

Your Benefits. Your Decisions.



Your
Benefits.

Your
Decisions.

As an innovative pioneer in the renewable energy industry, Siemens Gamesa knows our employees are the power behind our success. We've come together as one with the brightest minds and imagination to create energy for the future.

We believe it's essential for you to bring your best self to work every day. That's why Siemens Gamesa Renewable Energy (SGRE) offers benefits that can help in all areas of your life. Each year, during Open Enrollment, we encourage you to spend some time learning about your choices and then deciding what's right for you.

What's Inside?

| | | | |
|------------------------------------|----|------------------------------------|----|
| Benefit Basics..... | 4 | Life and AD&D Insurance | 13 |
| Medical..... | 6 | Disability | 14 |
| Health Savings Account | 8 | Employee Assistance Programs | 15 |
| Health Reimbursement Account | 9 | 401(k) Savings Plan | 16 |
| Dental..... | 10 | Premiums..... | 17 |
| Vision | 11 | Mobile Wallet Card..... | 18 |
| Flexible Spending Accounts | 12 | Helpful Resources..... | 19 |

Enroll Now!

Open Enrollment
October 24–November 4, 2022



Log on to Benefits Service Center
digital.alight.com/siemensgamesa



Call the Benefits Service Center
at 844-315-3811
Mon–Fri (8 a.m.–8 p.m. EST)

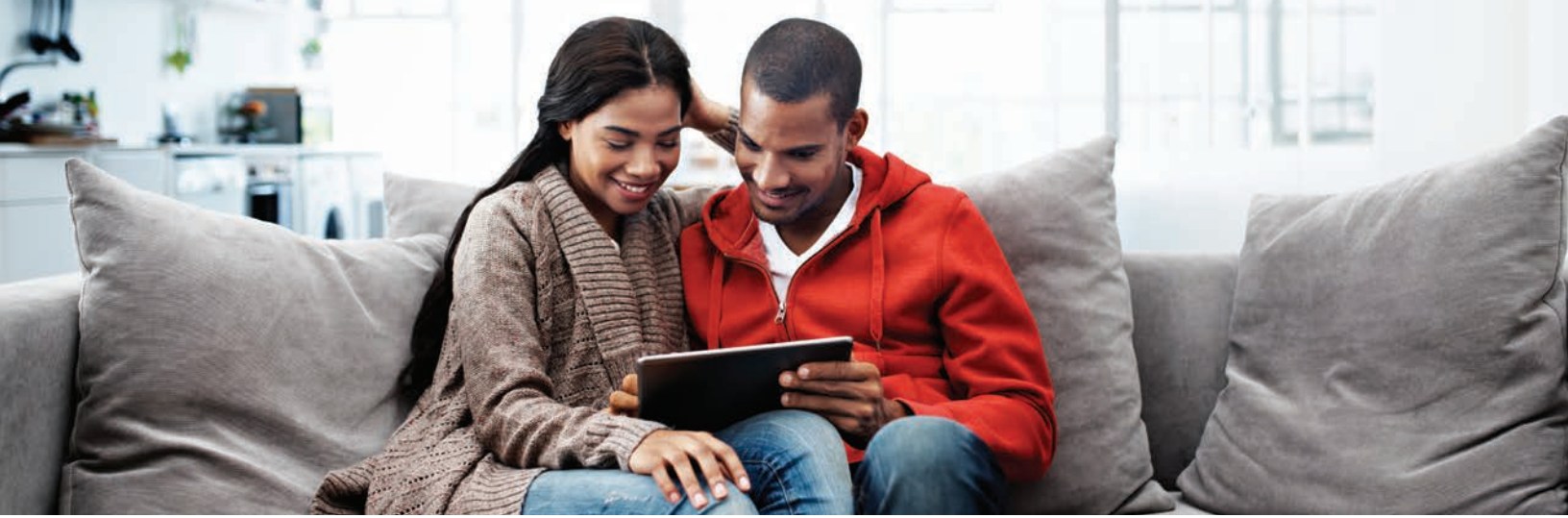
Questions?



Assistance with Enrollment
Benefits Service Center
844-315-3811
Mon–Fri (8 a.m.–8 p.m. EST)



BCBS FL
Pre-enrollment
877-705-5429



Dear Employees,

Your annual opportunity to select your benefits is here. SGRE offers a wide variety of benefit programs designed to help keep you and your family healthy and financially secure with coverage options that feature choice, flexibility and tax savings opportunities.

WHAT TO EXPECT FOR 2023

- **Medical**—Our carrier remains Blue Cross Blue Shield of Florida (BCBS FL). Traditional PPO, HSA and HRA plan options will remain.
- **HRA**—Will continue to be administered by Accrue Health
- **HSA**—Will continue to be administered by Accrue Health
- **Wellness Incentives**—Available for the HRA & HSA plans only, will be tracked by Strive, who partners with BCBSFL.
- **Dental**—Our carrier will remain Delta Dental. Basic and Enhanced plan options will remain.
- **Premiums**—Will remain the same for 2023

There will be no changes to copays, deductibles, or out-of-pocket maximums, and our pharmacy plan will remain under CVS. Additionally, Lincoln Financial Group will remain our disability and life insurance carrier.

