





# 2024

## What's inside

- Welcome to your NOV benefits!
- Eligibility & making changes
- How to enroll
- Helpful benefit terms & definitions
- Which medical plan is right for you?
- Medical plan comparison
- How the HSA works
- Where to go for care
- Health & wellness resources
- Choose Well-being
- Dental plan

- **18** Vision plan
- 19 Flexible spending accounts
- 20 Life and AD&D insurance
- 22 Disability coverage
- 24 Voluntary benefit plans
- 26 401(k) retirement savings plan
- Retiree medical coverage
- Additional company-provided benefits
- Vacation & holidays
- Your benefit contacts







# Welcome to your NOV benefits!

At NOV, we are committed to keeping you informed about the world-class benefits and resources available to help you live a healthy and happy life. With plans to keep your body and mind healthy throughout the year and programs that will set you up for future success, our benefits program gives you everything you need to thrive.

Explore this guide to learn more about the benefit and wellness programs NOV offers to you and your family. Taking the time to research your options now will help you choose the plans that best meet your family's needs now and in the future.

### Health

- Medical/Prescription (Rx)
- Dental
- Vision
- Telehealth
- Where to go for care
- Health savings account (HSA)
- Flexible spending accounts (FSAs)
- Airrosti musculoskeletal care
- Virta Health
- Sword virtual physical therapy
- Bloom women's pelvic health
- BCBS wellness programs and resources

#### Wellness & Work/Life

- Choose Well-being\*
- Employee assistance program (EAP)\*
- Vacation\*
- Holidavs\*

#### Retirement

- 401(k) plan
- Retiree medical

#### **Financial Protection**

- Basic Life and AD&D\*
- Supplemental Life and AD&D
- Short and long-term disability\*
- Accident insurance
- Hospital indemnity
- Critical illness
- Identity theft
- Pet insurance
- Business travel accident insurance\*
- International SOS\*

Note: Part-time employees are not eligible for all benefits.







<sup>\*</sup>NOV pays the full cost.

## Eligibility & making changes

Your eligibility for benefits depends on your employment status. The chart below highlights the benefits you are eligible for on your date of hire.

<b>Full-time employees</b> (30 hours a week)	Part-time employees
All benefits	Core benefits (not eligible for Life, AD&D, and Disability insurance)

The election choices you make when you first become eligible are in effect for the remainder of the plan year. It's important to review your benefit options and choose the best coverage for you and your family.

### Eligible dependents

You may enroll your eligible dependents in many of the same plans you choose for yourself. Eligible dependents include:

- Your legal spouse
- Your biological, adopted, or stepchildren up to age 26 (Regular full-time or part-time employees who are dependent children of NOV employees are required to enroll as an employee. Your coverage as a dependent child will end effective your date of hire.)
- Any child for whom you have been granted legal custody, or you are required to cover as part of a qualified medical child support order
- Biological grandchildren, if residing with you and claimed as a dependent on your federal income tax return

### Making changes

You have three opportunities to enroll in or make changes to your benefits on usbenefits.nov.com:

- 1. Within 31 days of your eligibility date, which is typically your date of hire
- 2. During the annual enrollment period
- 3. Within 31 days of a qualified life event. Some examples include:
  - Marriage or divorce
  - Birth or adoption of a child
  - Death of a dependent
  - Loss or gain of other health coverage for you and/or dependents
  - Change in employment status

## **Supporting documentation**

If you are enrolling dependents in medical, dental and/or vision coverage for the first time, you will be required to provide supporting documentation verifying their eligibility status, such as a marriage certificate or birth certificate. If the required documents are not submitted within 30 days, dependents will be dropped from all









## How to enroll

Follow these steps to enroll in your benefits.

#### 1. Evaluate your needs

Estimate your upcoming health care needs and those of your dependents.

#### 2. Review your options

- Review this benefit guide to compare your options and evaluate plan costs and potential savings.
- Visit **usbenefits.nov.com** to access additional benefits information and resources.

#### 3. Enroll at usbenefits.nov.com

- To get started, use the NOV Benefit Enrollment System by clicking the "Enroll now" button.
- Enter your username which is "NOV" + your employee ID number (i.e. NOV123456). Your initial password is the first letter of first name (capitalized) + the first four characters of last name (lower case) + the last 4 of your SSN (John Smith: Jsmit1234). You will be asked to reset your password after your first login.

**Note:** this log-in will be different than your network/Hub log-in and passwords are case sensitive.

 Contact the Benefits Service Center with questions by calling 1-877-668-2363 or via chat within NOV's Benefit Enrollment System.

#### 4. Confirm your elections

Review your confirmation statement carefully to make sure your benefits and dependent information are correct.





## Helpful benefit terms & definitions

To better understand your coverage, it's helpful to be familiar with benefits vocabulary. Take a moment to review these terms, which may be referenced throughout this guide.

Benefit acronyms			
AD&D Accidental Death & Dismemberment	<b>EAP</b> Employee Assistance Program		
<b>FSA</b> Flexible Spending Account	<b>HSA</b> Health Savings Account		
<b>LTD</b> Long-Term Disability	OOPM Out-of-Pocket Maximum		
<b>PPO</b> Preferred Provider Organization	<b>STD</b> Short-Term Disability		

#### **Balance bill**

When a healthcare provider bills a patient for the difference between what the patient's health insurance reimburses and the provider charges.

