



2022 BENEFITS & INSURANCE GUIDE

Welcome to your benefits

As a Tler, you have access to a range of benefits that allow you to live life to the fullest. This benefits guide provides information about your choices for:

- Medical, dental and vision coverage
- Life and disability insurance
- Retirement

You'll also learn more about perks available to you, such as educational assistance, adoption assistance, well-being programs, and discounts on products and services.

Please take time today to review this guide and determine the best coverage for you and your family. Then make your elections online using [Fidelity NetBenefits](#), during Annual Enrollment, in the event of a life event or at your time of hire.

New for 2022

BCBS 24/7 Nurseline

Get answers to your health questions when you need them — 24 hours a day, 7 days a week. When a health problem pops up late in the day or in the middle of night, it can be hard to know how serious it is. Should you go to the emergency room? Urgent care? Or can it wait until you can see your regular doctor? The 24/7 Nurseline can help answer your health questions, day or night.

Plus, when you call, you can access an audio library of more than 300 health topics – from allergies to surgeries – available in English and Spanish.

How to connect

Phone: 877-351-8392

TTY toll-free: 800-386-4424

Questions?

Visit [NetBenefits.com/TI](#) or call the TI Benefits Center at Fidelity, 888-660-1411, option 1. Benefits representatives are available 8:30 a.m.–8:30 p.m. Eastern time, Monday–Friday, except for most New York Stock Exchange holidays.

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About the Guide

The 2022 Benefits & Insurance Guide (Guide) provides a summary of benefits available for Tlers who meet certain eligibility requirements. For more benefit details, see the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#) or [2022 Retiree Health Benefits Summary Plan Description \(SPD\)](#), which are available on [Fidelity NetBenefits](#). The benefits described in the Guide are governed by the plan documents, which are available upon request from the TI Benefits Center at Fidelity. Should there be a discrepancy between the Guide and the plan documents, the plan documents will govern. In addition, TI reserves the right to modify, amend or terminate any plan at any time and for any reason without prior notification. Eligibility for and receipt of TI benefits do not constitute an employment guarantee or create an employment contract.

When to enroll

Annual enrollment is Nov. 2–16, 2021.

This is your opportunity to select your health and insurance benefits for the 2022 calendar year. If you don't do anything during Annual Enrollment, your current coverage will continue except for your Flexible Spending Accounts (FSA), which you must enroll in each year.

Benefits go into effect Jan. 1, 2022, and run through Dec. 31, 2022.

Annual enrollment is the only time of the year to make changes to your benefits, unless you have a qualified life event or are a hire.

Qualified life events

Make your benefits elections **within 30 days of most qualified status changes¹**, such as getting married or divorced, **and within 60 days of the birth or adoption of a child**. Once this period has passed, you will be unable to make additional changes until the next annual enrollment window (usually in November).

Hires

All hires must make their benefits elections **within 30 days of their hire date**, or they will receive the default benefits package, which includes:

- Blue Cross Blue Shield High-Deductible Health Plan (HDHP) employee-only coverage
- Delta Dental Basic employee-only coverage
- Disability Pay Continuance Basic (short-term disability)
- Basic life insurance
- 401(k) at a 4% contribution level, which is invested in the appropriate Lifestyle Fund

Visit NetBenefits.com/TI to enroll.

3 things to know about your 2022 BCBS medical plan

- BCBS will send new medical cards to participants in advance of 2022. You can also access your medical card on the BCBS app or website, and your dental insurance cards on the Delta Dental app or website.
- As of Jan. 1, 2023, TI will no longer offer the Blue Cross Blue Shield PPO plan. It remains open for participation in 2022, but the high cost of the plan and low participation have resulted in the decision to eliminate it.

¹ For the full list of qualified life events, see qualified status changes in the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#).

Who's eligible for TI benefits?



You

You are eligible to participate in the TI benefits program if you are a full-time or part-time employee working at least 20 hours per week. TI interns are not eligible for TI health benefits, profit sharing, the Employees Stock Purchase Program (ESPP) or 401(k).

Your eligible dependents

You can enroll your eligible dependents in medical, dental, vision, accidental death and dismemberment (AD&D) and life insurance benefits as long as you carry the same benefits.



Your children up to age 26

Includes biological children, stepchildren, adopted or foster children and children of your domestic partner.



Your spouse

The person to whom you are legally married under applicable state or foreign law.



Your domestic partner

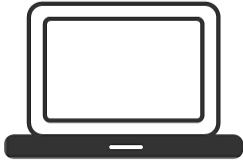
Same or opposite gender partner who shares a residence with you and depends on you for care and financial support.

know

When adding dependents to your benefits during annual enrollment, after a qualified life event and for all hires, you will be required to verify the eligibility of your dependents. Shortly after submitting your enrollment, you will receive an email from Cotiviti, an independent audit firm and partner of Fidelity, to complete the Dependent Eligibility Verification process. The email will detail how to submit proof of dependent eligibility.

How to Enroll in TI Benefits

You can sign up for benefits via:



1. Computer: Log in at NetBenefits.com/TI

- Enter your username and password. Then click “Log In.”
- From the home page, click “Start Enrollment.”
- Follow the on-screen prompts to review current coverage and enroll in benefits.



2. Smart phone or tablet: Log in to the **Fidelity NetBenefits app**—available through your app store



3. Phone: TI Benefits Center at Fidelity, 888-660-1411, option 1



Gain an understanding of your benefits and make the best decisions for you and your family.



Choose your benefits and then make your elections at NetBenefits.com/TI.

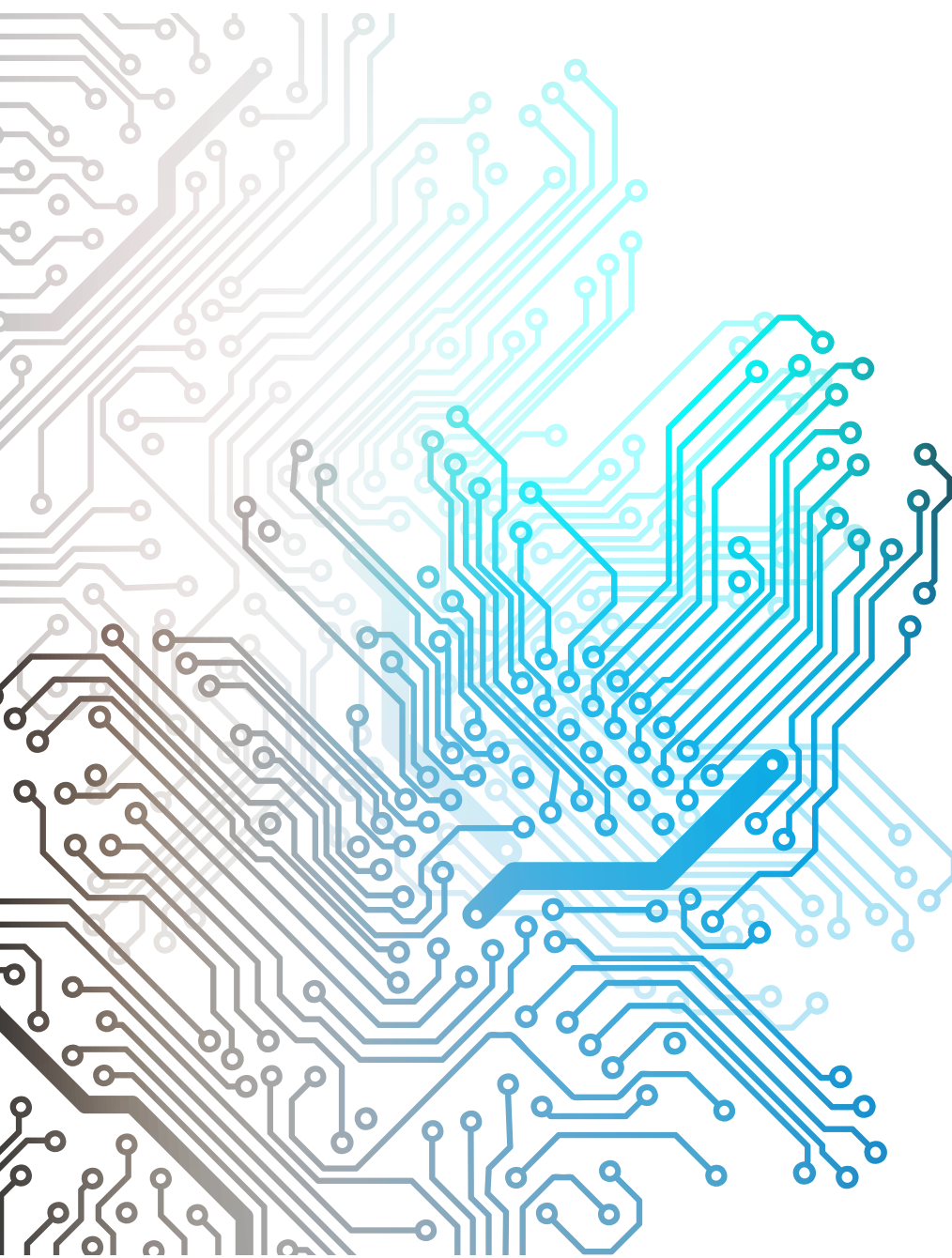
Not sure which plans are right for you?

Look for ALEX as you explore your benefit options on NetBenefits.com/TI.

ALEX can explain things you might not understand, like how much to contribute to your FSA, and help you make better decisions about your benefits overall.

Just click the icon whenever you see it to learn more.





Health & well-being

- Medical/pharmacy benefits
 - Health Savings Accounts
 - Flexible Spending Accounts
- Dental benefits
- Vision benefits
- Well-being programs

Medical/pharmacy benefits

The TI benefits program offers three choices for medical and pharmacy coverage based on your hire date and location in the U.S. For those hired after Jan. 1, 2012, the BCBS HDHP is the only plan option; the BCBS PPO and Kaiser HMO are not available to hires.

Nationwide

- Blue Cross Blue Shield (BCBS) HDHP (**only option for those hired after Jan. 1, 2012**)
- BCBS PPO (**only an option for those hired prior to Jan. 1, 2012**)
- As of Jan. 1, 2023, TI will no longer offer the Blue Cross Blue Shield PPO plan. It remains open for participation in 2022, but the high cost of the plan and low participation have resulted in the decision to eliminate it.

Northern California

- Kaiser HMO Northern California (**only an option for those hired prior to Jan. 1, 2012**)

No-cost preventive care

All three plans provide preventive care at zero cost to you or your insured spouse or domestic partner and/or dependents¹. These services help detect risks and health problems early when they are easiest to treat. Services include:

- Annual physicals
- Mammograms and other preventive screenings
- Prenatal and well-child care
- Routine immunizations
- Obesity/weight-loss programs
- Tobacco cessation programs ([See page 14 for more information.](#))

For a complete list of services, visit the [U.S. Preventive Services Task Force website](#) or type [uspreventive/](#) in Infolink.



Sign up for Wondr, a 10-week online weight-loss program that's free for BCBS medical plan participants. Type [usweightloss/](#) in Infolink to learn more about the program and find out when the next class starts.

¹ Preventive services are 100% covered for in-network providers. Out-of-network providers are covered at 100% of the allowable amount designated in your plan. You may have to pay fees above the allowable amount.

² Specialty drugs are available for BCBS plan participants through the CVS Caremark Specialty Pharmacy. You pay 10% coinsurance. For Kaiser, you pay a \$30 copay for up to a 30-day supply.

Prescription drug benefits

Coverage for prescription drugs is included in the BCBS HDHP and PPO through CVS Caremark. The CVS Caremark network has more than 68,000 pharmacies, including retail locations as well as online and mail-order options.

What you pay for your prescriptions is determined by your medical plan, if you request a 30- or 90-day supply, and the designated drug classification² (generic drugs—the lowest-cost option, preferred brand-name drugs or non-preferred brand-name drugs).

You can fill your prescriptions at any in-network pharmacy, but filling at a CVS Pharmacy or through CVS Mail Service may reduce your out-of-pocket expenses.

If you elect to take a brand-name drug when a generic is available, you will be responsible for paying the difference between the two, as well as coinsurance. This difference does not contribute toward your deductible or out-of-pocket maximum.



Contact CVS Caremark to determine the [classification and cost of your regular medications](#). If your drugs are in a higher classification, consider speaking with your health care provider to see if cheaper alternatives are available.

Behavioral health care benefits

You are eligible to receive behavioral health care under medical insurance following the same rules for deductibles, copays and coinsurance as other expenses in your plan. However, you are encouraged to call Magellan Ascend, 800-888-2273, to access free counseling through [work-life resources \(EAP\)](#) before seeking behavioral health care.