OPEN ENROLLMENT: OCTOBER 24–NOVEMBER 4, 2022

All current 2022 medical, dental, vision, and life benefits will automatically roll over for 2023. Flexible Spending Accounts and Health Savings Account elections will not carry over. Elections must be made each plan year.

Take this opportunity to:

- Review or change your medical, dental and vision elections
- Review and update eligible dependents and beneficiaries
- Enroll or reenroll in Healthcare and/or Dependent Care FSA; and/or Health Savings Account (HSA)
- Enroll, increase or decrease life insurance elections (May require Evidence of Insurability EOI)

NEXT STEPS

Please spend some time reading through this guide. It contains all of the benefits information you need to know to better assist in your enrollment journey. Then, be sure to enroll in your benefits by the November 4 deadline.

Always remember, these are **your benefits**, and they're **your decisions**. So be sure to choose what's right for you for the year ahead.

Yours in good health,
The Siemens Gamesa HR Team



Benefit Basics

Each year—during Open Enrollment—you have an opportunity to select your benefits for the upcoming year. Since your personal situation may change from year to year, this ensures you can always choose the right benefit coverage each year. Open Enrollment for 2023 benefits will be held from October 24–November 4, 2022. The choices you make will be effective from January 1 through December 31, 2023.

ELIGIBILITY FOR BENEFITS

As a Siemens Gamesa Renewable Energy full-time regular employee, you are eligible for benefits if you work more than 20 hours per week. Your benefits are effective on your date of hire. You also can enroll eligible dependents for coverage. Eligible dependents include:

- Your spouse
- Your domestic partner, of the same or opposite sex*
- Your children and/or domestic partner's children up to age 26—for medical, dental and vision
- Your unmarried children of any age who are incapable of self-support due to a mental or physical disability and who are totally dependent on you—for medical, dental and vision

CHANGING YOUR COVERAGE

IRS regulations state that you cannot change benefit options during the year unless you have a qualifying life event (QLE). A qualifying life event includes:

- Marriage
- Divorce or legal separation
- Birth or adoption of a child
- Acquired guardianship (legal guardianship, foster child)
- Death of a spouse or dependent child
- Gain or loss of coverage on another plan
- Change in employment status of employee, spouse or dependent child
- Qualified medical support order
- Entitlement to Medicare or Medicaid
- Your child has reached the plan's age limit
- Start or loss of domestic partnership



Important! You must notify the Benefits Service Center to make changes within 30 days of the life event.

Depending on the type of event, you may be asked to provide proof of the event. For example, if you get married, you might need to show your marriage license.

If you don't contact the Benefits Service Center within 30 days of the qualified life event date, you will have to wait until the next Open Enrollment period to make changes.

* Employers are required to report as compensation the value of medical, dental, and vision insurance provided to domestic partners and the children of these relationships and to withhold taxes on that amount. The value of the health insurance coverage provided to these dependent relationships is referred to as imputed income.

For New Hires

You must enroll for health and insurance benefits within 30 days of your hire date. After the 30-day deadline, your next chance to enroll will be during Open Enrollment in the fall or if you experience a Qualifying Life Event (QLE). You may enroll for the 401(k) Plan at any time.

Once you're enrolled in health and insurance benefits, your coverage is retroactively applied back to your hire date. Deductions will begin on the next available pay period following your enrollment.

If you have questions or need help with enrollment, please contact the Benefits Service Center at 844-315-3811.

If you're newly hired...

You will receive an enrollment notification via email when your account is set up. This may take up to five days from your date of hire.

Health Care Terms to Know

Knowing these health care terms can help you better understand how the plans work.

ANNUAL DEDUCTIBLE

Your annual deductible is the amount you pay for office visits, prescription drugs and other covered services before your plan begins sharing the cost.

COINSURANCE

A percentage you and your plan pay when you're sharing costs. Coinsurance kicks in after you meet your annual deductible.

COPAY

A fixed amount you pay for a covered health care service (e.g., primary care physician office visit or emergency room visit).

IN-NETWORK PROVIDER

Doctors, hospitals and services that contract with your plan are called in-network providers. You usually pay less when you use an in-network provider.

MEDICAL PREMIUMS (RATES)

The medical premium is the amount deducted from your paychecks to pay for your medical coverage. Your deductions come out of your paycheck before taxes.*

OUT-OF-POCKET MAXIMUM

The most an employee could pay during a coverage period (one calendar year) for his/her share of the costs of covered services, including copayments and coinsurance.

* The cost of coverage for your domestic partner comes out of your paycheck after taxes.



See pages
8 and 9 for
more information
about HSAs
and HRAs.

Medical

You can choose from three Blue Cross Blue Shield of FL medical plan options:

- Blue Cross HSA Plan
- Blue Cross HRA Plan
- Traditional PPO Plan

All plans offer comprehensive health care benefits, including coverage for prescription drugs and free preventive care services.