#### Copay

A fixed dollar amount you pay the provider at the time of service.

#### Coinsurance

The percentage paid for a covered service, shared by you and the plan. Coinsurance can vary by plan and provider network. You are responsible for coinsurance until you reach your plan's out-of-pocket maximum

#### **Deductible**

The amount you pay each calendar year before the plan begins paying benefits. Not all covered services are subject to the deductible. For example, the deductible does not apply to preventive care services.

#### **Emergency room care**

Care received at a hospital emergency room for life-threatening conditions.

#### **Guarantee issue**

The amount of life insurance available to you without having to provide a Statement of Health (SOH) or Evidence of Insurability (EOI).

#### In-network care

Care provided by contracted doctors within the plan's network of providers. This enables participants to receive care at a reduced rate compared to care received by out-of-network providers.

#### **Out-of-network care**

Care provided by a doctor or at a facility outside of the plan's network. Your out-of-pocket costs may be higher, and services may be subject to balance billing.

#### **Out-of-pocket maximum**

The maximum amount you pay per year before the plan begins paying for covered expenses at 100%. This limit helps protect you from unexpected catastrophic expenses.

#### **Premium**

The cost of your benefit plans to the insurance company. You share this cost with the company and pay your portion through regular payroll deductions.

#### **Preventive care**

Routine healthcare, including annual physicals and screenings, to prevent disease, illness, and other health complications. In-network preventive care is covered at 100%.

#### **Urgent care**

Visit urgent care for sudden illnesses or injuries that are not life-threatening. Urgent care centers are helpful when care is needed quickly to avoid developing more serious pain or problems.









## Which medical plan is right for you?

Choosing the right medical plan to meet your needs is the first step to living your healthiest life. We offer three medical plans so you can pick the best fit for your circumstances. When deciding which medical plan is right for you and your family, it is important to consider the total cost of coverage. This includes what you pay in premiums from your paycheck and what you pay for services out of your pocket.

## Plan highlights

Consumer Plan + HSA: This plan can be used with an HSA to pay for eligible medical, dental, and vision expenses tax-free. This plan allows access to in-network and out-of-network providers but requires you to meet the deductible before the plan begins to pay toward your healthcare.

1250 PPO & 1500 PPO Plans: These plans offer in-network and out-of-network provider access with more predictable out-of-pocket costs but higher premiums from your paycheck than the Consumer Plan + HSA. Each PPO plan has its own set of plan costs and coverage levels.

Benefit	Consumer Plan + HSA	1250 PPO Plan & 1500 PPO Plan
Annual deductible to satisfy	✓	✓
Copayment for services	√*	✓
Coinsurance for services	✓	√
In-network coverage	✓	✓
Out-of-network coverage	✓	✓
Eligible to enroll in HSA	✓	-

<sup>\*</sup>After deductible is met.

### Stay in-network for care

The Consumer Plan + HSA and PPO plans give you the choice of using any doctor or facility—either "in" or "out"

It's best to ask network questions up-front so you don't receive unexpected medical bills. Contact BCBS at 1-855-212-1613 to find a provider near you.

#### BCBS resources

As a part of your medical coverage, BCBS offers resources to help you and your family members make informed choices and save money.

#### Blue Distinction Center (BDC) & BDC+

BDC and BDC+ facilities have demonstrated expertise in delivering clinically proven specialty healthcare.

Learn more at bcbs.com/why-bcbs/blue-distinction or 1-855-212-1613.

#### **BCBS Global Core**

NOV BCBS medical plan enrollees are eligible for medical coverage while traveling abroad, either on business or pleasure.

Visit bcbsglobalcore.com, call 1-800-810-2583 or 1-804-673-1177 (collect) or download the app (Login: NVL).







## Medical plan comparison

	Consumer Plan + HSA		1250 PPO Plan		1500 PPO Plan	
Plan features	<b>In-network</b> EE only/Other tiers	<b>Out-of-network</b> EE only/Other tiers	<b>In-network</b> Individual/Family			<b>Out-of-network</b> Individual/Family
Annual deductible	\$2,000 / \$4,000*	\$4,000 / \$8,000*	\$1,250 / \$2,500**	\$3,750 / \$7,500**	\$1,500 / \$3,000**	\$4,500 / \$9,000**
Annual out-of-pocket maximum	\$4,500 / \$9,000*	\$9,000 / \$18,000*	\$4,500 / \$9,000**	\$9,000 / \$18,000**	\$5,000 / \$10,000**	\$10,000 / \$20,000**
NOV 2024 HSA contribution	\$500 / \$1,000 First time enrollees: additional \$500 / \$1,000 lump sum		N/A		N/A	
	You	pay:	You pay:		You pay:	
Preventive care visit	Covered in full	50% after deductible	Covered in full	50% after deductible	Covered in full	50% after deductible
Virtual Medical Visits powered by MDLIVE	\$48 before deductible is met, \$15 after deductible		\$10 copay		\$15 copay	
Primary care visit	20% after deductible	50% after deductible	\$35 copay	50% after deductible	\$40 copay	50% after deductible
Specialist visit	20% after deductible	50% after deductible	\$70 copay	50% after deductible	\$80 copay	50% after deductible

<sup>\*</sup>All coverage tiers with the exception of employee only have an aggregate deductible and OOPM. This means that any one person or combination of family members covered by the plan can meet the family deductible and OOPM.