Behavioral health care covers a wide range of issues and illnesses, including:

- Psychological problems and mental illness
- Substance abuse or addiction
- Family/relationship concerns
- Work performance/career issues
- Eating disorders

2022 TI medical and pharmacy plans

The chart below gives a side-by-side comparison of TI medical and pharmacy coverage. Note: The only plan option available for those hired after Jan. 1, 2012 is the BCBS HDHP. For more details, consult the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#), available on [NetBenefits.com/TI](#) or by typing [usmedical/](#) in Infolink. Deductible, copay and coinsurance reflect your part of the cost.

	BCBS HDHP Nationwide (All employees)	BCBS PPO Nationwide (Employees hired before 2012)	Kaiser HMO Northern California (Employees hired before 2012)
Medical/behavioral health expenses			
Annual deductible (individual/family)	In-network: \$1,500/\$3,000 Out-of-network: \$1,500/\$3,000 ¹	In-network: \$400/\$800 Out-of-network: \$400/\$800 ²	\$0/\$0
Annual out-of-pocket maximum (individual/family)	In-network: \$3,000/\$6,000 Out-of-network: \$6,000/\$12,000 ¹	In-network: \$3,000/\$6,000 Out-of-network: \$6,000/\$12,000 ²	\$1,500/\$3,000
Annual hospital copay	\$0	In-network: \$0 Out-of-network: \$300	NA
Preventive exams and screenings	100% covered	100% covered	100% covered
Coinsurance you pay after deductible is met			Copays
Doctor office visit	In-network: 10% Out-of-network: 50%	In-network: 10% Out-of-network: 50%	\$20
MDLIVE virtual visit	In-network: 10%	In-network: 10%	NA
Medical Nutrition Therapy	In-network: 10%	In-network: 10%	NA
Behavioral health care office visit	In-network: 10% Out-of-network: 50%	In-network: 10% Out-of-network: 50%	\$20
Hospitals/facilities (inpatient and outpatient)	In-network: 20% Out-of-network: 50%	In-network: 20% Out-of-network: 50%	\$500 per admission \$100 outpatient
Prescription expenses³			
Annual deductible	Applies to medical deductible ⁴	\$0	\$0
Annual out-of-pocket maximum (individual/family)	Applies to medical out-of-pocket maximum	In-network: \$4,000/\$8,000 Out-of-network: \$4,000/\$8,000	Applies to medical out-of-pocket maximum
Coinsurance/maximum amount you pay			Copays
Generic drugs	30-day in-network: 20%/\$25 max 30-day out-of-network: 45% 90-day mail-order: 20%/\$75 max	30-day in-network: 20% 30-day out-of-network: 45% 90-day mail-order: 20%	30-day in-network: \$15 100-day mail-order: \$30
Preferred brand-name drugs	30-day in-network: 30%/\$75 max 30-day out-of-network: 60% 90-day mail-order: 30%/\$225 max	30-day in-network: 30% 30-day out-of-network: 60% 90-day mail-order: 30%	30-day in-network: \$30 100-day mail-order: \$60
Non-preferred brand-name drugs	30-day in-network: 50%/\$100 max 30-day out-of-network: 60% 90-day mail-order: 50%/\$300 max	30-day in-network: 50% 30-day out-of-network: 60% 90-day mail-order: 50%	30-day in-network: \$30 100-day mail-order: \$60



Certain services, including outpatient services, inpatient admissions and advanced imaging, will require pre-authorization from BCBS. If your provider is in-network, they will manage this for you. If your provider is out-of-network, have your provider contact BCBS to get pre-authorization and to avoid higher than expected billing.

¹ The HDHP family annual deductible and out-of-pocket maximum for medical/behavioral health care applies to you + spouse, you + child and you + family coverage and are met when all medical and pharmacy claims add up to the family deductible and maximum out-of-pocket amount. The annual deductible and out-of-pocket maximum does not include charges not covered by the plan or exceeding the allowable amount of other plan limits or the difference in cost between a generic and brand-name drug when a generic is available but a brand-name drug is purchased.

² The PPO annual deductible and out-of-pocket maximum for medical/behavioral health care does not include out-of-network annual hospital copays, brand penalties for prescription drugs, charges not covered by the plan, exceeding the allowable amount of other plan limits or pharmacy costs.

³ Specialty drugs are available for BCBS plan participants through the CVS Caremark Specialty Pharmacy. You pay 10% coinsurance. For Kaiser, you pay a \$30 copay for up to a 30-day supply.

⁴ You will pay 100% of prescription costs until you meet your medical deductible under the HDHP. Then you will pay coinsurance up to the maximum amount per prescription.



Before you schedule an appointment, verify your health care provider is in-network by contacting BCBS or Kaiser. This will save you money and simplify billing to insurance.



If you are 65+ and actively working, you do not need to enroll in Medicare. The active TI benefits program will continue to serve as your primary insurance coverage until your retirement.

If you enroll in Medicare while you are also enrolled in an HDHP, you will not be able to contribute to an HSA.

2022 TI medical plan monthly premiums

Note: The only plan option available for those hired after Jan. 1, 2012 is the BCBS HDHP.

	BCBS HDHP Nationwide (All employees)	BCBS PPO Nationwide (Employees hired before 2012)	Kaiser HMO Northern California (Employees hired before 2012)
You only	\$90	\$275	\$270
You + spouse/domestic partner	\$240	\$910	\$550
You + child(ren)	\$210	\$770	\$530
You + family	\$370	\$1,275	\$770

All TI medical plans are subject to a monthly tobacco surcharge

If you and/or your covered spouse or domestic partner uses tobacco products, there will be an additional charge of \$30 per month for each covered adult tobacco user, with a maximum of \$60 per month.

You can avoid paying the surcharge if you can attest that you completed a formal tobacco cessation program, regardless of whether you actually stop using tobacco products. To change your tobacco user status, contact the TI Benefits Center at Fidelity, 888-660-1411, option 1. [See page 14 for free resources to quit](#) or type [stopforgood/](#) in Infolink.

Business travel medical benefits

You may be eligible for medical benefits when you are traveling outside your home country for business and for a maximum of seven days of personal travel before or after your trip. The benefit, offered through UnitedHealthcare Global, covers you and your dependents traveling with you and covers 100% of medical expenses during illness or injury, prescription drugs and emergency medical evacuation.

Coordinators are available 24 hours a day, seven days a week.

Contact

- **Phone:** 866-870-3475
- **Email:** businesstravel@uhcglobal.com
- **Online:** members.uhcglobal.com

Type [travelmedical/](#) in Infolink to learn more.

Personal travel assistance

With TI-paid basic life insurance, you can take advantage of free medical assistance and evacuation when the unexpected happens while on personal travel. [See page 23 to learn more.](#)

Health Savings Accounts

Your BCBS HDHP can be paired with a [Health Savings Account \(HSA\)](#). This allows you to contribute up to \$3,650 (individual) or \$7,300 (family) annually on a before-tax basis through payroll deductions to cover IRS-qualified medical expenses¹. The HDHP is the only plan available for Tiers hired after Jan. 1, 2012.

TI contributes to your HSA at the beginning of the calendar year

For individual coverage, TI contributes \$750 annually²; for all other levels, the contribution is \$1,250². This helps offset what you will pay up front for your deductible and out-of-pocket costs at the start of the year.

HSAs are employee-owned and funded, so if you leave TI, your HSA and all funds go with you. In addition, you never lose any of the contributions you put into the account. Instead, they roll over from year to year and can be used to pay for health care costs—even into retirement.

Flexible Spending Accounts

TI also offers you the opportunity to save money for health care and dependent care on a before-tax basis through [Flexible Spending Accounts \(FSA\)](#). Tiers can choose from three FSA options:

FSA	Max annual contribution	Eligible expenses	Use with
Health care	\$2,750	Qualified medical, dental and vision expenses	Kaiser HMO, BCBS PPO or no coverage
Dental/vision	\$2,750	Qualified dental and vision expenses	BCBS HDHP + HSA
Dependent daycare ³	\$5,000	Qualified childcare or elder care expenses	NA

With an FSA, Tiers make contributions through paycheck deductions and then file claims for health care and dependent daycare costs throughout the calendar year. You will not receive reimbursement for daycare costs until your contribution is credited to your FSA.

¹ HSA annual contribution limits are set by the IRS. 2022 limits are set at \$3,650 for an individual or \$7,300 for a family, which includes your contribution plus TI's contribution. You can save an additional \$1,000 catch-up contribution annually if age 55 or older by year-end.

² The TI annual HSA contribution assumes you are enrolled in the HDHP on Jan. 1, 2022. If you enroll later in the year, the contribution will be pro-rated based on enrollment date.

³ If you are married, both you and your spouse must be employed to participate in the dependent daycare FSA.

3 ways you save with an HDHP and HSA

The combination of the HDHP and HSA can help you save money on your health care costs. Here's how:


1 In a side-by-side comparison, you will pay less for the premiums and deductible for the BCBS HDHP vs. the BCBS PPO or Kaiser HMO. Note: The only plan option available for those hired after Jan. 1, 2012 is the BCBS HDHP.

Annual costs (Employee only)	BCBS HDHP Nationwide (All employees)	BCBS PPO Nationwide (Employees hired before 2012)	Kaiser HMO Northern California (Employees hired before 2012)
Annual premium	\$1,080	\$3,300	\$3,240
Annual deductible	\$1,500	\$400	\$0
TI annual contribution	-\$750	\$0	\$0
Total cost before coinsurance	\$1,830	\$3,700	\$3,240

2 Preventive care services are covered at 100%, limiting your out-of-pocket costs for screenings and treatments that keep you healthy and discover illness earlier when they're easier to treat.

3 Your HSA offers triple-tax savings thanks to:

- tax-free contributions
- tax-free use for medical expenses
- tax-free interest earned on any HSA money you invest

-  Consider contributing at least enough to your HSA each year to pay your deductible and out-of-pocket maximum. Remember, whatever you save now, you keep to use for health care costs later, even into your retirement.
- Estimate your health care expenses for the year. This will help you determine how much money to contribute to your health care or dental/vision FSA. Remember whatever you save through an FSA in 2022, you have to use it or lose it by the end of the year.

How Health Savings Accounts differ from Flexible Spending Accounts

The chart below gives a side-by-side comparison of Health Savings Accounts and Flexible Spending Accounts.

Health Savings Accounts	vs.	Flexible Spending Accounts
Employee owned and funded	Ownership	Employer owned but employee funded
\$750 for individual coverage, \$1,250 for all other levels	TI company contribution	\$0
IRS funding limit ¹ : \$3,650 individual/\$7,300 family + \$1,000 catch-up contribution for 55+ Can withdraw funds that are present in the account only	Annual funding limits	Contribution limit for medical, dental and vision: \$2,750 Contribution limit for dependent daycare: \$5,000
Triple-tax advantage: 1. Money contributed tax free 2. Withdrawals for qualified expenses are tax free 3. Interest earned on account balance is tax free	Tax advantage	Double-tax advantage: 1. Money contributed on a before-tax basis 2. Withdrawals for qualified expenses are tax free
Use funds to pay for IRS-qualified medical, dental and vision expenses	Qualified expenses	Use funds to pay for IRS-qualified medical, dental and vision expenses and/or dependent daycare
Money rolls over year after year and can be used for healthcare costs in retirement	Carryover of unused funds	Use it by the end of the plan year or lose it
Requires enrollment in BCBS HDHP	Insurance requirements	- Health care FSA is eligible for use with BCBS PPO, Kaiser or no coverage - Dental/vision FSA is eligible for use with the BCBS HDHP - No insurance requirements for dependent daycare
Can invest funds	Investment options	No investment option
Portable	Portability	No portability
Yes, issued by Fidelity	Debit card	No
Can withdraw funds (taxed as income and subject to 20% penalty; no penalty when you reach age 65)	Non-medical withdrawals	No withdrawal option



If you are covered under the BCBS HDHP and have an HSA, you can elect a dental/vision FSA for the current year, preserving any portion of your HSA that would be used for such expenses for future use. If you decide not to have an FSA, you can use the HSA for your IRS-eligible dental and vision expenses.

Invest your HSA dollars to help build tax-free savings for future qualified medical expenses. Any investment growth is federally tax-free and can help you prepare for retirement.

¹ The IRS funding limit includes your contribution plus TI's contribution.

Dental benefits

Choose from two nationwide dental plans from Delta Dental or one plan from Aetna that is only available in specific U.S. locations.

2022 TI dental monthly plan premiums

	Delta Dental Basic Nationwide	Delta Dental Plus Nationwide	Aetna DMO Various locations
You only	\$6	\$24	\$5
You + spouse/ domestic partner	\$13	\$50	\$11
You + child(ren)	\$15	\$56	\$11
You + family	\$21	\$79	\$17



If you are planning for braces or other orthodontia for you or someone on your plan, make sure you review the plans and choose the correct coverage. The Basic plan does not include orthodontia services.

¹ Maximum plan allowance reimbursement limits apply if you don't use an in-network provider.

