPO Medical Plan option
- Basic Child Life (if applicable)
- Short-Term Disability

- Basic Life and AD&D at 2x annual base pay
- Basic Spouse Life (if applicable)
- Long-Term Disability, 50 percent of base pay

# FREEPORT-MCMORAN HR SERVICE CENTER

For questions about your benefit options or your Personal Enrollment Form, email HRSC@fmi.com or call the HR Service Center between 7 a.m. and 5 p.m. MST, Monday through Friday at 1-888-855-HELP (4357).

# CONNECT TO YOUR BENEFITS

Take advantage of the member websites and / or mobile apps\* listed below to manage your health and retirement plans anywhere, anytime.



UnitedHealthCare

#### Medical - UnitedHealthcare

- Locate network physicians
- Manage claims
- Track spending accounts

#### myuhc.com

App: UnitedHealthcare 1-877-771-5348



OptumRx

#### Prescriptions - OptumRx

- Search for pharmacies
- Check drug pricing
- Order refills

#### optumrx.com

App: OptumRx 1-877-771-5348



**Optum Bank** 

#### Health Savings Account (CDHP) -**Optum Bank**

- Check account balance
- Add or update beneficiaries
- Track claims and expenses

#### optumbank.com

App: Optum Bank 1-844-326-7967



**Delta Dental** 

#### **Delta Dental**

- Find a dentist
- Estimate costs
- Check claims

#### deltadentalaz.com

App: Delta Dental 1-800-352-6132



#### Vision - VSP

- Find a doctor
- Review claims
- Check your coverage

#### VSP.com

App: My VSP 1-800-877-7195



#### MetLife

Manage / access disability claim information

mybenefits.metlife.com/ freeportmcmoran

App: MetLife 1-888-777-8431



#### GuidanceResources

- Get confidential emotional support
- Find work-life solutions with child and elder care, home repair contractor recommendations and more
- Access legal guidance and financial resources
- Use online resources for information and training

#### GuidanceResources.com

(code: Freeport-McMoRan)

App: GuidanceNow 1-833-962-0716



MetLife Legal Plans

#### MetLife Legal

Access advice and representation for personal legal matters

#### https://info.legalplans.com/sponsor/

App: MetLife Legal Plans

1-800-821-6400



Schwab

#### Retirement Account - Charles Schwab

- Monitor ECAP 401(k) fund performance
- Update your 401(k) contribution percentage
- Name / update beneficiaries

#### workplace.schwab.com

App: Schwab Workplace Retirement 1-800-724-7526



Schwab

#### Charles Schwab Bank, **Brokerage and PCRA Accounts**

- Manage your Schwab personal bank and brokerage accounts
- Access your Retirement Account's Personal Choice Account (PCRA)
- Review market news
  - Access ECAP using same login and password

#### workplace.schwab.com

App: Schwab 1-800-724-7526







# DEPENDENT ELIGIBILITY DOCUMENTATION

The required documentation must be received by the HR Service Center within the 60-day enrollment period. Below is a list of required documents. If you have any questions, please contact the HR Service Center at 1-888-855-HELP (4357), option 1.

#### Adding a **Spouse**

Submit one document from Proof A and one document from Proof B

#### Proof A:

Marriage certificate AND

#### Proof B:

- Your Federal 1040 or State income tax return, which must:
  - Be from the current or previous tax year
  - Contain the name of employee and spouse
  - Indicate married filing jointly or married filing separately (Only the page listing filing status and exemptions is required)
- Utility bill, which must:
  - Be dated within the last 12 months
  - Contain the name of the employee and spouse as joint owners
  - Contain the name of utility company
- Document from bank account or financial institution, which must:
  - Be dated within the last 12 months
  - Contain the name of the employee and spouse as joint owners of the account
  - Contain the name of financial institution
- Insurance document, such as homeowner, renter or automobile, which must:
  - Be dated within the last 12 months
  - Show the employee and spouse as joint account owners
  - Contain the name of insurance company
- Mortgage document or current lease, which must:
  - Be dated within the last 12 months
  - Contain the name of the employee and spouse as joint owners or joint renters
  - Contain the name of mortgage company, landlord or rental company
- Valid vehicle registration, which must:
  - Be dated within the last 12 months
  - Contain the name of the employee and spouse as joint owners
  - Contain the name of state or county in which issued

#### Adding a Child(ren)

Submit a copy of one document from Proof C

#### Proof C:

- Child's legal or hospital birth certificate or affidavit of parentage, which must:
  - Contain the name of the employee or spouse
  - Contain the name of the child
  - Indicate date of birth
- Your Federal 1040 or State income tax return, which must:
  - Be from the current or previous tax year
  - List your dependent with the relationship as daughter, son or child (Only the page listing filing status and exemptions is required)
- Final divorce decree, parental custody agreement or Qualified Medical Child Support Order, which must:
  - Contain the name of the employee or spouse indicating parentage of the child
  - Contain the name of the child
- Include an official signature or stamp indicating document has been filed
- Legal adoption, guardianship or legal custody papers, which must:
  - Contain the name of the employee or spouse
  - Contain the name of the child
  - Include an official signature or stamp indicating document has been filed
- Proof of relationship between you and your stepchild (if you are not providing a Federal 1040):
  - Child's legal or hospital birth certificate
  - Employee must provide the documentation stated in Proof A and Proof B above even if you do not currently cover your spouse

## **Adopted Child**

#### Stepchild(ren)