No matter which plan you choose, you'll always pay less when you use in-network providers. To see if your doctor, hospital or other provider is in the network, visit [MyHealthToolkitfl.com](https://www.myhealthtoolkitfl.com).

Build a Better You in 2023 with Strive!

Rally Rewards will be ending soon, and we will shift to a great new well-being platform called Strive on January 1, 2023. Powered by Virgin Pulse, Strive can help you live better and achieve your health goals with a fun and engaging experience that delivers powerful resources right to your fingertips.

The Strive digital program is easy to make a part of your life. Brief daily check-ins help you build healthy habits, join fun activities with coworkers and track how you're doing—not just with physical health-related issues but also with your emotional, social and financial well-being.

You can participate in healthy activities throughout the year to earn points, move through the levels and earn up to \$750 in HSA contributions. Prioritize and personalize your experience by engaging in resources to help improve your well-being:

- **Daily Cards:** Get helpful tips that are relevant to your current interests and goals.
- **Journeys®:** Make simple changes to improve your health, one step at a time.
- **Challenges:** Team up or go head-to-head to challenge your coworkers and track healthy habits.
- **Social Groups:** Discuss your favorite hobbies and find a like-minded community to support your healthy changes.
- **Healthy Habits:** Select healthy habits to work toward and track your progress every day.

Getting started in Strive is easy as 1-2-3:

- 1** Log in to your My Health Toolkit® account Select Wellness, then Strive.
- 2** You'll begin with the Health Check, a short, confidential survey. It assesses your health across seven factors ranging from fitness to mental health. You'll receive a personalized report with suggested steps that work with your lifestyle.
- 3** Download the Virgin Pulse mobile app by searching "Virgin Pulse" in the App Store or Google Play.



What To Do Before the End of 2022

Because Rally Rewards will be ending on December 31, 2022, you will need to:

- Complete your Rally health activities by the end of the program to receive your incentives.
- Redeem your other incentives such as Rally coins and gift cards by the end of the program.
- If you have questions, please ask your manager or contact the Human Resources department.

Comparing the Medical Plans



| Plan Provision | Blue Cross HSA Plan | | Blue Cross HRA Plan | | Blue Cross Traditional PPO Plan | |
|---|-----------------------|-------------------|---------------------|-------------------|----------------------------------|----------------------------------|
| | In-Network | Out-of-Network | In-Network | Out-of-Network | In-Network | |
| Company Contribution to HRA/HSA (Individual/Family) | \$500/\$1,000 | | \$500/\$1,000 | | N/A | |
| Annual Deductible (Individual/Family) | \$2,000/\$4,000 | \$4,000/\$8,000 | \$1,500/\$3,000 | \$3,000/\$6,000 | \$750/\$1,500 | \$1,500/\$3,000 |
| Out-of-Pocket Maximum (Includes Deductible) | \$6,000/\$12,000* | \$12,000/\$24,000 | \$5,000/\$10,000 | \$10,000/\$20,000 | \$4,000/\$8,000 | \$8,000/\$16,000 |
| Preventive Care | 100% | 65% | 100% | 65% | 100% | 60%** |
| Primary Physician Office Visit | 85%** | 65%** | \$25 copay | 65%** | \$20 copay | 60%** |
| Specialist Office Visit | 85%** | 65%** | \$50 copay | 65%** | \$40 copay | 60%** |
| Telehealth Services | 85%** | Not Covered | \$25 copay | Not Covered | \$20 copay | Not Covered |
| Inpatient Hospital Services | 85%** | 65%** | 85%** | 65%** | \$250 copay/ admit then 80%** | \$250 copay/ admit then 60%** |
| Outpatient Hospital Services | 85%** | 65%** | 85%** | 65%** | 80%** | 60%** |
| Urgent Care | 85%** | | \$50 copay | | \$40 copay | |
| Emergency Room | 85%** | | \$150 copay | | \$150 copay | |
| Prescription Drug Deductible (Individual/Family) | Combined with Medical | | None | | None | |
| Prescription Drug Out-of-Pocket Maximum (Individual/Family) | Combined with Medical | | \$2,000/\$3,000 | | \$2,000/\$3,000 | |
| Retail Prescription Drugs (30-day supply) | | | | | | |
| Generic | 10% | Not Covered | 10% | Not Covered | \$10 copay | Not Covered |
| Brand Preferred | 30% (\$20 min) | | 30% (\$20 min) | | \$30 copay | |
| Brand-Non-preferred | 45% (\$35 min) | | 45% (\$35 min) | | \$50 copay | |
| Specialty | 10% (\$35 min) | | 10% (\$35 min) | | 10%*** | |
| Mail Order Prescription Drugs (90-day supply) | | | | | | |
| Generic | 10% | Not Covered | 10% | Not Covered | \$20 copay | Not Covered |
| Brand Preferred | 30% (\$40 min) | | 30% (\$40 min) | | \$60 copay | |
| Brand-Non-preferred | 45% (\$75 min) | | 45% (\$75 min) | | \$100 copay | |
| Specialty | 10% (\$75 min) | | 10% (\$75 min) | | N/A to Specialty | |

* Embedded individual out-of-pocket maximum in family coverage.