2022 TI dental plan options

For more details, consult the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#), available on [NetBenefits.com/TI](#) or by typing [usdental/](#) in Infolink. Deductible, copay and coinsurance reflect your part of the cost.

	Delta Dental Basic Nationwide	Delta Dental Plus Nationwide	Aetna DMO Various locations
General dental expenses			
Annual deductible (individual/family)	\$50 per person (applies to basic and major services)	\$50 per person (applies to basic and major services)	\$0/\$0
	You may receive treatment from any dentist. However, dentists in the Delta Dental network must negotiate their rates, resulting in lower fees ¹ .		\$5 office copay for all treatment. However, limits and exclusions may apply to services.
Annual maximum the plan will pay	\$1,000	\$2,000	No maximum
Preventive care			
Primary covered services	Oral exam, preventive X-rays, cleanings		
Preventive care benefits	0% coinsurance		0% coinsurance after a \$5 copay
Basic services			
Fillings	30% coinsurance	10% coinsurance	0% coinsurance after a \$5 copay
Major services			
Crowns, dentures, bridges, oral surgery, surgical periodontics, implants	60% coinsurance	40% coinsurance	40% coinsurance after a \$5 copay
Endodontics	60% coinsurance	40% coinsurance	0% coinsurance for anterior and bicuspid teeth, 40% coinsurance for molars—both after a \$5 copay
Orthodontia services			
Benefits (adult/child)	Not covered	50% coinsurance	50% coinsurance
Lifetime maximum the plan will pay	NA	\$1,500	Limited to 24 months comprehensive treatment + 24 months retention

Vision benefits

Vision benefits are available through VSP, which offers a network of ophthalmologists, optometrists and vision-care centers for all your eye care needs. You can receive benefits from any eye care provider you choose. However, out-of-pocket costs are generally lower when you use a VSP network provider.

For more details, consult the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#), available on [NetBenefits.com/TI](#) or by typing [usvision/](#) in Infolink.

Exams and other services	You pay:
Routine exams	In-network: \$10 copay Out-of-network: \$10 copay; plan pays up to \$50 for exam
Lenses and frames	\$25 copay for frames and lenses purchased at the same time ¹
Frames	In-network: \$25 copay + 20% discount on amount over frame allowance; plan pays up to \$160 for frames Out-of-network: plan pays up to \$70 for frames
Single vision	In-network: \$25 copay Out-of-network: \$25 copay; plan pays up to \$50 for single-vision lenses
Bifocal	In-network: \$25 copay Out-of-network: \$25 copay; plan pays up to \$75 for bifocal lenses
Standard progressive lenses	In-network: \$25 copay Out-of-network: \$25 copay; plan pays up to \$75 for standard progressive lenses; additional copays apply to custom and premium progressive lenses
Contact lenses	Plan pays:
Elective	In-network: Up to \$200 allowance for contacts; 15% savings on contact lens exam ² Out-of-network: Up to \$200 allowance, combined in- and out-of-network
Laser vision correction	Plan pays:
Elective	In-network: \$0; discounts available; VSP doctor coordinates referrals to participating VSP laser-surgery centers. Out-of-network: Not covered

¹ Includes UV protection. Non-UV tints, special lenses and scratch-resistant coatings are excluded. However, you may purchase them at a discounted rate when you use a VSP-preferred provider.

² Special rebates and other pricing advantages are available on popular brands of contacts. Visit [vsp.com](#) for details.

³ If you choose contact lenses, you are not eligible for frames until the next benefit period, beginning Jan. 1.

2022 TI vision-plan coverage and costs

The TI vision plan includes:

- One vision exam per calendar year
- Contact lenses or eyeglass lenses³ per calendar year
- Eyeglass frames once every two years

2022 TI vision plan monthly premiums

	VSP vision plan
You only	\$12.43
You + spouse/domestic partner	\$19.36
You + child(ren)	\$19.78
You + family	\$31.85



VSP offers a vision savings pass for Tlrs and dependents. You can purchase vision care services and materials at predetermined discount rates from VSP-preferred providers—whether or not you have coverage under the TI vision plan. Type [usvision/](#) in Infolink for a full list of savings and services.

Well-being programs

At TI, we care about you as a whole person. That's why we offer a variety of well-being programs to help you and your dependents stay healthy.

Work-life resources

TI automatically offers work-life resources (formerly Employee Assistance Program or EAP) to help you and your household members with personal, job or family issues. These services, administered by [Magellan Ascend](#), are provided at zero cost and are available 24 hours a day, seven days a week.

The EAP offers eight free counseling sessions per situation per 12-month period, including:

- Stress, anxiety and depression
- Grief and loss
- Conflict resolution
- Work-life challenges
- Life changes
- Divorce or separation
- Substance abuse
- And more

Magellan's clinical team helps match you with a provider that meets your unique needs. Counseling sessions are private and confidential and are not disclosed to TI. Virtual therapy options include phone, video, text and live chat.

Magellan Ascend also offers myStrength, a web- or app-based program that you learn and practice skills for coping with everyday stressors. The program teaches users about managing stress, anxiety and depression, improving sleep and mindfulness, balancing emotions and trauma through interactive self-paced lessons, self-monitoring and coaching.

Be sure to also check out Magellan Ascend's online library of tools, self-assessments, webinars and more on childcare and parenting, adult care and aging, travel, education, adoption, career help and other common issues, available on its website.

Visit magellanascend.com or call 800-888-2273 to learn more.



If additional services are needed beyond the initial eight sessions, the EAP will refer you to your medical plan provider for assistance with benefit coverage and treatment.

Alternative ways to see the doctor

If you can't get away from the office to see your doctor or need one close to campus, try one of these options:

BCBS MDLIVE virtual visits

If you have a BCBS medical plan, you can visit with one of the independently contracted doctors with MDLIVE from the comfort of your home or office. Call or access MDLIVE online 24 hours a day, seven days a week, to be connected with an available doctor or schedule a future appointment. Doctors are board-certified and provide treatment for nonemergency medical or pediatric health issues, including cold and flu, nausea, pinkeye, sinus infections and more.

How to connect

Phone: 888-680-8646

Internet: mdlive.com/bcbstx

MDLIVE app: available from your app store

Baylor Scott & White Occupational & Family Health Center at Texas Instruments

In the Dallas area? Use the health center located across from North Campus. The clinic has two doctors and a nurse practitioner available 7 a.m.–7 p.m., Monday–Friday, to address your immediate health care needs. Services offered include preventive health, disease management and immunizations. After your first visit, you have the option for virtual visits (e-visits) with Baylor Scott & White (BSW) clinic doctors.

How to connect

Phone: 972-817-6200

Internet: bswhealth.com

BSW app: MyBSWHealth, available from your app store



If you are traveling for business, visit the Baylor Scott & White clinic for travel immunizations, prescriptions and more. Just let them know where you're going, and they've got you covered.

BCBS 24/7 Nurseline - New for 2022

Get answers to your health questions when you need them — 24 hours a day, 7 days a week. When a health problem pops up late in the day or in the middle of night, it can be hard to know how serious it is. Should you go to the emergency room? Urgent care? Or can it wait until you can see your regular doctor? The 24/7 Nurseline can help answer your health questions, day or night.

Plus, when you call, you can access an audio library of more than 300 health topics – from allergies to surgeries – available in English and Spanish.

How to connect

Phone: 877-351-8392

TTY toll-free: 800-386-4424

BCBS Women's & Family Health - New for 2022

Whether you are pregnant or planning to get pregnant, you should prepare as much as you can. BCBS is here to help you with the following resources:

- Ovia Health apps feature health trackers and provide videos, tips, coaching and more.
- Well on Target has self-management programs about pregnancy that you can take online, covering topics such as healthy foods, body changes and labor.
- Our maternity specialists will support you by phone from early pregnancy until six weeks after delivery if your pregnancy is high-risk.

Get your free flu shot

You and your dependents can get your annual flu shot using your TI-sponsored medical benefits at:

- At any in-network pharmacy, including CVS, Walgreens, Walmart, Target and major grocery store chains if you have BCBS medical insurance
- At any CVS pharmacy if you show your Caremark pharmacy insurance card
- At an in-network provider's office

Be sure to show your medical or pharmacy ID card to ensure you receive your shot for free.

Type [flushots/](#) in Infolink to learn more.

Tobacco cessation

Tlerters can quit using tobacco products without cost through [smokefree.gov](https://www.smokefree.gov) and the [QuitGuide app](#), which helps you understand your smoking patterns and build the skills you need to become and stay smoke free.

Type [stopforgood/](#) in Infolink to learn more and discover other for tobacco cessation resources available through our benefits programs.



Your tobacco habit is costing you more than you might realize. If you and/or your spouse or domestic partner regularly use tobacco products, you are subject to a \$30-per-month charge on medical premiums, up to \$60 per month and higher life insurance premiums (employee only).

You can avoid paying the surcharge if you can attest that you completed a formal tobacco cessation program, regardless of whether you actually stop using tobacco products.

To change your tobacco user status, contact the TI Benefits Center at Fidelity, 888-660-1411, option 1, any time during the year.

Fitness centers and walking paths

Need a new gym or want to start a new fitness routine? Consider working out on your TI campus. Many locations, including Dallas, RFAB, Santa Clara, Sherman, Sugar Land and Tucson, have fitness centers for use by Tlerters and family members¹. Most are offered free of charge.

In addition, some TI facilities have outdoor walking paths or routes mapped inside TI facilities. Type [usfitness/](#) in Infolink for a full list of U.S. fitness centers and walking paths.



BCBS medical plan participants have access to discounts with local gyms and workout facilities. For more information, visit [bcbstx.com](https://www.bcbstx.com).

¹ Not applicable at all sites. Please contact the fitness center at your location to determine rules for access and if family members are allowed.

Weight loss and nutrition

BCBS medical plan participants who want to lose weight or learn more about eating healthy can participate in [Wondr](#), a 10-week online program that is free for participants 18 and over. You'll have free access to online coaching, informative videos and other simple learning tools to help you lose weight and improve your health, as well as 42 weeks of online support after you've completed the program. You can access Wondr from your computer or the Wondr app, available on your app store.

Enrollment

Type [usweightloss/](#) in Infolink to learn more about the program and find out when the next class starts. Space is limited, so make sure you are committed to completing the program before applying.

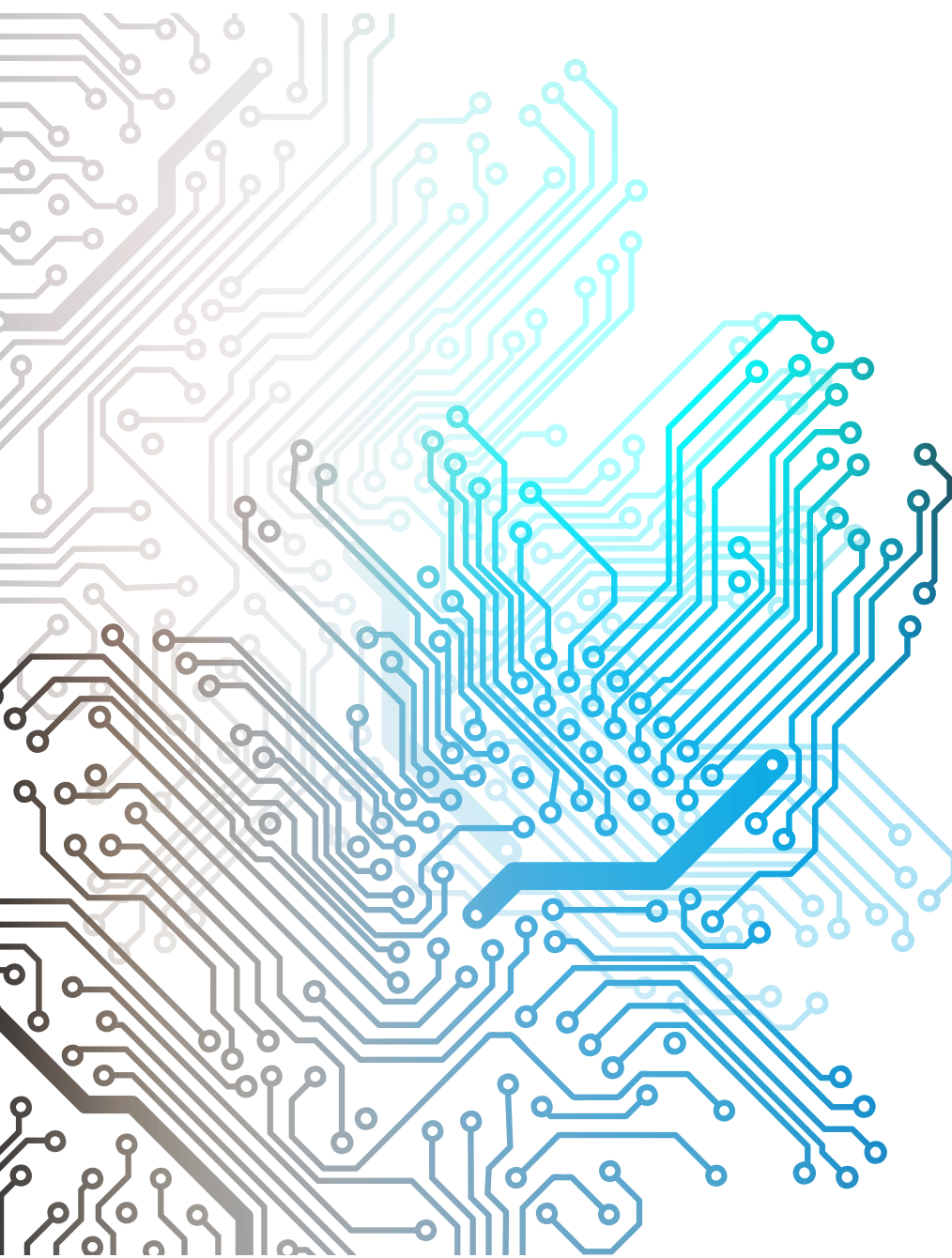
Mothers rooms

To help nursing mothers, TI provides private rooms to express breast milk. Rooms are available at major U.S. sites and include a refrigerator, sink and pump. Mothers can purchase (at their own expense) a personal attachment kit to use with the pump.