<sup>\*\*</sup>All coverage tiers with the exception of employee only have an embedded deductible and OOPM. This means that you will have both an individual and a family deductible and OOPM. No individual will satisfy more than the individual deductible or OOPM.







## Medical plan comparison continued

Plan features	Consumer Plan + HSA	1250 PPO Plan	1500 PPO Plan			
Prescription drugs: retail (up	Prescription drugs: retail (up to a 30-day supply)					
Generic drugs	Up to \$10 copay after deductible	Up to \$10 copay	Up to \$10 copay			
Preferred drugs	\$30 copay or 25% after deductible, whichever is greater	\$30 copay or 25%, whichever is greater	\$30 copay or 25%, whichever is greater			
Non-preferred drugs	\$50 copay or 30% after deductible, whichever is greater	\$50 copay or 30%, whichever is greater	\$50 copay or 30%, whichever is greater			
Specialty drugs	30% after deductible up to \$200	30% up to \$200	30% up to \$200			
Prescription drugs: mail ord	<b>er</b> (up to a 90-day supply)					
Generic drugs	Up to \$20 copay after deductible	Up to \$20 copay	Up to \$20 copay			
Preferred drugs	Up to \$60 copay after deductible	Up to \$60 copay	Up to \$60 copay			
Non-preferred drugs	Up to \$100 copay after deductible	Up to \$100 copay	Up to \$100 copay			



## Medical plan comparison continued

## Cost for coverage

2024 bi-weekly premium	Consumer Plan + HSA	1250 PPO Plan	1500 PPO Plan
Employee only	\$37.00	\$89.00	\$56.00
Employee + spouse	\$89.00	\$250.00	\$144.00
Employee + child(ren)	\$76.00	\$194.00	\$125.00
Employee + family	\$139.00	\$360.00	\$239.00

**Note:** Employees who are paid weekly should calculate payroll deductions by dividing amounts by 2.

## **♥CVS** caremark<sup>®</sup>

#### **Maintenance Choice program**

You can save money by participating in the CVS Caremark Maintenance Choice program. This program can help streamline your experience of filling conditions—and get you three refills of medication for less than the cost of a 30-day supply. Plus, delivery is free.

not opted out of the program, you will not be covered and will be charged the full cost of the medication.

For more information about the program, visit **caremark.com** or contact the CVS Caremark Customer Care line at 1-833-741-1361.









**Benefits** 

## How the health savings account (HSA) works

If you enroll in the Consumer Plan + HSA, a health savings account (HSA) is opened for you through HSA Bank to help pay for eligible healthcare expenses not paid for under your medical, dental, or vision plan. An HSA makes it easy to pay for current healthcare costs and save for future healthcare needs in retirement.



#### What are the benefits of an HSA?

- NOV contributes FREE money to your account!
- You can set aside tax-free\* money to pay for out-of-pocket healthcare expenses.
- An HSA is your personal account. If you leave the company, the account goes with you.
- All unused funds roll over year to year.
- You can change your contribution amount to your HSA anytime during the year. HSAs can make great retirement savings accounts for healthcare.
- You will receive an HSA Bank debit card to pay for eligible expenses. You can also submit claims for reimbursement at hsabank.com

#### How are contributions made to an HSA?

NOV will automatically contribute to your HSA each year. First time enrollees will receive an additional lump sum contribution from NOV, as shown in the table below. You can also contribute pre-tax dollars from your paycheck up to annual IRS maximum to pay for eligible healthcare expenses now or into retirement.

HSA contributions made by both you and NOV cannot exceed the annual IRS maximums.

Coverage tiers	2024 IRS maximum contribution limits	First-time NOV lump sum contribution**	2024 NOV annual contribution*** (funded each paycheck)	Catch-up contribution (age 55 or over)	
Employee only	\$4,150	\$500	\$500	- Additional \$1,000	
Employee + spouse Employee + child(ren) Employee + family	\$8,300	\$1,000	\$1,000	(above the IRS maximum)	

<sup>\*\*</sup>Contributed within 60 days, or as soon as administratively feasible, for first time enrollees.



<sup>\*</sup>State taxes apply in certain states such as CA and NJ. For detailed tax implications of an HSA, please contact your professional tax advisor.

<sup>\*\*\*</sup>Prorated for new hires and newly eligible.

## How the health savings account (HSA) works continued

### HSA eligibility requirements

- You must be enrolled in the Consumer Plan + HSA.
- You cannot be covered under another non-qualified health plan, including your spouse's health FSA. Participation in a limited health FSA is acceptable.
- You cannot be enrolled in Medicare or Tricare.
- You cannot be claimed as a dependent on someone else's tax return, excluding your spouse.