** After the deductible is met.

*** The PPO Plan includes the PrudentRx program for certain specialty medications. This program is designed to lower your out-of-pocket costs by assisting you with enrollment in drug manufacturers discount copay cards/assistance programs. For those who opt out, you will be responsible for 30% coinsurance.

Employees enrolled in family coverage in the Blue Cross HSA Plan have an aggregate deductible. This means you must meet the full family deductible before coinsurance would apply. One member of the family could satisfy the family deductible before the plan begins to pay coinsurance. This plan also has an embedded individual out-of-pocket maximum of \$7,150 in-network, which means no one individual in the family will pay more than this amount in out-of-pocket expenses.



Health Savings Account

A Health Savings Account (HSA) is a tax-advantaged savings account, only available to those who enroll in the Blue Cross HSA Plan. This plan has higher deductibles, but your out-of-paycheck cost is less, AND the Company will put funds in your account. You can use these funds to help pay for your out-of-pocket expenses.

An HSA offers you a triple tax advantage because the money:

- 1 Goes in tax-free
- 2 Grows tax-free
- 3 Can be used to pay for eligible medical expenses tax-free

The funds in your HSA carry forward, year after year—even into retirement. There is no requirement to spend the money, and you own your HSA and the funds in it, even if you leave the Company or change health plans. The funds are yours and will not expire.

Contributions to Your HSA



The Company will contribute up to **\$500** for individual coverage and **\$1,000** for employee plus child(ren), spouse or family coverage annually.

You can contribute to the account on a **pre-tax basis** via payroll deductions:

- Up to **\$3,650** for individual coverage
- Up to **\$7,300** for employees with dependent coverage



The IRS sets these maximums.

You can make **pre-tax catch-up contributions** if you're **age 55 or older**. You can contribute an additional **\$1,000** per year.



You can contribute on a **post-tax basis**, then take the deduction when completing your personal income taxes.

Using Your HSA Funds

Use the money in your HSA to pay for qualified medical expenses (visit [IRS.gov](https://www.irs.gov) Section 213(d).)

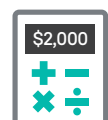


Using your HSA for qualified medical expenses is **tax-free!** Use the money to pay for qualified expenses for yourself, your spouse or a dependent.



Withdrawals are permitted, even if you are no longer eligible to contribute to the HSA, if you are enrolled in Medicare or are no longer enrolled in an HSA-eligible high deductible health plan.

Once you accumulate a balance of **\$2,000 or more**, you can invest your HSA funds to grow them even more.



Health Reimbursement Account

A Health Reimbursement Account (HRA) is only available for those enrolled in the Blue Cross HRA Plan. This plan has slightly lower deductibles compared to the Blue Cross HSA Plan, and it has lower out-of-pocket costs than the Traditional PPO Plan.

With this plan, the Company provides access to funds through an HRA. You can use the funds in the HRA to pay for your out-of-pocket costs for medical or dental services through an SGRE plan.

Contributions to Your HRA



The Company will contribute up to **\$500** for individual coverage and **\$1,000** for employee plus child(ren), spouse or family coverage annually.

You cannot contribute to the HRA. Only the Company can contribute.



Using your HRA Funds

You have full access to your HRA beginning on January 1 of the plan year.



Use the money in your HRA to cover your out-of-pocket expenses for the medical or dental plans. This



includes your deductible, copays and coinsurance. To use funds toward dental expenses, you must be enrolled in one of SGRE's dental plans.

Any unused balance in your HRA rolls over to the next year as long as you remain enrolled in the Blue Cross HRA Plan.



Convenience of a debit card to use for eligible expenses as necessary

It's important to save all receipts from purchases made on your HRA debit card. Accrue Health may request that you substantiate the payments/purchases made on the debit card.

UNLIKE THE HSA:

- You cannot take your account with you if you leave the Company.
- Your account cannot be invested and does not earn interest.
- You may enroll in a Health Care Flexible Spending Account if you choose (see page 12).

HOW DO I USE MY HRA TO PAY FOR HEALTH CARE EXPENSES?

You can use your AccrueHealth debit card to pay for eligible expenses. If a debit card is not available, you can pay with personal funds and submit a claim for reimbursement. More detailed information can be found in the Benefits Service Center.



Dental

Regular dental exams can help your dentist detect problems in the early stages when treatment is simpler and costs are lower. Keeping your teeth and gums clean and healthy will help prevent most tooth decay and periodontal disease and is an essential part of maintaining your medical health.