For a full list of nursing rooms, type [usmothers/](#) in Infolink.



Nursing mothers traveling for business in the U.S. or abroad can request reimbursement for shipping milk home. Type [usmothers/](#) in Infolink for additional information.



Paid time off

- Time Bank
- Holidays
- Leaves of absence

Paid time off

Time Bank

As a Tler, you are eligible to take time off for vacation, personal activities, time with family—anything you want—using Time Bank.¹ You'll accrue up to 30 days (240 hours) annually based on your years of service.²

Service years	Days per year
0 - 4	20 days (160 hours)
5 - 14	25 days (200 hours)
15+	30 days (240 hours)

Visit [UStimeBank/](#) to learn more about changes to our paid time off beginning in 2022, find answers to frequently asked questions and watch an overview video on how the changes work.

Eligibility

You are eligible for Time Bank if you are:

- A full-time employee
- A part-time employee on an alternative work schedule (minimum 20 hours per week)
- In an intern program (minimum 20 hours per week)

¹ For more information about the interaction between Time Bank and paid sick leave laws in certain states and municipalities, type [sicktime/](#) in Infolink.

² Consult the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#) for current accrual rates and carryover rules.

Paid holidays

New Year's Day	Labor Day
Martin Luther King (MLK) Jr. Day - New!	Thanksgiving Day
Presidents Day - New!	Friday after Thanksgiving
Spring holiday/Good Friday	Winter holiday/Christmas Day
Memorial Day	Floating holiday (usually observed before or after Christmas Day)
Independence Day	

Bereavement

New for 2022: Tlers will receive up to 5 days of paid time off (per incident) for bereavement of a family member. This will keep you from having to use your Time Bank during a difficult time. If additional time off is needed, Time Bank hours can be used.

Jury duty and legal proceedings

Tlers who need to be absent from work to serve on a jury or as a subpoenaed witness are excused from work until released from service. To qualify for jury duty/legal proceeding pay, you must present the summons or subpoena to your supervisor prior to reporting for your scheduled jury/legal duty.

Salaried employees receive full salary for time spent on jury duty or as a subpoenaed witness. Hourly employees receive hourly pay for any regularly scheduled hours spent on jury duty or as a subpoenaed witness.

Your TI pay is in addition to any pay you may receive from the court. In addition, the payment for jury duty and time spent as a witness pursuant to a subpoena does not reduce your Time Bank hours.

Leaves of absence

When you have to be away from work for a long time, TI offers paid and unpaid leave options based on your unique situation.¹ Each of TI's leaves of absence has its own requirements, procedures and pay/benefit arrangements, as shown in the chart below.

Type	Reasons for leave	Time off	Benefits/ pay impact
Disability Pay Continuation (DPC)	Illness or injury	Short-term, up to 26 weeks	Details available on page 25
Maternity leave	Delivery/postpartum recovery	8 weeks starting with the date of birth, plus 4 weeks of paid parental leave as described below	100% of base pay
Long-term disability (LTD)	Illness or injury	Long-term, more than 26 weeks — benefits start in week 27 after DPC ends	Details available on page 25
Worker's compensation	Injury or illness in the course of employment ²	Varies—benefits are coordinated between worker's compensation and DPC/LTD	Income protection and medical benefits
Family and Medical Leave Act (FMLA)	Serious health condition of self or family member; caring for a newly born or placed child; caring for a seriously injured or ill service member; qualifying exigencies related to foreign deployment of family member in military	Up to 12 or 26 weeks in a 12-month period	Unpaid (unless Time Bank is used ³)
Paid parental leave ⁴ (for mothers, fathers)	Becoming a parent through birth, adoption or surrogacy	4 weeks, which: <ul style="list-style-type: none"> • Must be taken all at once • Must be completed within 12 months of the birth or placement of the child(ren) • Are limited to one paid parental leave per year • Runs concurrently with FMLA 	100% of base pay

Military leave

Tiers who need to be absent to satisfy a military obligation in the U.S. uniformed services are entitled to military leave. Special pay and other benefits may apply during your military leave. Contact your HR business partner to learn more.

Personal leave

Tiers may request unpaid leaves for personal reasons, including but not limited to formal education to improve opportunities at TI or extended campaigning for election or appointment to paid public office.

You must request approval in advance for such leaves. Speak with your HR business partner to learn more.



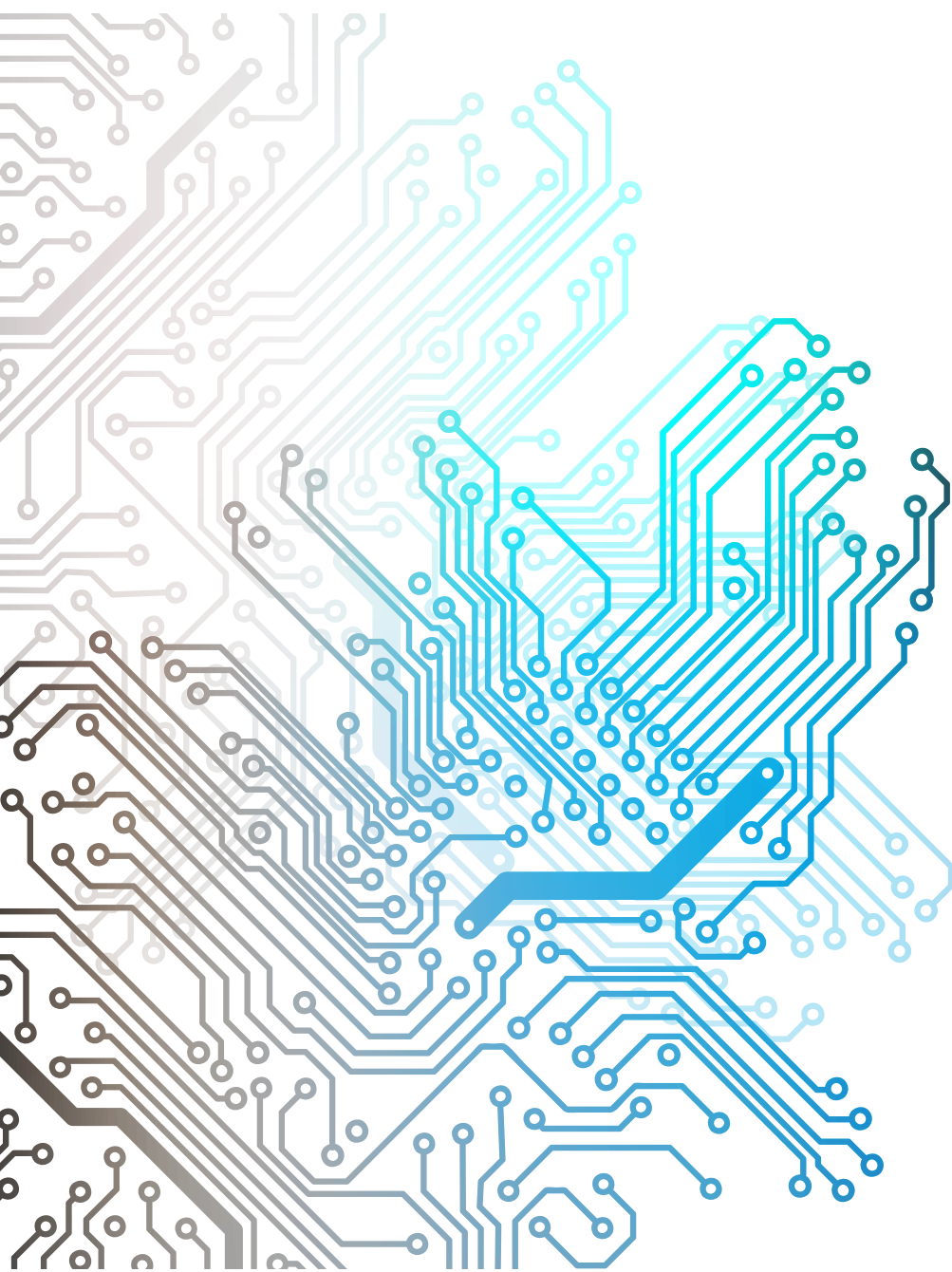
A leave of absence can impact your pay and benefits and access to TI facilities and computer networks. To discuss your unique situation, call HR Connect, 888-660-1411 and select:

- Option 1, for benefits
- Option 3, for payroll and access



Contact Sedgwick through HR Connect, 888-660-1411, option 5, to initiate TI disability, maternity, parental or FMLA leave requests.

¹ In addition to the leaves described here, time off will be granted when required by applicable law.
² If you experience a work-related injury or illness, notify your supervisor immediately and report the injury through HR Connect, 888-660-1411, option 4.
³ Employees are required to use Time Bank if using FMLA for their own serious health condition for any time when not receiving other paid leave benefits.
⁴ Additional unpaid leave may be available under FMLA at the end of paid parental leave, up to a maximum of 12 weeks in a 12-month period (Paid parental leave counts toward this 12-week maximum).



Compensation

- Profit sharing
- Employees Stock Purchase Plan (ESPP)

Profit sharing

Tiers worldwide can share in TI's success thanks to our profit sharing program. Eligible Tiers receive profit sharing when the company achieves 10% or more profit from operations (PFO). The payout increases as PFO increases with a maximum payout of 20% when PFO reaches 35%.

Profit sharing is calculated based on your eligible earnings, including straight time, holiday time and Time Bank. Overtime premiums, shift and other premiums and bonuses are not included in your base pay.

How TI calculates payouts

2% when = 10% PFO

+0.5% when > 10% PFO

+1% when > 24% PFO

Example for profit sharing at \$50,000 salary at 12% PFO

$\$50,000 \times (2\% + 0.5\% + 0.5\%) = \$1,500$

¹ TI interns are not eligible for profit sharing.

Employee eligibility

Employees must meet one of the following criteria to be eligible for profit sharing:

- Employed by TI on Dec. 31¹
- Retired during plan year and age 55 with 10 years of service or age 65+
- Terminated during plan year due to death or total and permanent disability
- Terminated during plan year due to reduction in force or mutual separation package (with signed waiver if applicable)

For more information, type [profitsharing/](#) in Infolink. The site includes information on past performance, current year performance and the payout matrix.



You can contribute your profit sharing payout to your 401(k) or Health Savings Account (HSA). Call the TI Benefits Center at Fidelity, 888-660-1411, option 1, to learn more.

Employees Stock Purchase Plan (ESPP)

If you have considered purchasing TI stock, the TI Employees Stock Purchase Plan (ESPP) offers you the opportunity to buy TI stock at a 15% discount based on the fair market value (the close price of TI common stock reported on wsj.com) on the automatic purchase date. Hold it or sell it, it's a great way to share in the potential growth of TI stock. There are four offerings each year when you can purchase TI stock at a discount.

Eligibility

Tiers, including those on paid or unpaid leave of absence who are expected to return to work¹, can participate in the ESPP, provided they are employed on the eligibility date for each offering period. The eligibility date is generally the first trading day of the month prior to the offering period. It is also the date when the stock price is set to determine the maximum shares available to you.

Contributions

As an ESPP participant, you decide how much you want to contribute based on your salary and the maximum contribution allowed. Your maximum contribution is the lower of 2.5% of your annualized base salary or \$5,312 (U.S.). Contributions are made through automatic payroll deductions when you elect a percentage of your annualized base salary or the max contribution allowed.

Contribution Example

Maximum contribution using a \$50,000 annualized base salary:

- $\$50,000 \times 2.5\% = \$1,250$ —this is the amount you can contribute.
- To calculate the amount per paycheck, divide by the number of pay periods in the offering: $\$1,250 \div 6 \text{ pay periods} = \208.33 per pay period.