Questions? Refer to IRS Publication 969 for complete HSA rules.

## **HSA** highlights

- You must be enrolled in the Consumer Plan + HSA to be eligible to participate.
- Take advantage of FREE company funding to help pay for your annual deductible
- Contributions, qualified expenses, and earnings are tax-free.
- Personal contributions from your paycheck help lower your taxable income.

### How to use your HSA



#### **Contribute money** to your account

- \$3,650 employee only maximum
- \$7,300 all other coverage tiers maximum



#### **Get NOV's contribution**

- \$500 employee only
- \$1.000 all other coverage tiers
- First time enrollees receive an additional \$500/\$1.000 contribution



#### Use the funds

- Pay your deductibles
- Pay for qualified medical, dental, and vision expenses
- Pay for anything (once you're age 65)



#### Let your money grow

- Unused funds remain in your account
- Your account goes with you even if you leave the company



#### **Enjoy the tax savings**

- No tax on the money you contribute
- No tax on the cost of eligible expenses
- No tax on the interest you earn

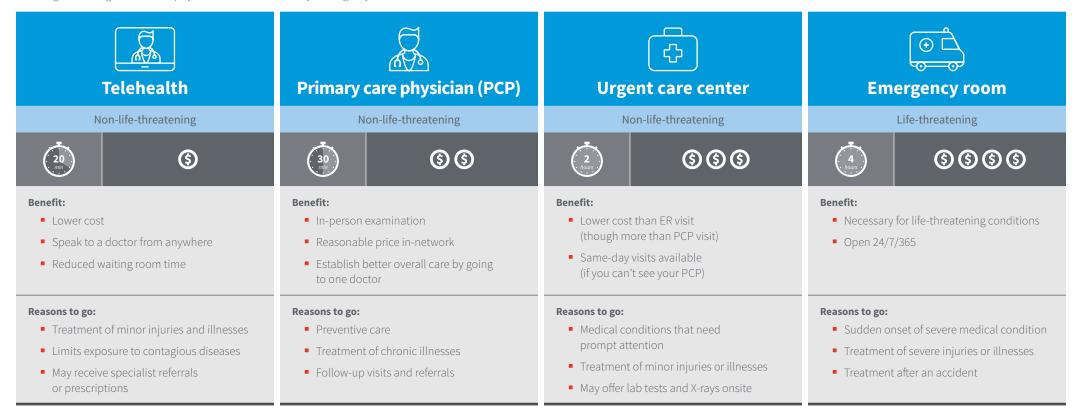






## Where to go for care

Knowing where to go for care helps you save time and money—and gets you back on the road to health faster.





**Benefits** 

## Health & wellness resources

Telehealth	Airrosti	Virta Health	Bloom	Sword Health
NOV BCBS enrollees have access to phone consultations and online video visits 24/7/365 with a licensed medical professional who may be able to define treatment, provide referrals, and prescribe medication.  To schedule an appointment, call 1-888-681-4083 or go online to mdlive.com/nov.	If you are experiencing pain in your muscles, joints, knees, back, or other areas of the body, Airrosti may offer a solution that does not involve surgery, needles, prescriptions, or long-term treatment plans.  For more information, call  1-800-404-6050 or visit airrosti.com.	Through Virta Health, you can take steps toward reversing prediabetes, and type II diabetes as well as safe and sustainable weight loss.  Visit virtahealth.com/join/nov to get started.	Bloom supports your health through all stages of life, including pregnancy, postpartum, and menopause. This women's digital pelvic therapy program addresses pain, discomfort, pressure, urinary leaking, and bowel issues.  Visit join.hibloom.com/nov.	Sword Health is an online physical therapy program that will connect you to a physical therapist who will create a customized program you can follow when and where it's convenient for you.  Get started at join.swordhealth.com/nov.





## Health & wellness resources continued

### Employee assistance program (EAP)

When you need help with work, home, personal, or family issues, the SupportLinc employee assistance program (EAP) offers value-added programs and services at no charge. These services can help you overcome challenges while saving you time and money. Some of the resources available to you include:



24/7 online or phone counseling support



Up to 6 in-person visits



**Resources for** work, family, and health



**Financial** and legal services



Contact the EAP anytime, day or night, by calling **1-888-881-5462** or visit **global.supportlinc.com** and enter "nov" as the group code.



### Support on-the-go

- **Textcoach:** Personalized coaching with a licensed counselor
- Animo: Self-guided resources to improve focus, wellbeing,
- Virtual Support Connect: Group therapy sessions on a







Benefit terms • Which medical plan is right for you? • Medical plan comparison • HSA • Where to go for care • Health & wellness resources • Choose Well-being • Dental • Vision

## Choose Well-being

At NOV, we want to make reaching your wellness goals easy and attainable. To help you get the results you want, we are pleased to offer a voluntary wellness program to support your efforts to develop and maintain a healthy lifestyle.