| Provision | Delta Dental Basic Plan | | Delta Dental Enhanced Plan | |
|--|--------------------------|--------------------------------------|------------------------------------|--|
| | In-Network | Out-of-Network | In-Network | Out-of-Network |
| Annual Deductible (Individual/Family) | \$50/\$150 | | \$25/\$75 | \$75/\$225 |
| Annual Maximum (per person) | \$1,500 | | \$2,000 | |
| Diagnostic and Preventive Includes cleanings, fluoride treatments, sealants and x-rays | 100%, no deductible | 100%, no deductible MCR 90th | 100%, no deductible | 100%, no deductible MCR 90th |
| Basic Restorative Care Includes fillings, periodontics, scaling and root planing, oral surgery | 80%, after deductible | 60%, after deductible MCR 90th | 80%, after deductible | 60%, after deductible MCR 90th |
| Major Services Includes crowns, bridges, and dentures | 50%, after deductible | 50%, after deductible MCR 90th | 60%, after deductible | 50%, after deductible MCR 90th |
| Implants | 50%, after deductible | 50%, after deductible MCR 90th | 60%, after deductible | 50%, after deductible MCR 90th |
| Orthodontia (Child and adults) | Not Covered | | 50% \$2,000 lifetime maximum | 40% MCR 90th \$2,000 lifetime maximum |



Vision

The vision plan covers routine eye exams and pays for all or a portion of the cost of glasses or contact lenses if needed.

| Benefit | Basic Plan | | Enhanced Plan | | Premier Plan | |
|--|---|----------------|---|----------------|---|------------|
| | In-Network | Out-of-Network | In-Network | Out-of-Network | In-Network | |
| Exam | \$10 copay | Up to \$40 | \$10 copay | Up to \$40 | \$10 copay | Up to \$40 |
| Retinal Imaging Benefit | Up to \$39 copay | N/A | Up to \$39 copay | N/A | Up to \$39 copay | N/A |
| Frames | 35% of retail | N/A | \$0 copay; \$130 allowance, 20% off balance | \$40 | \$0 copay; \$150 allowance, 20% off balance | \$60 |
| Standard Plastic Lenses | | | | | | |
| • Single Vision | \$50 | N/A | \$15 copay | \$25 | \$10 copay | \$25 |
| • Bifocal | \$70 | | \$15 copay | \$40 | | \$40 |
| • Trifocal | \$105 | | \$15 copay | \$55 | | \$55 |
| • Lenticular | — | | \$15 copay | \$70 | | \$70 |
| • Standard Progressive Lens | \$135 | | \$80 copay | \$40 | | \$55 |
| Lenses | | | | | | |
| • UV Treatment | \$15 | N/A | \$15 | N/A | \$15 | N/A |
| • Tint(Solid & Gradient) | \$15 | | \$15 | N/A | \$15 | N/A |
| • Standard Plastic Scratch Coating | \$15 | | \$15 | N/A | \$15 | N/A |
| • Standard Polycarbonate (Adults) | \$40 | | \$40 | N/A | \$40 | N/A |
| • Standard Polycarbonate (Kids under 19) | \$40 | | \$0 copay | \$20 | \$0 copay | \$28 |
| • Standard Anti-Reflective Coating | \$45 | | \$45 | N/A | \$45 | N/A |
| • Polarized | 20% off retail | | \$75 | \$3 | \$75 | \$5 |
| Contact Lenses | | | | | | |
| Conventional | 15% off retail 0% off retail | N/A | 0 copay; \$130 allowance, 15% off balance | \$40 | \$0 copay; \$150 allowance, 15% off balance | \$80 |
| Disposable | | | \$0 copay; \$130 allowance, plus balance | \$40 | \$0 copay; \$150 allowance, plus balance | \$80 |
| Laser Vision Correction | 15% off retail or 5% off proportional price | N/A | 15% off retail or 5% off proportional price | N/A | 15% off retail or 5% off proportional price | N/A |
| Frequency | | | | | | |
| Exam | Every 12 mos. | N/A | Every 12 mos. | N/A | Every 12 mos. | N/A |
| Lenses or Contact Lenses | Unlimited | | Every 12 mos. | | Every 12 mos. | |
| Frames | Unlimited | | Every 24 mos. | | Every 24 mos. | |

Flexible Spending Accounts

A Flexible Spending Account (FSA) is a tax-advantaged account that works like a savings account. Each pay period, funds are deducted from your pay on a pre-tax basis and are deposited to your Health Care and/or Dependent Care FSA. You then use your funds to pay for eligible health care or dependent care expenses. Benefits Resource Inc. (BRI) administers the FSA plans.

Save Your Receipts!

It's important to save all receipts from purchases made on your Benefit Resource FSA Debit Card (including prescriptions and physician co-payments). Benefit Resource may request that you substantiate all of your FSA Health Care purchases made on the debit card.

| Account Type | Eligible Expenses | Annual Contribution Limits | Benefit |
|--------------------------------|---|---|---|
| Health Care FSA | Most medical, dental and vision care expenses that are not covered by your health plan (such as co-payments, coinsurance, deductibles, eyeglasses and prescription drugs) | The maximum contribution is \$2,850 per year* | Saves on eligible expenses not covered by insurance; reduces your taxable income. |
| Limited Health Care FSA | Qualified dental and vision expenses only | The maximum contribution is \$2,850 per year | For those who enroll in an HSA, you can enroll in the Limited FSA and save on eligible expenses not covered by insurance. |
| Dependent Care FSA | Dependent care expenses (such as day care, after school programs, or elder care programs) | The maximum contribution is \$5,000 per year (\$2,500 if married and filing separate tax returns) | Reduces your taxable income and helps support you and your spouse to work or attend school full-time. |
| Commuter Benefit | Work related transportation expenses (such as qualified parking and mass transit) | The maximum monthly contribution for Qualified Parking is \$280 and for Mass Transit is \$280 | Reduces your taxable income |

* As of the date of this publication, the IRS has not announced the 2023 maximum limits for these pre-tax programs.