How to enroll

TI's ESPP is administered, including managing enrollments, cancellations and sales, by UBS Financial Services Inc. To enroll:

- Log on to the [UBS One Source web site](#). First-time visitors can click on “Enroll Now in your ESPP Plan” to obtain a password. You will use your TI employee number without the “a” as your “Employee ID” and your date of birth (MMDDYYYY) as your assigned PIN.
- Call UBS Financial Services Inc. at 800-597-7516 (toll free) or 201-352-3944. Customer service representatives are available 3 a.m.–11 p.m. Eastern time, Monday–Friday, on days when the New York Stock Exchange is open.

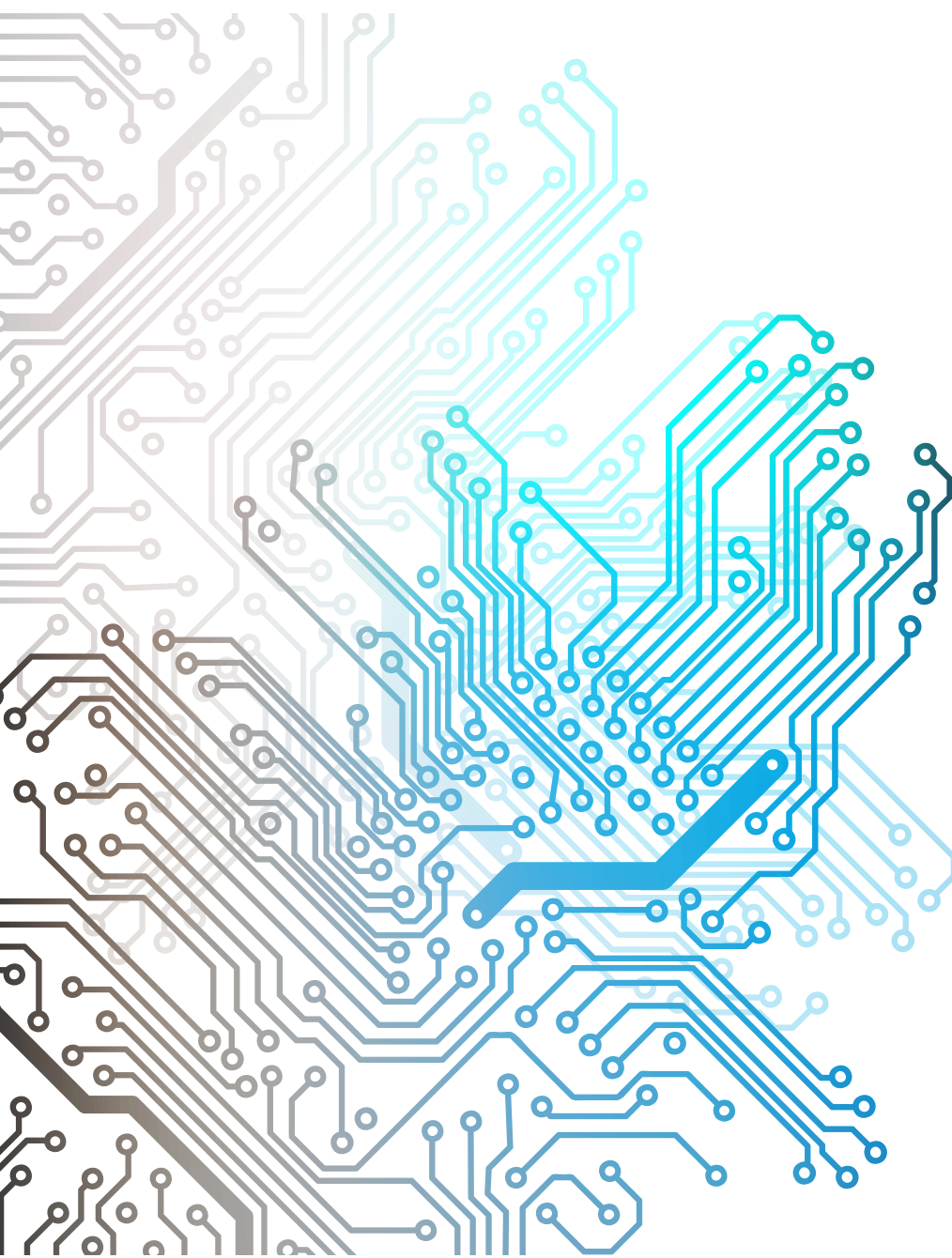
Once enrolled, your contributions will be used to automatically purchase shares on the first trading day after the offering ends. Any money remaining in your account (not enough to buy a whole share) will be refunded via payroll.

For full plan details, future offerings and a timeline, type [espp/](#) in Infolink.



When you purchase stock through the ESPP, you have the potential to earn dividends. For more information on TI stock dividends, visit the [TI Investor Relations website](#).

¹ TI interns are not eligible for ESPP beginning with the Q1 2022 offering (offered in December 2021).



Income protection

- Life insurance
- Accidental death and dismemberment
- Disability benefits

Life Insurance

TI's [life insurance](#) benefits can help provide financial protection in the event of your death. Tiers are automatically enrolled in basic life insurance at no cost. You also have the option to purchase supplemental coverage for you and your eligible dependents.

Basic life insurance—100% paid by TI

- Equal to 1X your annual base salary, rounded to the nearest \$1,000
- Minimum coverage: \$50,000, regardless of salary level

Supplemental life insurance—100% paid by employee

Employee coverage

- Up to 8X your annual base salary, rounded to the nearest \$1,000
- Maximum coverage: \$2.5 million (basic + supplemental)

You are not required to complete an Evidence of Insurability (EOI) form for supplemental life as long as coverage does not exceed \$300,000, **and if**

- You are currently enrolled in supplemental life and increase such coverage by 1X your annual base salary during annual enrollment or upon a qualified life event¹,
OR
- You elect coverage within your first 30 days of hire

Spouse/domestic partner coverage

- Coverage options of \$5,000, \$10,000, \$25,000, \$50,000, \$100,000, \$150,000 or \$200,000
- Requires EOI for coverage of \$50,000 or more
- Maximum coverage: lesser of \$200,000 or up to 7X employee annual base salary rounded to the closest lower coverage option

Child coverage

- Coverage options of \$5,000 or \$10,000 per eligible child under age 26
- EOI not required

¹ For the full list of qualified life events, see qualified status changes in the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#).



- Tiers on personal travel will receive worldwide provider referral service for free medical assistance and evacuation as part of their basic life insurance coverage. Use this coverage when the unexpected happens while on personal travel.

- If you leave TI, you can convert your life insurance to a personal policy or take it with you under a portability option. For full details, consult the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#).



Don't forget to elect beneficiaries for your life insurance policy in [NetBenefits.com/TI](#). Beneficiaries can be individuals or organizations you select to receive benefits from your policy in the event of your death. You can designate a sole beneficiary or multiple beneficiaries and divide the money however you like.

Supplemental life insurance monthly rates per \$1,000 of coverage for employee and spouse/domestic partner

Age ¹	Employee		Spouse/domestic partner
	Non-tobacco user	Tobacco user	Non-tobacco/ tobacco users
Under 25	\$0.025	\$0.032	\$0.035
25–29	\$0.028	\$0.032	\$0.042
30–34	\$0.032	\$0.035	\$0.056
35–39	\$0.035	\$0.044	\$0.062
40–44	\$0.051	\$0.063	\$0.069
45–49	\$0.075	\$0.091	\$0.108
50–54	\$0.111	\$0.139	\$0.160
55–59	\$0.206	\$0.254	\$0.302
60–64	\$0.372	\$0.459	\$0.542
65–69	\$0.669	\$0.827	\$0.986
70 and over	\$0.989	\$1.236	\$1.458

Supplemental life insurance monthly rates for child(ren)

Coverage	Monthly rate
\$5,000	\$0.486/family ²
\$10,000	\$0.972/family ²

To calculate your monthly cost:

$$\text{_____} \times \$ \text{_____} \div \$1,000 \times \$ \text{_____}$$

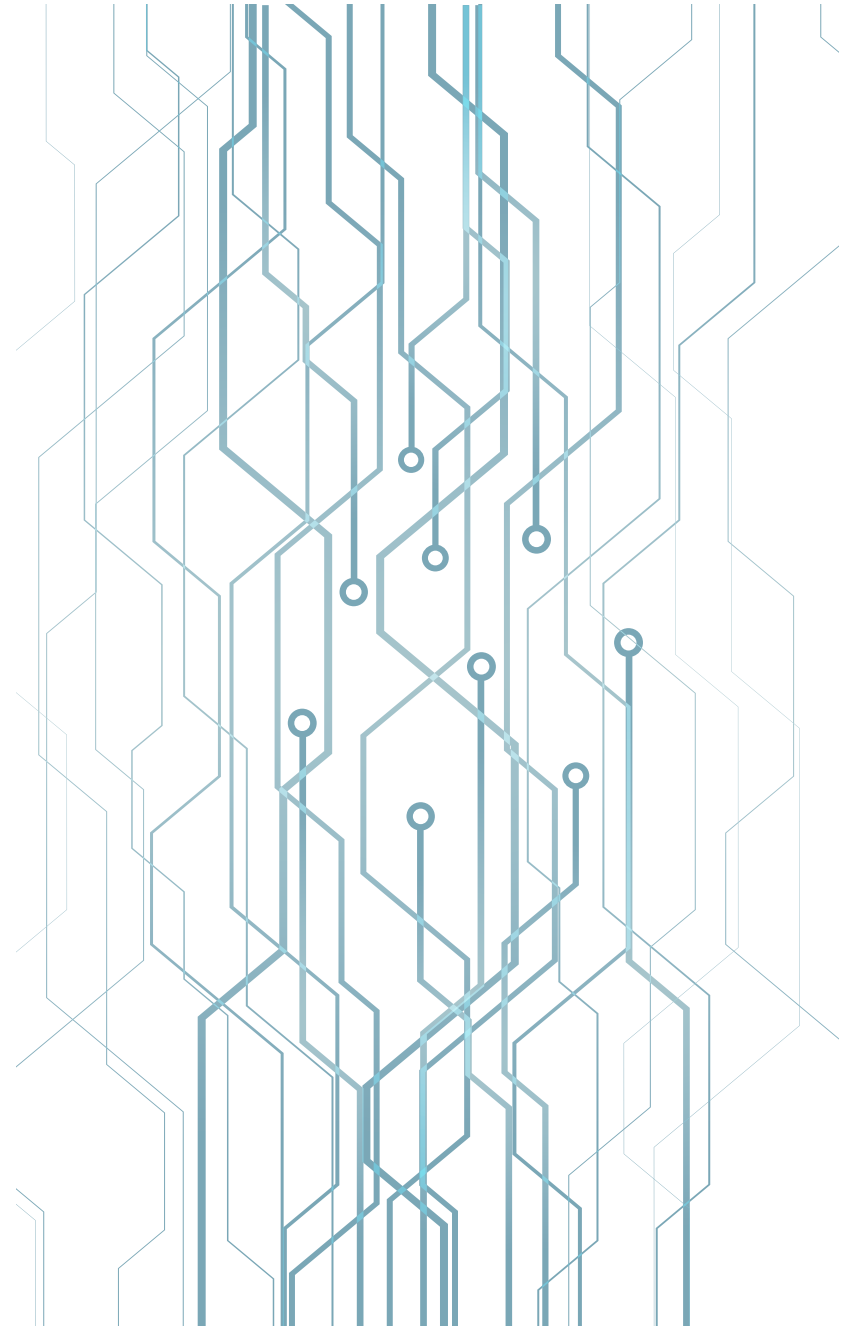
(coverage level x annual base salary ÷ \$1,000 x monthly rate)

Example for coverage at six times base annual salary of \$50,000, age 43, non-tobacco user:

$$6 \times \$50,000 \div \$1,000 \times \$0.051 = \$15.30 \text{ per month}$$

¹ Rates based on age as of Dec. 31, 2022.

² Supplemental life insurance monthly rates cover all children in your family regardless of whether it's one or multiple children.



Accidental death and dismemberment

TI offers accidental death and dismemberment (AD&D) insurance for Tiers and their dependents. This insurance pays out if you or your dependents die or are dismembered in a covered accident while at work, at home or traveling.