Our Choose Well-being wellness program can help you and your covered spouse achieve health and wellness goals through activities, incentives, and tools:

- Digital educational tools providing immediate access to health information
- Health assessment questionnaire
- Free health screenings
- Health management programs through BCBS

### Earn rewards for being healthy

\$75 for completing the CarePlus Mobile Health Assessment

**\$75** for participating in a Biometric Screening

\$50 per level for participating in Point Program activities

## Use the app to stay on track

The CarePlus Mobile Health app links with your BCBS medical plan and allows you to view your plan summaries and wellness incentive progress. Wellness incentives or as soon as administratively feasible. Taxes are withheld as required. Your health





**Benefits** 







## Dental plan

We offer two Cigna dental plans to help you maintain a healthy smile through regular dental care and fix any problems as soon as they occur.



The **DHMO plan** offers lower premium costs and the convenience of having a network general dentist (NGD) coordinate your care. There is no annual deductible, calendar year maximum, or out-of-network coverage.

The **DPPO plan** offers you the freedom and flexibility to choose any licensed dentist. You receive the greatest savings when you visit an in-network provider.

To find an in-network provider near you, visit mycigna.com.

#### In-network vs out-of-network

- The DHMO plan offers access to in-network dentists only.
- The DPPO plan gives you the freedom to choose any dentist.

	Dental HMO (DHMO)	Dental PPO (DPPO)
Plan features with Cigna	In-network only	In-network
	You pay:	You pay:
Network	Cigna Dental Care Access Plus	Total Cigna DPPO
Calendar year deductible (waived for preventive services)	None	\$50 Individual / \$100 Family
	Plan pays:	Plan pays:
Calendar year benefit maximum	None	\$2,000
<b>Diagnostic &amp; preventive services</b> (e.g., x-rays, cleanings, exams)	Covered in full	100%*
Basic & restorative services** (e.g., fillings, extractions, root canals)		80%
Major services** (e.g., dentures, crowns, bridges)	Copays vary	50%
Orthodontia (adults and children)	copays vary	50%
Orthodontia lifetime maximum		\$2,000

<sup>\*</sup>Covered at 100% of usual, customary, and reasonable for the area.

### Cost for dental coverage

2024 bi-weekly premium	Employee only	Employee + spouse	Employee + child(ren)	Employee + family
DHMO Plan	\$3.50	\$7.50	\$7.00	\$11.00
DPPO Plan	\$7.50	\$16.50	\$15.50	\$24.00

Note: Employees who are paid weekly should calculate payroll deductions by dividing amounts by 2.





<sup>\*\*</sup>Some oral surgery expenses, such as impacted wisdom teeth, may be treated as medical expenses. Confirm coverage with provider, if applicable.

## Vision plan

Keep your vision clear and your eyes in good health with regular eye exams. The vision plan offers an extensive network of optometrists and vision care specialists. You will save money by visiting in-network providers. Your vision coverage is through Vision Service Provider (VSP). To find an in-network provider near you, visit vsp.com.

## What you need to know about your vision plan

- Mention that you have VSP coverage when you make your

	Vision Plan			
Plan features with VSP	In-network	Out-of-network Plan reimburses you:		
	You pay:			
<b>Exam</b> once every 12 months	\$25 copay for exam and materials	Up to \$50 after \$25 copay		
<b>Frames</b> once every 24 months for adults and every 12 months for dependent children	Up to \$160 after copay	Up to \$70 after copay		
<b>Lenses</b> once every 12 months				
Single Vision		Up to \$50 after copay		
Bifocal	Covered in full after copay	Up to \$75 after copay		
Trifocal	arter copay	Up to \$100 after copay		
Contact lenses (in lieu of lenses and frames) once ever	y 12 months			
Medically necessary	Covered in full after copay	Up to \$210 after copay		
Elective	Up to \$150	Up to \$105		

### Cost for vision coverage

2024 bi-weekly premium	Employee only	Employee + spouse	Employee + child(ren)	Employee + family
Vision Plan	\$3.25	\$6.50	\$6.00	\$9.25

Note: Employees who are paid weekly should calculate payroll deductions by dividing amounts by 2.





## Flexible spending accounts (FSAs)

FSAs offer a smart way to stretch your dollars by setting aside pre-tax dollars to pay for eligible healthcare and dependent care expenses. Each year, you must elect the annual amount you want to contribute to each account. Your contributions will be deducted pre-tax from your paycheck which helps reduce your taxable income.



Plan features	Health FSA	Limited health FSA	Dependent care FSA
Eligibility	PPO Plan enrollees, or employees who waive medical coverage	Consumer Plan + HSA participants only	All eligible employees
Annual contribution limit	\$3,050	\$3,050	\$5,000
Eligible expenses	Health care, dental, and vision expenses	Dental and vision expenses	Daycare for children (12 & under) and dependent adults
Availability of funds	The amount you elect is available on your plan <b>effective date</b>	The amount you elect is available on your plan <b>effective date</b>	Be <b>reimbursed</b> up to the amount available in your account
Payment or reimbursement options	Debit card or reimbursement	Debit card or reimbursement	Reimbursement
Services deadline	Services must be incurred by 12/31/2024	Services must be incurred by 12/31/2024	Services must be incurred by 12/31/2024
Submission deadline for reimbursement	Submit claims by <b>3/31/2025</b>	Submit claims by <b>3/31/2025</b>	Submit claims by <b>3/31/2025</b>

### FSA rules to keep in mind

- You can only change your contribution amount during the
- You will lose funds not used during plan year if not reimbursed by deadlines.