IMPORTANT INFORMATION ABOUT FSAs

Your FSA elections will be in effect from January 1 through December 31, 2023. Claims for reimbursement must be submitted by March 31 of the following year. If you leave employment during the plan year, any remaining funds are forfeited. That's why you should plan your contributions carefully.

The plan allows for up to \$500 of unused Health Care FSA funds to carry over to the next FSA plan year. Any unused funds over \$500 will be forfeited. This is known as the "use it or lose it" rule, and IRS regulations govern it.

Note that FSA elections do not automatically continue from year to year; you must actively enroll each year. If you have rollover money from the current year's FSA and want to enroll in the HSA, the rollover money can roll into a Limited Health Care FSA.

Commuter Benefit plan participation, enrollment, and changes must be submitted by the 10th of each month to be effective the following month. To learn more, please visit [BenefitResource.com](https://www.benefitresource.com).

| | With FSA | Without FSA |
|--|--------------|-------------|
| Your taxable income | \$50,000 | \$50,000 |
| Pre-tax contribution to Health Care and Dependent Care FSA | \$2,000 | \$0 |
| After-tax dollars spent on eligible expenses | \$11,701 | \$12,355 |
| Spendable income after expenses | \$0 | \$2,000 |
| | \$36,299 | \$35,645 |
| Tax savings with the Medical and Dependent Care FSA | \$654 | |

This is an example only and may not reflect your actual experience. It assumes a 25% Federal income tax rate marginal rate and a 7.7% FICA marginal rate. State and local taxes vary and are not included in this example. However, you will also save on any state and local taxes as well.

Life and AD&D Insurance

BASIC LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE

You are automatically enrolled in Basic Life and Accidental Death & Dismemberment Insurance through Lincoln Financial. Basic Life and AD&D are offered at no cost to you.

| Plan Name | Employee Coverage |
|---|--|
| Basic Life | Coverage is equal to 1.5 times your base annual salary rounded to the next \$1,000. This amount may not exceed \$500,000 |
| Accidental Death & Dismemberment (AD&D) | Coverage is equal to 1.5 times your base annual salary rounded to the next \$1,000. This amount may not exceed \$500,000 |

SUPPLEMENTAL LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) INSURANCE

You may purchase additional Life and AD&D for you and your dependents. When you elect Supplemental Life Insurance for you, your spouse, or your child, you will automatically be enrolled for Supplemental AD&D at the same coverage amount. For you to be eligible for Spousal Life and Child Life coverages, you must elect Employee Supplemental Life coverage for yourself.

| Plan Name | Employee Coverage |
|-------------------------------------|---|
| Employee Supplemental Life and AD&D | Coverage is equal to up to 5 times your base annual salary rounded to the next \$1,000. This amount, combined with your Basic Life coverage, may not exceed \$1,000,000. This plan has a Non-Medical Maximum of \$500,000. |
| Spouse Supplemental Life and AD&D | You may purchase increments of \$5,000 to a maximum of \$500,000. The monthly rate is based on the amount selected and your age. The amount of Spousal Life insurance coverage cannot be greater than 50% of the employee benefit. This plan has a Non-Medical Maximum of \$50,000 |
| Dependent Child Life and AD&D | You may purchase increments of \$5,000 to a maximum of \$20,000. |

EVIDENCE OF INSURABILITY (EOI)

Evidence of Insurability rules apply to Employee Supplemental Life and Spouse Supplemental Life coverages.

Any amounts elected above the Non-Medical Maximum listed will require EOI and will need to be approved by Lincoln Financial. If you are a new hire or newly eligible for coverage based on a qualifying life event, you can elect up to the Non-Medical Maximums listed with no EOI requirement.

If you were previously offered coverage and declined or you wish to increase your current coverage amount, you can elect one coverage level up, up to the Non-Medical Maximum, with no EOI requirement. However, if you are electing an amount greater than one coverage level up or an amount above the Non-Medical Maximum, EOI will be required and will need to be approved by Lincoln Financial.



Disability

Consider what would happen financially if you became disabled and could no longer work due to a non-occupational injury or illness. It would likely be a financial challenge to replace enough income to meet your monthly expenses. That's why SGRE offers Short Term Disability (STD) and Long-Term Disability (LTD).

You automatically are enrolled in STD coverage at no cost to you.

You can select from two LTD options:

- The first is LTD coverage paid 100% by the Company. With this option, should you become disabled, your LTD benefit will be subject to taxes.
- The second option is a Post-Tax Voluntary LTD coverage, which is entirely paid for by you. Since you pay premiums with post-tax dollars, your LTD benefit would not be taxed if you become disabled.