Employee coverage

- Up to 10X your annual base salary, rounded to the nearest \$1,000 or a flat coverage rate of \$200,000
- Minimum coverage: \$10,000
- Maximum coverage: \$500,000

Dependent coverage

- 60% of your coverage for spouse or domestic partner
- 10% of your coverage—up to \$50,000—for eligible children

2022 TI AD&D monthly rates per \$1,000 of coverage

Covered participant	Monthly rate
Employee	\$0.0160
You + spouse/domestic partner Spouse/domestic partner is enrolled for 60% of your AD&D coverage	\$0.0208
Child(ren)	Eligible children are automatically enrolled for 10% of your AD&D coverage up to \$50,000

To calculate your monthly price:

$$\text{_____} \times \$\text{_____} \div \$1,000 \times \$\text{_____}$$

(coverage level x annual base salary ÷ \$1,000 x monthly rate)

Example for coverage at five times salary of \$50,000:

$$5 \times \$50,000 \div \$1,000 \times \$0.0160 = \$4.00 \text{ per month}$$

Disability benefits

TI offers short- and long-term disability benefit plans to provide income protection when you are out of work due to an illness, injury or the birth of a child.

Disability Pay Continuance (DPC) during short-term disability

- Tiers are automatically enrolled in DPC Basic at zero cost; however, you can purchase the Plus plan for better coverage.
- Both Basic and Plus plans provide income protection for leaves lasting up to 26 weeks.
- Tiers may elect DPC Plus at the time of hire without completing an Evidence of Insurability (EOI) form.

	Monthly rate	Time frame	Pay you receive
Basic plan	\$0	Week 1	100% of base salary (using accrued Time Bank with the exception of maternity leave)
		Weeks 2–13	100% of base salary
		Weeks 14–26	75% of base salary
Plus plan	\$0.049 (per \$100 of monthly salary)	Week 1	100% of base salary (using accrued Time Bank with the exception of maternity leave)
		Weeks 2–26	100% of base salary

To calculate your monthly cost:

\$_____ ÷ \$100 x \$_____

(Base monthly salary ÷ \$100 x monthly rate)

Example for coverage under Plus plan:
 \$5,000 ÷ \$100 x \$0.049 = \$2.45 per month

Long-term disability (LTD)

- Available for leaves lasting more than 26 weeks
- Tiers may elect either LTD plan at the time of hire without completing an EOI form
- Monthly payment may not exceed \$25,000
- LTD benefits generally stop for Tiers who meet the requirement of being totally disabled at the end of the month in which age 65 is reached

	Monthly rate	Time frame	Pay you receive
Basic plan	\$0.193 (per \$100 of monthly salary)	Weeks 27 and beyond	50% of base salary, reduced by other disability income benefits ¹
Plus plan	\$0.390 (per \$100 of monthly salary)	Weeks 27 and beyond	66 2/3% of base salary, reduced by other disability income benefits ¹


To calculate your monthly cost:

\$_____ ÷ \$100 x \$_____

(Base monthly salary ÷ \$100 x monthly rate)

Example for coverage under Plus plan:
 \$5,000 ÷ \$100 x \$0.390 = \$19.50 per month

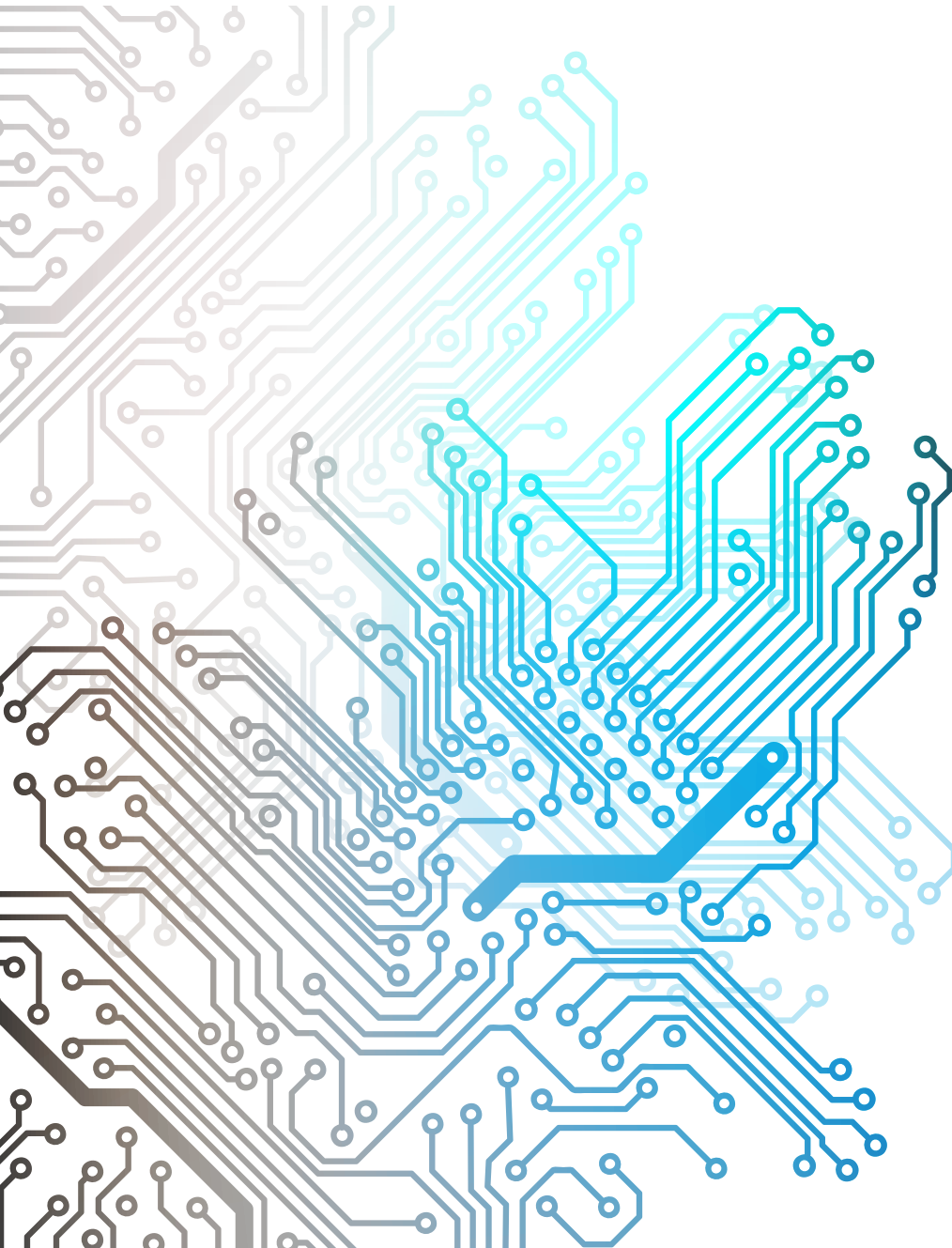
¹ Consult the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#) for a list of other disability income benefits.



You will be required to fill out an EOI form if you want to increase your disability income protection coverage after the first 30 days of employment.

Long-term savings

— 401(k)



401(k)

It's never too early or too late to start planning for your retirement. That's why TI's 401(k) plan is such an important part of your benefits package.

A 401(k) allows you to set aside money now to use when you retire. Simply choose the percent of your salary you want to invest—up to 50% of your base annual salary¹—in the Traditional or Roth 401(k)—and TI will deduct it from each paycheck and put it into your account. TI matches your contribution dollar for dollar up to the first 4% of eligible earnings. Plus, you are 100% vested immediately.

TI 401(k) plans

The chart below shows a side-by-side comparison of ways to save under the TI 401(k) plan.

	Traditional 401(k) contributions	Roth 401(k) contributions
Contributions are taken:	Before taxes are withheld	After taxes are withheld
Distributions after age 59 ½ are:	Taxed when they are withdrawn	Tax-free and penalty-free, as long as the account has been open five years
TI match	Dollar for dollar up to 4% of eligible earnings	Dollar for dollar up to 4% of eligible earnings, match saved in a Traditional 401(k)
IRS maximum annual employee contributions	Under age 50: \$19,500 Age 50 or older: \$26,000 ¹	Under age 50: \$19,500 Age 50 or older: \$26,000 ¹

New employees² who don't make an election are automatically enrolled in the Traditional 401(k) feature with a contribution level of 4% of eligible earnings, which is invested in the [appropriate Lifestyle Fund](#). Contribution elections can be changed at any point during the year. Contact the TI Benefits Center at Fidelity, 888-660-1411, option 1; visit NetBenefits.com/TI; or type [us401k/](#) in Infolink.

¹ \$19,500 regular contribution + \$6,500 catch-up contribution (if age 50 or older by year end). TI does not provide match on catch-up contributions.

² TI interns are not eligible for TI's 401(k) plans.



You may be able to borrow money from your 401(k) before retirement through a loan. Loans require repayment with interest over time.



Sign up for the [Annual Increase Program](#) for your 401(k) if you want to save more over time. You choose the amount you want to increase your contribution by each year and when to stop.

Investing your 401(k)

You are in complete control of how you invest your 401(k) account. However, TI's 401(k) plan has options to assist you. Choose from:

- **Target date retirement funds (aka Lifestyle Funds)**—for more hands-off investors. Choose the fund based on your retirement date goal, and let BlackRock, the funds' investment manager, manage the allocation across assets as you age.
- **Fidelity Personalized Planning & Advice (fee-based service)**—another option for the more hands-off investor. You answer a few questions online; Fidelity suggests an investment strategy and manages your money. You monitor your account and track your progress online. Learn more by typing [us401k/](#) in Infolink.
- **Investment funds**—for more hands-on investors. You pick the funds that best meet your long- and short-term investing goals and risk tolerance.
- **Self-directed brokerage services**—for investors who want to be 100% in control of their investments. You can invest in most listed stocks, bonds, securities, CDs and mutual funds using Fidelity BrokerageLink.

Keep in mind that investing involves risk. The value of your investments will fluctuate over time, and you may gain or lose money.

Note: TI does not provide financial advice; make any recommendation or endorsement as to any investment, advisor or other service or product; or offer any advice regarding the nature, potential value or suitability of any particular investment, security or investment strategy.

Financial guidance and education

Tiers have access to financial guidance and education through Fidelity, including:

- **One-on-one guidance sessions** with a financial advisor virtually or on your TI campus, over the phone at 800-603-4015 or at a Fidelity Investment Center. Check the [Fidelity Financial Education calendar](#) for a list of dates and locations.
- **Online webcasts, videos and resources** that can be viewed from your home or office.

Type [financialeducation/](#) in Infolink to learn about additional classes and webinars available to Tiers.



Did you know you can contribute to a 401(k) and an HSA for your future? Save today for the life you want tomorrow.



Other benefits

- Educational assistance
- Adoption assistance
- Childcare discounts
- Perks

Educational assistance

TI provides financial assistance for employees who want to continue their formal education as part of professional development. Courses must relate to the employee's current role and meet TI business needs.

You are eligible if you:

- Are meeting performance expectations
- Have been at TI at least one year and are an active employee or on certain approved leaves
- Are attending a regionally accredited, Title IV educational institution
- Have approval from your supervisor

If you're interested in taking advantage of this benefit, you must submit an application **each** semester for educational assistance prior to or shortly after starting classes. If approved, you will be eligible to receive reimbursement for qualified educational costs, including tuition and fees and course-related books, up to an annual maximum benefit level. For full details, consult TI's [Educational Assistance policy](#).

Maximum benefit level (per calendar year)

- \$2,500 for associate degree or non-degree coursework¹
- \$5,250 for undergraduate degree coursework
- \$10,000 for graduate degree coursework

Reimbursement is based on the applicable percentage of a full-time schedule worked in increments of 50% or 75%. For instance, a Tler who works half time will receive up to half of the maximum benefit level each calendar year.

Questions?

Browse through our [Frequently Asked Questions](#) or contact Edcor through HR Connect, 888-660-1411, option 3, to learn more.

¹ Non-degree coursework is defined as courses being taken at an accredited school but the Tler will not be graduating with a degree at the end of the program. These courses may be undergraduate or graduate level coursework but since they do not apply to a degree, they are paid out at the non-degree maximum benefit limit.

Ready to apply?

TI's educational assistance program is managed through the [Edcor Data Services](#) online portal.

3 steps to reimbursement

- 1 Submit an application**—no earlier than 120 days before the start of the term and no later than 30 days after the start of the term
- 2 Request reimbursement**—as soon as you have all of your eligible receipts and no later than 90 days after the end of the term
- 3 Submit grades**—no later than 30 days after the end of the term



Type [useducationhelp/](#) in Infolink to see the full timeline of when to apply for assistance, request reimbursement and submit your grades.

Adoption assistance

TI offers financial help and services for full-time and part-time Tiers seeking to adopt a child under age 18 or a physically or mentally disabled person who is unable to care for him or herself.

Adoption reimbursement

TI offers reimbursement of up to \$5,000 for adoption-related expenses, including:

- Legal fees and court fees
- Licensed agency fees, such as placement fees, pre-placement studies and parental counseling fees
- Travel expenses to bring the child home

TI will not reimburse expenses related to adoptions that are not legally recognized, legal guardianships or the adoption of your spouse's child.

Access the Adoption Assistance Request Form on [Infolink](#).