Refer to IRS Publication 502 and 503 for a complete list of eligible expenses or usbenefits.nov.com.







## Life and accidental death & dismemberment (AD&D) insurance

Life and AD&D insurance, through MetLife, provides financial security to you and your family if you pass away or become seriously injured.

#### Basic life and AD&D insurance

As a regular full-time employee, you automatically receive basic life and AD&D coverage in the amount of two times your annual base salary up to a maximum of \$1,000,000. The amount of coverage will be reduced to 65% of the coverage amount at age 65, and to 25% at age 80. NOV pays the full cost of this coverage. No Statement of Health is required.

### Voluntary life and AD&D insurance

In addition to basic life and AD&D, regular full-time employees may buy additional life and AD&D coverage at discounted rates. The chart describes the amounts of coverage you can buy for yourself, your spouse, and your child(ren).

### **Choosing a beneficiary**

You may choose anyone to be the beneficiary of your life and AD&D insurance in the event of your death. Review your beneficiary designation periodically to ensure it reflects your current wishes. You may change your beneficiary any time by going to "Enroll now" at **usbenefits.nov.com**.

	Voluntary life insurance			
Benefit features	Employee	Spouse	<b>Dependent child(ren)</b> (up to age 26)	
Coverage options	Increments of \$10,000, up to 5x your annual base salary	Increments of \$10,000, up to 100% of employee amount	\$10,000 per child	
Maximum	\$1,500,000 or 5x your annual base salary, whichever is less	\$250,000 (cannot exceed employee's combined basic and voluntary life coverage)	\$10,000 per child	
Guarantee issue (if purchased when first eligible)	\$1,000,000	\$100,000	\$10,000 per child	
Statement of Health (SOH) approval by MetLife	Required if you don't enroll when initially eligible or if the coverage amount requested exceeds \$1,000,000	Required if you don't enroll when initially eligible or if the coverage amount requested exceeds \$100,000	N/A	

	Voluntary AD&D insurance			
Benefit features	Employee	Spouse	<b>Dependent child(ren)</b> (up to age 26)	
Coverage options	Increments of \$10,000 up to 10x your annual base salary	Up to 60% of employee coverage amount	Up to 20% of employee coverage amount	
Maximum	\$600,000 or 10x your annual base salary, whichever is less	\$300,000	\$75,000	

Life and AD&D insurance continued...







## Life and AD&D insurance continued

## Cost for voluntary life

The cost of voluntary life insurance for you and your spouse depends on age and coverage amount. When you or your spouse reach a new age band, life insurance premiums will increase on the next paycheck. For voluntary AD&D rates, visit **usbenefits.nov.com** as rates vary.

Voluntary life insurance			
	Employee Spouse		
Age	Monthly cost per \$1,000	Monthly cost per \$1,000	
<25	\$0.055	\$0.05	
25-29	\$0.066	\$0.06	
30-34	\$0.088	\$0.08	
35-39	\$0.099	\$0.09	
40-44	\$0.143	\$0.13	
45-49	\$0.231	\$0.21	
50-54	\$0.407	\$0.37	
55-59	\$0.704	\$0.64	
60-64	\$0.957	\$0.87	
65-69	\$1.551	\$1.41	
70 and over	\$2.266	\$2.06	
Child life	\$1.06 per month (no matter the number of children designated)		

### How much voluntary life insurance should I buy?

When deciding how much voluntary life insurance to buy, consider the following:

- 1. How much will your dependents need to pay debts, such as a mortgage, car loans, or credit card balances?
- 2. How much do your dependents need to maintain their current standard of living?
- 3. What kind of future would you like to provide for your dependents or others who depend on you for financial support?





### Health questionnaire: Evidence of Insurability

If you do **not** enroll in voluntary life when you are first eligible, you will have to

**Benefits** 









## Disability coverage

If you experience an injury or illness that prevents you from working, disability coverage provides partial income replacement to assist you financially.

### Short-term disability (STD)

As a regular full-time employee, short-term disability coverage, through Unum, provides you with a portion of income replacement if you are unable to work due to a non-occupational illness or injury. You are automatically enrolled in STD at no cost to you.

Once you are approved for disability by Unum, the following will apply:

Weekly short-term disability benefits			
Elimination period Percent of earnings paid Weekly maximum paid Maximum duration			
14 days	66 2/3%	\$8,150	24 weeks

NOV coordinates with Workers Compensation and states that offer short-term disability insurance. Contact Unum for detailed information on how this process works.

### **Pre-existing conditions**

You are considered to have a pre-existing condition if:

- You received medical treatment, consultation, care, or services including diagnostic measures, or took prescribed drugs or medicines in the three months just prior to your effective date of coverage; and
- The disability begins in the first 12 months after your effective date of coverage.

For additional details, access the SPD on the U.S. Benefits website at usbenefits.nov.com.