Questions about which plan might be right for you tax-wise? Please contact your financial or tax advisor.

| Plan Name | Employee Coverage |
|----------------------------|---|
| STD (Company-paid) | Benefit is 100% of your weekly earnings for the first nine weeks of disability (including the elimination period if using PTO) and then 66.67% of your weekly earnings for the remaining disability. STD will either end at the earlier of the end of the disability or the end of the 26th week. |
| LTD (Company-paid) | Benefit is 60% of your monthly covered earnings (less other deductible sources of income, such as Social Security and Workers Compensation). The maximum monthly benefit is \$15,000. |
| LTD Post-Tax (Paid by you) | Benefit is 60% of your monthly covered earnings (less other deductible sources of income, such as Social Security and Workers Compensation). The maximum monthly benefit is \$15,000. |



REPORTING A CLAIM

You can report a disability claim/leave of absence by going online to MyLincolnPortal.com or calling 888-408-7300 to speak with an Intake Specialist. Use company code **SGRE**.





Employee Assistance Programs

We all need a little help sometimes. These resources, provided to you, your spouse/ domestic partners, dependent children, parents and parents-in-law, can help cut through the red tape and barriers that so often create frustration and problems. Best of all—this support is FREE, unlimited and completely confidential. SGRE offers two different programs to better suit our employee needs. The Employee Assistance Program (EAP) through Health Advocate and Health Advocacy through Alight.

EMPLOYEE ASSISTANCE PROGRAM (EAP)

Having personal, work, financial or family problems? The Employee Assistance Program (EAP) is here to help! You and your spouse or domestic partner, dependent children, parents and parents-in-law can use this program for:

- Marital and family conflicts
- Job-related difficulties
- Stress, anxiety and depression
- Parent and child relationships
- Legal and financial counseling
- Identity theft counseling
- Financial planning
- Various other related issues

HEALTH ADVOCACY

Siemens Gamesa Renewable Energy engages Health Advocate to help you and your eligible family members navigate the world of health care and benefits.

Personal Health Advocates, typically registered nurses supported by a team of medical directors and administrative experts, can help you navigate the health care system. Your Advocate will do the work for you—saving you time, money, and headaches!

Health Advocates can help:

- Explain tests, treatments and medications
- Coordinate benefits between dental, medical and other health care providers
- Identify and resolve errors in the application of deductibles and copayments
- Locate qualified specialists and best-in-class medical institutions
- Schedule appointments; transfer medical records
- Review bills to identify duplicate or incorrect charges
- Help members access resources that fall outside traditional health insurance coverage
- ...and so much more!



For More Information

Call 866-799-2728 or visit Health Advocate's website: HealthAdvocate.com/members.



401(k) Savings Plan

The Siemens Gamesa Renewable Energy 401 (k) Savings Plan gives you the tools you need to build a solid financial future. SGRE matches 100% of employee contributions up to the first 6% of eligible pre-tax earnings, subject to the IRS annual contribution limits. You may enroll or increase your contribution to this plan at any time. While participation is not mandatory, we strongly encourage you to use this plan to help build a sufficient retirement nest egg.

WHAT ARE COMPANY MATCHING CONTRIBUTIONS?

Each pay period, Siemens Gamesa Renewable Energy will match every dollar you save in the plan up to 6% of your eligible pre-tax earnings. **If you contribute less than 6%, you are missing out on a great savings opportunity.** So don't leave money on the table!

WHEN DO I OWN THE COMPANY MATCHING CONTRIBUTIONS?

The term "vesting" refers to the Company matching contribution portion of your account. For any company contributions, you will be 100% vested after two years of service.

| Contribution Limits | Employee Coverage |
|---------------------------------|---|
| Investment Options | Pre-tax, Roth and After-tax options are available. |
| Eligibility | Employees are eligible to participate in the plan on their date of hire. |
| Contribution Limit | Up to 75% of your pay to the IRS annual limit of \$19,500 in 2023. If you are 50 years of age or older (or reach age 50 by the end of the year), you may make an additional catch-up contribution of up to \$6,500. |
| Automatic Enrollment | Eligible employees are automatically enrolled for a 3% contribution after 30 days if no action is taken. This automatic enrollment increases by 1% annually to a maximum of 10%. |
| Company Match | Siemens Gamesa Renewable Energy matches 100% of employee contributions up to the first 6% of eligible pre-tax earnings, subject to the IRS annual contribution limits. |
| Company Vesting Schedule | Employees are 100% vested after two years of service. Employees already vested will remain vested. |

USE THE TOOLS

Ensure your account is invested the way you want by reviewing your current investment strategy. Alight offers a planning center with tools, resources and educational articles to help you manage your retirement account.

For more information or to access the tools and resources available to you, call Alight at **844-315-3811** or visit digital.alight.com/siemensgamesa.