Taking a leave of absence for adoption

TI offers up to four weeks of paid parental leave for adoptive parents. Concurrent leave is also offered under the Family and Medical Leave Act (FMLA) for a total of 12 weeks during a 12-month period for the adoption of a child.

For more on FMLA, consult the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#) on [NetBenefits.com/TI](#).



Find resources and referrals to help you understand adoption and any issues that may arise during the process through work-life resources (EAP). Call 800-888-2273 24 hours a day, seven days a week or visit [Magellan Ascend](#).

Childcare discounts

TI partners with the Learning Care Group to provide a 10% tuition discount and registration fee waiver on full-time childcare for children of TI employees.

The Learning Care Group offers early education and childcare services for child(ren) ages six weeks to 12 years, as well as before- and after-school programs and summer camps, at more than 900 locations nationwide. Learning Care Group centers include Childtime, Tutor Time, The Children's Courtyard and La Petite Academy.

Part-time childcare options

Tiers can take also advantage of part-time care at Learning Care Group centers, including:

- **Flex care:** Purchase childcare days in advance—in five-day increments—for school breaks, irregular or part-time work schedules or a temporary lapse in primary care.
- **Backup/Emergency childcare:** If your normal childcare falls through at the last minute, you have access to back-up care through the Learning Care Group. Use it for snow days, school in-service, business travel or days your primary-care provider is ill or vacationing.

Type [uschildcare/](#) in Infolink to find a center near you and enroll.

Perks

myConcierge

Need help planning your next vacation, finding a gift or buying discount tickets for sports, movies or amusement parks? [myConcierge](#) can help you with:

Services

- Travel coordination, including Disney vacations
- Gift recommendations and flower delivery
- Birthday parties
- Kids camp and summer activities

Discounts on

- Movies
- Museums
- Festivals and fairs
- Amusement parks
- Sports tickets

[myConcierge](#) services are available free of charge. You pay for the products you buy.

BCBS identity theft protection

If you are enrolled in a BCBS medical plan, you can protect your identity with free credit-monitoring services from Experian.

- IdentityWorks Credit 1 — Bureau provides daily credit monitoring and alerts for adult family members, plus up to \$1 million in identity theft insurance and the use of a fraud-resolution team if needed.
- IdentityWorks Minor Plus monitors your child(ren)'s personal information for existence of a credit file and provides email and text alerts if there is any new activity in your child's name. The service also provides a fraud-resolution agent to assist as necessary.

To register, log in to your Blue Access for Members account at [bcbstx.com](#). You are required to register every year you wish to keep services.

Perks at Work

Tiers have access to perks and discounts at more than 30,000 companies and merchants across the U.S. and online through the Perks at Work program. Sign in with your TI email address at [perksatwork.com](#), and find out how you can save on the purchase of a vehicle, computers and other electronics, travel and vacations, mobile phones, food, apparel, movie tickets and more.

Legal services and will preparation

Tiers have access to free legal services through MetLife Legal Plans, which will match you with a local participating plan attorney who can:

- Prepare or update a will, living will, power of attorney or testamentary trust at zero cost to you. Non-participating attorneys can be used; however, you will be responsible for any fees that exceed the allowable amount set by MetLife.
- Offer advice and one free initial consultation on personal legal matters (apart from exclusions), such as:
 - Civil litigation
 - Consumer protection
 - Identity theft
 - Real estate
 - Family law issues
 - Bankruptcy and debt collection
 - Estate planning
 Anything beyond the initial consultation is at your expense.
- Provide estate-resolution services for you or your spouse/domestic partner's estate. This benefit is only available for TI supplemental life insurance participants.

To access legal services, call 800-821-6400 (7 a.m.–7 p.m. Central time, Monday–Friday) and provide the TI Group number, 29129, and the last four digits of your Social Security Number.

Tiers can also opt for self-service to create a will using an online template at [willscenter.com](#).

Tax-preparation services

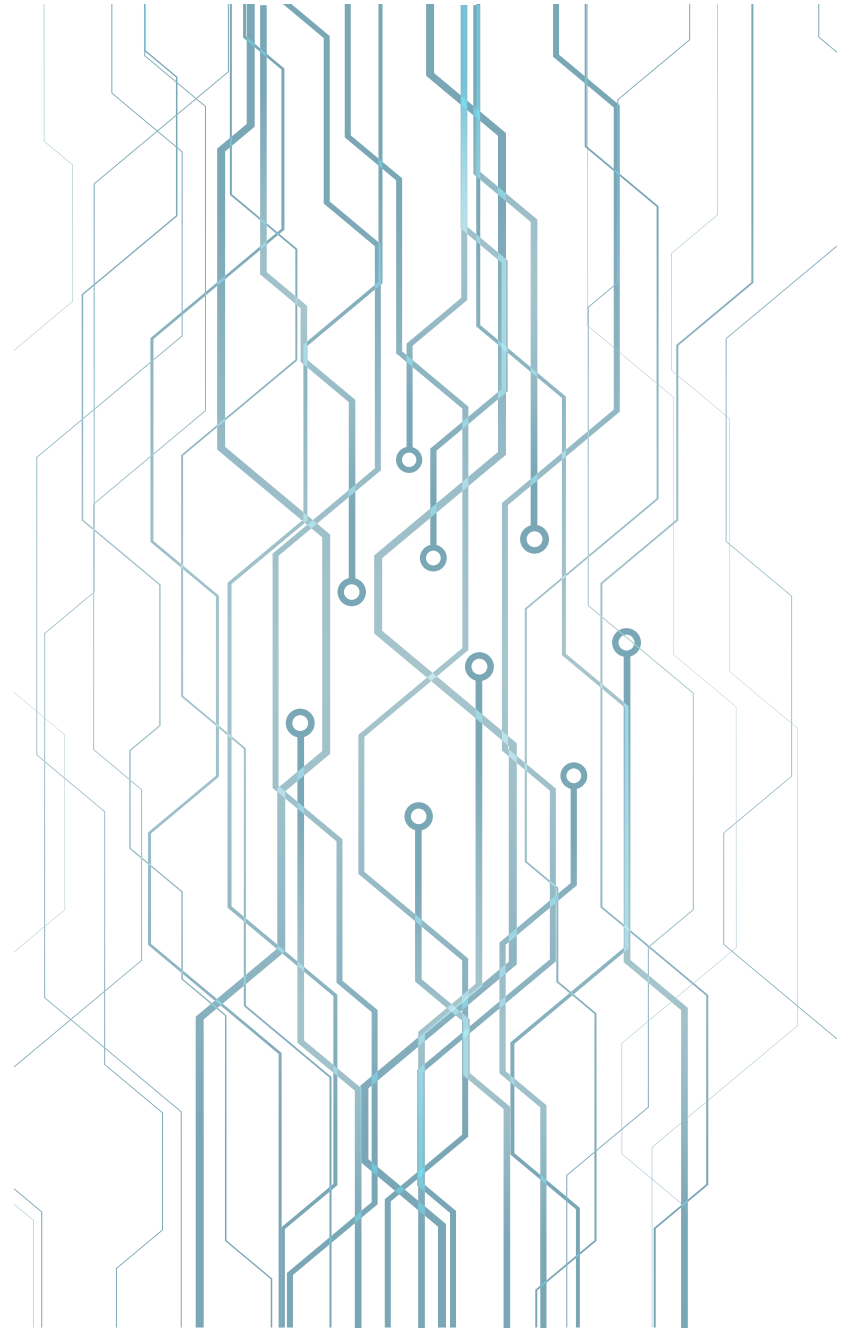
Take advantage of savings on your annual tax preparation through TI's Perks at Work and TI work-life resources (EAP).

- Log in at perksatwork.com and search under "Finance" for discount offers through TurboTax, H&R Block or TaxAct. Discounts are available for in-office and online services and software.
- Register and log in at magellanascend.com (TI's EAP provider) to take advantage of savings from TurboTax. After logging in, click on "Discount Center" under the "Explore" section. Discounts can be found under "LifeMart Discount Center" by searching for "Tax" in the search bar.

Commuter benefits (location specific)

- **Dallas/Fort Worth area commuters:** Purchase a DART Annual Pass or Local Pass through TI, and receive a subsidy for using public transportation locally or regionally. Payment is made through a before-tax payroll deduction and can be spread across pay periods. DART Vanpool is also a great option for Tlers who want to carpool from areas not serviced by DART rail , which TI also subsidizes.
- **California commuters:** Employees working in the San Diego Area or the Bay Area, including Alameda, Contra Costa, Napa, Solano, Sonoma, Marin, Santa Clara and San Mateo counties and San Francisco, can pay for public transportation through payroll deductions. Transit options include Caltrain, BART, Visa Commuter Card and more. Payment is made through before- and after-tax deductions each pay period.

Visit [Infolink](#) to learn more.



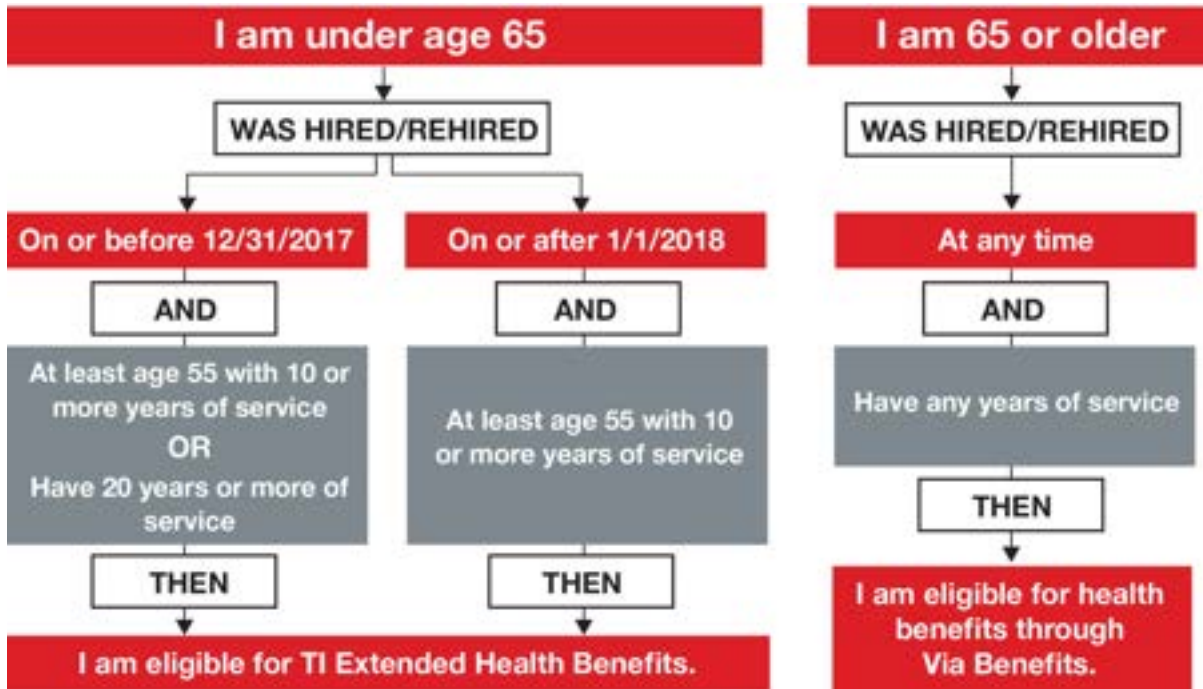
Planning to retire

Are you thinking about retiring from TI?

There are two components for determining your eligibility and costs for retiree health benefits:

Step 1: Am I eligible for retiree health benefits?

You may qualify for health benefits coverage after you retire if you meet certain eligibility requirements, such as age at retirement, years of service and hire date, as shown in the chart below.



TI Extended Health Benefits (for retirees under age 65) include medical and dental coverage for you and your qualifying dependents.

Via Benefits (for retirees age 65+) includes Medicare supplement, Medicare Advantage and prescription drug insurance for you and your qualifying dependents. Visit my.viabenefits.com/ti to learn more.



If you qualify for health benefits, you must enroll within 30 days of your retirement if you are under 65 years of age, or within 60 days of your retirement if you are 65 or older. If you do not enroll within the required enrollment period, you forego your eligibility in the future.

Step 2: Do I qualify for financial assistance for my retiree health benefits?

Tiers hired/rehired or acquired by TI **on or after Jan. 1, 2001**, are required to pay 100% of premiums for medical and dental coverage.

However, if you were hired/rehired or acquired by TI **prior to Jan. 1, 2001**, you are generally eligible to receive financial assistance for retiree medical benefits based on years of service. This assistance comes as:

- A subsidy to lower your premiums if you are **under age 65**. Spouses and dependents pay 100% of premiums for medical and dental coverage.
- An annual contribution of generally \$90 per year of service up to \$2,700 per year to a Retirement Reimbursement Account (RRA) through Via Benefits **after you turn 65**.

Retirees must purchase and maintain continuous enrollment in a medical or prescription drug plan to qualify for the RRA.