## Disability coverage continued

#### Basic long-term disability (LTD) & buy up LTD

As a regular, full-time employee, LTD pays you a portion of your earnings if you are disabled for 180 days due to an illness or injury.

You will continue to receive benefits as long as you meet the definition of disability in the policy or reach your Social Security Normal Retirement Age. Benefits are reduced by other sources of disability income you may qualify for such as Social Security and Workers' Compensation. You are automatically enrolled in basic LTD at no cost to you.

NOV offers a buy up option for LTD coverage that will increase your monthly benefit if you were to need long-term disability. If you don't enroll within 31 days of becoming eligible, approval by Unum will be required before coverage is effective. To determine the cost of buy up LTD, go to usbenefits.nov.com.

Monthly long-term disability benefits				
Plan options	Elimination period	Percent of earnings paid	Monthly maximum paid	Maximum duration
Basic LTD	180 days	50%	\$4,000	Up to Social Security Normal Retirement Age
Buy up LTD (increases monthly base benefit to these amounts)	180 days	66 2/3%	\$15,000	Up to Social Security Normal Retirement Age



### **Evidence of Insurability (EOI)**

amount will not include the requested amount, nor will you pay premiums on that amount, until it is approved by Unum.







## Voluntary benefit plans

Voluntary benefits complement your existing benefits and help protect you financially from unexpected events—both in the short term and long term. You are responsible for the cost of this benefit and may obtain coverage for yourself, your spouse, and your children. Coverage is individually owned, so you can take your policy with you if you leave NOV. If you have any questions about these benefits, please contact MetLife at 1-800-GET-MET8 (1-800-438-6388) or visit metlife.com/nov.

### Hospital indemnity insurance

Hospital indemnity insurance can provide you with a flat dollar amount if you are admitted to a hospital and a per day amount is paid for each day of a covered hospital stay. This helps you cover your costs and focus on recovery.

**Guaranteed acceptance** 

**Competitive group rates** 

Premiums paid through payroll deductions

#### Accident insurance

Accident Insurance provides you with a lump-sum payment for a covered event for use on whatever you choose, such as costs that your plan doesn't cover. The payment is made directly to you, regardless of any other insurance you may have.

**Guaranteed acceptance** 

No medical exam needed

Premiums paid through payroll deductions

#### Critical illness insurance

Critical Illness Insurance provides you with a lump-sum payment when there is a verified diagnosis of a covered condition. The payment is made directly to you, and is paid regardless of any other insurance you may have. You may spend it however you need, including for your or your family's everyday living expenses.

**Guaranteed acceptance** 

No medical exam needed

Premiums paid through payroll deductions







## Voluntary benefit plans continued

#### Pet insurance

No matter what unpredictable antics your furry family member gets into, your family isn't complete without them. With MetLife Pet Insurance, you can feel confident that their health and your wallet are protected if you're faced with an unexpected trip to the vet.

Flexible coverage with up to 100% reimbursement

Freedom to visit any U.S. licensed vet

24/7 access to telehealth services

### Identity theft insurance - powered by Aura

We're doing more online than ever before—making us more vulnerable to fraud and online threats. MetLife Identity & Fraud Protection helps safeguard the things that matter to you most: your identity, money and assets, family, reputation, and privacy.

**Identity theft protection** 

**Financial fraud protection** 

**Privacy and device protection** 



**Benefits** 

## **Questions?**

Call **1-800-GET-MET8** (1-800-438-6388)







### Other Benefits

## 401(k) retirement savings plan

Being retirement ready is an important part of financial wellness. The key to success is to start saving now. NOV Inc. 401(k) Plan, administered by Principal, offers you the option to save a portion of your eligible pay for retirement.



# Eligibility & enrollment

Full-time and part-time employees are eligible to participate in the 401(k) plan on your first day of employment. You may enroll in or make changes any time at **principal.com**. Make sure you review your retirement goals periodically to ensure your contribution matches your target retirement income.

# Automatic enrollment

Employees who do not waive participation or make an election in the first 60 days of employment will be automatically enrolled to contribute 5% of their pay. If you do not wish to participate, a refund of contributions deducted through auto-enrollment may be requested within 90 days of the first deduction.

# NOV matching contribution

NOV will match every dollar you invest in the 401(k) plan, up to a maximum of 5% of your base pay and overtime each pay period. This matching contribution applies to all your contributions, up to a combined 5% limit

# Loans & withdrawals

For information on taking a loan, in-service withdrawal, or hardship withdrawal from your 401(k), log on to your account at **principal.com** or contact the Principal Contact Center at **1-800-547-7754**.

# Employee contributions

Your contributions may be pre-tax, regular after-tax, Roth 401(k) after-tax, or a combination of these up to annual IRS maximums. Contributions are based on base pay plus overtime.

If you are age 50 or older, you are entitled to make an additional "catch-up contribution."

### 401(k) fast facts

- NOV matches 100% of your contribution up to 5%!
- You are eligible to participate in the 401(k) plan on your date of hire.
- If you are age 50 or older, you can make "catch-up" contributions.
- Eligible pay is base salary and overtime pay.