Premiums

All rates below are for full-time employees and are shown as **monthly** contributions

Medical (pre-tax)*

| | Blue Cross HSA Plan | Blue Cross HRA Plan | Blue Cross Traditional PPO Plan |
|-----------------------|---------------------|---------------------|---------------------------------|
| Employee | \$53.70 | \$96.04 | \$128.19 |
| Employee & Spouse | \$169.40 | \$292.11 | \$360.78 |
| Employee & Child(ren) | \$153.80 | \$254.50 | \$321.72 |
| Family | \$299.68 | \$450.59 | \$554.30 |

Supplemental Life and Supplemental AD&D (post-tax)

| Age Band | Employee & Spouse rate per \$1,000 | Child Rate |
|----------|------------------------------------|------------|
| < 34 | \$0.054 | \$0.125 |
| 35-39 | \$0.072 | |
| 40-44 | \$0.095 | |
| 45-49 | \$0.134 | |
| 50-54 | \$0.197 | |
| 55-59 | \$0.356 | |
| 60-64 | \$0.538 | |
| 65-69 | \$1.024 | |
| 70-74 | \$1.838 | |
| 75+ | \$1.995 | |

Long-Term Disability (post-tax)

| | Rate per \$100 |
|------------------------|----------------|
| Post-Tax Voluntary LTD | \$0.288 |

Dental (pre-tax)*

| | Basic |
|-----------------------|---------|
| Employee | \$5.48 |
| Employee & Spouse | \$11.91 |
| Employee & Child(ren) | \$9.96 |
| Family | \$16.29 |

| | Enhanced |
|-----------------------|----------|
| Employee | \$10.60 |
| Employee & Spouse | \$22.18 |
| Employee & Child(ren) | \$25.72 |
| Family | \$40.04 |

Vision (pre-tax)*

| | Basic |
|-----------------------|-------|
| Employee | \$0 |
| Employee & Spouse | \$0 |
| Employee & Child(ren) | \$0 |
| Family | \$0 |

| | Enhanced |
|-----------------------|----------|
| Employee | \$4.44 |
| Employee & Spouse | \$8.89 |
| Employee & Child(ren) | \$8.00 |
| Family | \$13.34 |

| | Premier |
|-----------------------|---------|
| Employee | \$7.62 |
| Employee & Spouse | \$15.22 |
| Employee & Child(ren) | \$13.70 |
| Family | \$22.84 |



* Tax note: employers are required to report as compensation the value of medical, dental, and vision insurance provided to domestic partners and the children of these relationships and to withhold taxes on that amount. The value of the health insurance coverage provided to these dependent relationships is referred to as imputed income.

Mobile Wallet Card

Stay In-the-Know, On-the-Go!

My Mobile Wallet Card is the easy way to find your benefits contact information from any device, wherever you are. It's a web-based tool that keeps all your SGRE benefits contacts in one place. And it's easy to access from your smartphone, tablet or computer.

To access contact information for your benefits, visit mymobilewalletcard.com/sgre.

Click on any benefit to see more information, including group numbers, phone numbers, websites and more.

Bookmark your mobile wallet card to your devices and access them anytime from wherever you are!



Scan this
QR Code



Helpful Resources

| | Who To Call | Phone Number | Website |
|---|-----------------------------------|--------------|---|
| Medical Plan | Blue Cross Blue Shield of Florida | 800-830-1501 | MyHealthToolkitfl.com |
| Dental Plan | Delta Dental | 800-521-2651 | deltadentalins.com |
| Health Savings Account (HSA) | Accrue Health | 844-643-3099 | member.accrue-health.com Can also access AccrueHealth through the MyHealthToolkitfl.com once registered |
| Health Reimbursement Account (HRA) | Accrue Health | 844-643-3099 | member.accrue-health.com Can also access AccrueHealth through the MyHealthToolkitfl.com once registered |
| Prescription Drug | CVS Caremark | 844-582-8177 | caremark.com |
| Vision Plan | EyeMed | 866-723-0513 | eyemed.com |
| Flexible Spending Accounts (FSA) | Benefit Resource | 877-935-5262 | benefitresource.com |
| Life and AD&D Insurance (includes Supplemental Life and AD&D) | | | |
| Short-Term & Long-Term Disability Insurance | Lincoln Financial | 888-408-7300 | mylincolnportal.com |
| FMLA | | | |
| Health Advocacy / EAP | Health Advocate | 866-799-2728 | healthadvocate.com/members |
| Retirement | Alight | 844-315-3811 | digital.alight.com/siemensgamesa |



Questions?

Call the Benefits Service Center at **844-315-3811** Monday–Friday, 8 a.m.–8 p.m. EST. Or visit the website at digital.alight.com/siemensgamesa.



About This Guide

This benefit summary provides selected highlights of the Siemens Gamesa Renewable Energy employee benefits program. It is not a legal document and shall not be construed as a guarantee of benefits nor of continued employment at Siemens Gamesa Renewable Energy. All benefit plans are governed by master policies, contracts and plan documents. Any discrepancies between the information provided through this summary and the actual terms of the policies, contracts and plan documents are governed by the terms of these policies, contracts and plan documents. Siemens Gamesa Renewable Energy reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time. The Plan Administrator has the authority to make these changes.

Copies of this guide, as well as plan documents, plan notices, and rates, are available online in the Library section of the Benefits Service Center.