Call the TI Benefits Center at Fidelity, 888-660-1411, option 1, to verify your eligibility for retiree benefits.

If you are planning to retire within 90 days, ask for a Retirement Benefit Coordinator (RBC). They can help you with your benefits and retirement planning. Type [retirement/](#) in Infolink to learn more.

TI Extended Health Benefits (Under 65)

2022 TI medical plan options

See more details and premiums on [Infolink](#). Deductible, copay and coinsurance reflect your part of the cost.

	BCBS HDHP PRE-MEDICARE PARTICIPANTS Nationwide	BCBS PPO PRE-MEDICARE OR MEDICARE-ELIGIBLE ¹ PARTICIPANTS Nationwide	Kaiser HMO PRE-MEDICARE PARTICIPANTS Northern California
Medical/behavioral health expenses			
Annual deductible (individual/family)	In-network: \$1,500/\$3,000 Out-of-network: \$1,500/\$3,000 ²	In-network: \$400/\$800 Out-of-network: \$400/\$800 ³	\$0/\$0
Annual out-of-pocket maximum (individual/family)	In-network: \$3,000/\$6,000 Out-of-network: \$6,000/\$12,000 ² Deductible included	In-network: \$3,000/\$6,000 Out-of-network: \$6,000/\$12,000 ³	\$1,500/\$3,000
Annual hospital copay	\$0	In-network: \$0 Out-of-network: \$300	\$0
Preventive exams and screenings	100% covered	100% covered	100% covered
Coinsurance you pay after deductible is met			Copay you pay
Doctor office visit	In-network: 10% Out-of-network: 50%	In-network: 10% Out-of-network: 50%	\$20
MDLIVE virtual visit	In-network: 10%	In-network: 10%	NA
Medical Nutrition Therapy	In-network: 10%	In-network: 10%	NA
Behavioral health care office visit	In-network: 10% Out-of-network: 50%	In-network: 10% Out-of-network: 50%	\$20
Hospitals/facilities (inpatient and outpatient)	In-network: 20% Out-of-network: 50%	In-network: 20% Out-of-network: 50%	\$500 per admission \$100 outpatient
Prescription expenses⁴			
Annual deductible	Applies to medical deductible	No deductible	No deductible
Annual out-of-pocket maximum (individual/family)	Applies to medical out-of-pocket maximum	In-network: \$4,000/\$8,000 Out-of-network: \$4,000/\$8,000 ³ separate from medical out-of-pocket maximum	Applies to medical out-of-pocket maximum
Coinsurance/maximum amount you pay			Copay you pay
Generic drugs	30-day in-network: 20%/\$25 max 30-day out-of-network: 45% 90-day mail-order: 20%/\$75 max	30-day in-network: 20% 30-day out-of-network: 45% 90-day mail-order: 20%	30-day in-network: \$15 100-day mail-order: \$30
Preferred brand-name drugs	30-day in-network: 30%/\$75 max 30-day out-of-network: 60% 90-day mail-order: 30%/\$225 max	30-day in-network: 30% 30-day out-of-network: 60% 90-day mail-order: 30%	30-day in-network: \$30 100-day mail-order: \$60
Non-preferred brand-name drugs	30-day in-network: 50%/\$100 max 30-day out-of-network: 60% 90-day mail-order: 50%/\$300 max	30-day in-network: 50% 30-day out-of-network: 60% 90-day mail-order: 50%	30-day in-network: \$30 100-day mail-order: \$60

¹ Medicare-eligible coverage is available only to certain populations, such as Medicare-disabled participants.

² The HDHP family annual deductible and annual out-of-pocket maximum for medical/behavioral health care applies to you + spouse, you + child and you + family coverage and are met when all medical and pharmacy claims add up to the family deductible and/or maximum out-of-pocket amount. The annual deductible and annual out-of-pocket maximum does not include charges not covered by the plan or exceeding the allowable amount or other plan limits, or the difference in cost between a generic and brand-name drug when a generic is available but a brand-name drug is purchased.

³ The PPO annual deductible and annual out-of-pocket maximum for medical/behavioral health care does not include your out-of-network annual hospital copays, charges not covered by the plan or exceeding the allowable amount or other plan limits or any pharmacy costs.

⁴ Specialty drugs are available for BCBS plan participants through the CVS Caremark Specialty Pharmacy. You pay 10% coinsurance. For Kaiser, you pay a \$30 copay for up to a 30-day supply.

TI Extended Health Benefits (Under 65)

2022 TI dental plan options

See more details and premiums on [Infolink](#). Deductible, copay and coinsurance reflect your part of the cost.

	Delta Dental Basic Nationwide	Delta Dental Plus Nationwide	Aetna DMO Various locations
Your cost			
Annual deductible	\$50 per person (applies to basic and major services only)	\$50 per person (applies to basic and major services only)	\$0 individual/\$0 family
	You may receive treatment from any dentist. However, dentists in the Delta Dental network must negotiate their rates, resulting in lower fees. ¹		\$5 office copay for all treatment. However, limits and exclusions may apply to services.
Annual maximum the plan will pay	\$1,000	\$2,000	No maximum
Preventive care			
Primary covered services	Oral exam, preventive X-rays, cleanings		
Preventive care benefits	0% coinsurance		0% coinsurance after a \$5 copay
Basic services			
Fillings	30% coinsurance	10% coinsurance	0% coinsurance after a \$5 copay
Major services			
Crowns, dentures, bridges, oral surgery, surgical periodontics, implants	60% coinsurance	40% coinsurance	40% coinsurance after \$5 copay
Endodontics	60% coinsurance	40% coinsurance	0% coinsurance for anterior and bicuspid teeth; 40% coinsurance for molars—both after a \$5 copay
Orthodontia services			
Benefits (adult/child)	Not covered	50% coinsurance	50% coinsurance after a \$5 copay
Lifetime maximum the plan will pay	NA	\$1,500	No maximum

¹ Maximum plan allowance limits apply if you don't use an in-network provider.



Resources

- [Glossary](#)
- [Contacts](#)
- [COBRA premiums](#)

Glossary

Allowable amount: The contracted amount network providers can charge for services.

Appeal of claim: Your ability to appeal the denial of a claim or part of a claim and to have it reconsidered under the Employee Retirement Income Security Act (ERISA).

Coinsurance: The percentage of health care/dental costs you pay after meeting your deductible.

Copay: A fixed dollar amount you pay for medical/dental services.

Deductible: The amount you pay out-of-pocket for services each year before the plan begins to pay benefits. (You may have separate deductibles for in-network and out-of-network services.)

Exclusion: Health condition or service not covered under the health care plan.

Formulary: A list of prescription drugs covered by your health plan, often divided into tiers.

In-network: Health care providers with an agreement with the health plan to care for its members at specified prices. Health plans generally cover a greater share of the cost for in-network health care providers.

Maximum plan allowance limits: The usual costs for comparable treatment in a geographic area. This generally applies to costs associated with out-of-network dental providers.

Out-of-network: Health care providers who do not have an agreement with a health plan. Employees generally pay more for out-of-network services than in-network, and your insurance provider may limit what it pays for these services.

Out-of-pocket maximum: The most you will pay for your share of health care costs during the covered time frame—usually a year. (You may have separate out-of-pocket maximums for in-network and out-of-network services.)

Premium: The amount paid for a health insurance plan by employees or employers or shared by both, generally on a monthly or bi-monthly basis.









Preventive care: Services that can help detect risks and health problems early and may be free under your medical plan (annual physicals, mammograms and other age-related screenings, routine immunizations, etc.).

Qualifying life event: Life event (divorce, marriage, birth of a child, etc.) that allows you to make changes to some of your benefit elections during the year. Type [uslifeevents/](#) in Infolink for a full list of qualifying events.

Summary Plan Description (SPD): A document that explains the fundamental features of an employer's employee benefits plan, including eligibility requirements and the schedule of benefits.



Contacts

If you're having trouble reaching a live person when calling any of our vendors, try saying "Customer Service," "Agent" or "Representative" or pushing 0 to be transferred.

Company	Website/Email	Phone	App	Hours
TI Benefits Center at Fidelity	NetBenefits.com/TI	888-660-1411, option 1	NetBenefits 	Monday–Friday, 7:30 a.m.–7:30 p.m. Central time (closed most New York Stock Exchange holidays)
Aetna (dental)	aetna.com	877-238-6200	Aetna Mobile 	Monday–Friday, 8 a.m.–6 p.m. Central time
Blue Cross Blue Shield (health care)	bcbstx.com	866-866-2300	Blue Cross Blue Shield Texas 	Monday–Friday, 8 a.m.–8 p.m. Central time
CVS Caremark (pharmacy)	caremark.com	800-557-5749	CVS Caremark 	24x7
Delta Dental (dental)	deltadentalins.com/ti	800-521-2651	Delta Dental Mobile 	Monday–Friday, 7 a.m.–7 p.m. Central time
Fidelity QDRO Center	qd.ro.fidelity.com/	888-660-1411, option 1	—	Monday–Friday, 7:30 a.m.–7:30 p.m. Central time (closed most New York Stock Exchange holidays)
HealthEquity (flexible spending accounts)	healthequity.com	855-774-7441	EZ Receipts 	Monday–Friday, 7 a.m.–7 p.m. Central time
Kaiser Healthcare Northern California (health care)	kp.org	800-278-3296	Kaiser Permanente	24x7
Magellan Ascend (work-life resources)	magellanascend.com	800-888-2273	See website for available health and well-being apps	24x7
MDLIVE (telemedicine)	mdlive.com/bcbstx	888-680-8646	MDLIVE 	24x7
MetLife (life insurance & AD&D)	—	800-638-6420 (life & AD&D general) 877-275-6387 (life conversion) 888-252-3607 (life & AD&D portability)	—	Monday–Thursday 7 a.m.–7 p.m., Friday 7 a.m.–4 p.m. Central time (life & AD&D general) Monday–Friday, 8 a.m.–5 p.m. Central time (life conversion) Monday–Friday, 7 a.m.–8 p.m. Central time (life & AD&D portability)
MetLife Legal Plans (TI group number: 29129)	—	800-821-6400	MetLife Legal Plans 	Monday–Friday, 7 a.m.–7 p.m. Central time
myConcierge	myconcierge@ti.com	214-479-4570	—	Monday–Friday, 9 a.m.–4 p.m. Central time
Perks at Work	perksatwork.com	—	—	24x7
Sedgwick (disability leave)	claimlookup.com/ti	888-660-1411, option 5	—	24x7
UBS Financial Services (ESPP)	ubs.com/onesource/txn	800-597-7516 (U.S.)	UBS Financial Services 	Monday–Friday, 2 a.m.–10 p.m. Central time

Contacts

If you're having trouble reaching a live person when calling any of our vendors, try saying "Customer Service," "Agent" or "Representative" or pushing 0 to be transferred.

Company	Website/Email	Phone	App	Hours
UnitedHealthcare Global (business travel medical) Client name: Texas Instruments Group ID#: 911870; UHC ID#: 335731	members.uhcglobal.com	866-870-3475	—	24x7
Via Benefits (post-65 retiree health)	my.viabenefits.com/ti	844-638-4642	Via Benefits Accounts 	Monday–Friday, 7 a.m.–8 p.m. Central time
VSP (vision)	vsp.com	800-877-7195	VSP Vision Care on the Go 	Monday–Friday, 7 a.m.–8 p.m. Central time Saturday–Sunday, 9 a.m.–7 p.m. Central time
WillsCenter.com	willscenter.com	—	—	24x7
Zurich American (business travel accident insurance)	zurichna.com	800-834-1959	—	Monday–Friday, 8 a.m.–6 p.m. Central time

COBRA premiums

COBRA premiums include a 2% surcharge for administration. For more details, consult the [2022 Health and Insurance Benefits Summary Plan Description \(SPD\)](#), available on NetBenefits.com/TI.

2022 TI medical monthly premiums

	BCBS HDHP Nationwide	BCBS PPO Nationwide	Kaiser HMO Northern California
You only	\$565.76	\$656.16	\$ 909.73
You + spouse/domestic partner	\$1,357.83	\$1,574.79	\$2,092.38
You + child(ren)	\$1,244.69	\$1,443.56	\$1,546.53
You + family	\$2,036.75	\$2,362.18	\$2,729.18

2022 TI dental monthly premiums

	Delta Dental Basic Nationwide	Delta Dental Plus Nationwide	Aetna DMO Various locations
You only	\$30.44	\$49.51	\$20.51
You + spouse/ domestic partner	\$60.88	\$99.03	\$40.99
You + child(ren)	\$67.32	\$109.31	\$43.03
You + family	\$97.76	\$158.85	\$63.55

2022 TI vision monthly premiums

	VSP vision plan
You only	\$12.68
You + spouse/domestic partner	\$19.75
You + child(ren)	\$20.18
You + family	\$32.49