### **Collective bargaining agreement**

Employees covered by a collective bargaining agreement may or may not be covered under the benefits and provisions contained in this section. Employees subject to a collective bargaining agreement should look to their respective agreements for the benefits to which they have bargained.







## Retiree medical coverage

NOV offers employees the ability to retire voluntarily while continuing to participate in an NOV medical plan at retirees rates. In order to be eligible, you must satisfy all of the following:

- 1. Have completed at least 10 years of service based on the adjusted service date in Hub
- 2. Have completed 5 consecutive years of employment prior to retirement

The coverage provided will also allow the retiree's enrolled dependents to remain on the medical plan as long as the retiree and the dependents remain eligible.

For more information, including the plan description, frequently asked questions and rates, visit the Retiree medical section at **usbenefits.nov.com**.

## Additional company-provided benefits

#### Business travel accident insurance

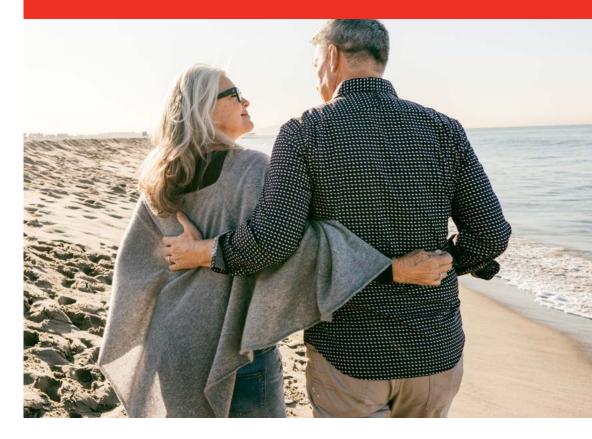
All regular full-time employees have business travel accident insurance coverage. The benefit payable is up to \$250,000 for accidental death or dismemberment claims that occur while an employee is traveling on company business.

#### International SOS

For your support and protection, NOV has contracted with International SOS to provide medical, security, and travel assistance to employees traveling on NOV business. International SOS benefits are not available to employees on vacation. To learn more about these services, visit myportal.internationalsos.com. You must register using your NOV email and create a password.

### Collective bargaining agreement

coverage unless it is bargained for in their respective collective bargaining agreement.







## Vacation & holidays

NOV provides paid time off of work, so you can focus on relaxing and celebrating holidays with family and friends.

#### Vacation

Regular full-time employees earn paid vacation time each pay period based on years of service:

Years of service	Annual entitlement for regular, full-time employees	
0 to 4	120 hours (15 days)	
5 to 9	144 hours (18 days)	
10 to 14	160 hours (20 days)	
15 to 19	184 hours (23 days)	
20 to 24	200 hours (25 days)	
25 to 30	224 hours (28 days)	
30+	240 hours (30 days)	

Regular part-time employees will receive half the annual entitlement and accrue at half the rate of regular full-time employees.

See the U.S. Vacation Policy for more details, including steps to have applicable pre-NOV experience included as Years of Service for vacation accrual purposes.

### Holidays

NOV observes the following paid holidays.

Holiday	2024 observed date	
Flexible Holidays	2 days at employee's request*	
New Year's Day	Monday, January 1	
Memorial Day	Monday, May 27	
Independence Day	Thursday, July 4	
Labor Day	Monday, September 2	
Thanksgiving Day	Thursday, November 28	
Day after Thanksgiving	Friday, November 29	
Christmas Eve	Tuesday, December 24	
Christmas Day	Wednesday, December 25	
New Year's Eve	Tuesday, December 31	

<sup>\*</sup>Check with your manager to request your flexible holidays. Employees hired after July 1st will receive 1 day as a flexible holiday for that calendar year.

## Collective bargaining agreement

Employees subject to a collective bargaining agreement should refer to their respective agreements for the benefits to which they have bargained.

#### FYI

Facilities that are closed for maintenance should check with their local HR representative for their holiday schedule.







## Your benefit contacts

### NOV Employee Benefit Plans

U.S. Benefits website: usbenefits.nov.com

### Benefits Enrollment System

Click the "Enroll now" button on **usbenefits.nov.com** 

#### **NOV Benefits Service Center**

1-877-668-2363

Monday - Friday: 7:30am - 6pm CST



## **Live Chat Option**

This guide provides an overview of the benefits program. It is not intended to be a complete description of the benefits or official summary plan descriptions. If there is a conflict between this guide and the official plan documents, the plan documents will govern. NOV reserves the right to modify or terminate any of the described benefits at any time and for any reason. The descriptions of these benefits are not a guarantee of current or future employment or benefits. For information about the specific plans available to you, contact the NOV Benefits Service Center. Employees subject to a collective bargaining agreement may or may not be covered under the benefits contained in this guide and should look to their respective agreements for the benefits to which they have bargained.

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Vendor (benefit plan)	Phone	Website
Blue Cross Blue Shield (Medical)	1-855-212-1613	bcbstx.com
CVS Caremark (Prescription drugs)	1-855-310-2475	caremark.com
Virtual Visits Powered by MDLIVE (Telehealth)	1-888-681-4083	mdlive.com
Airrosti (Muscle and joint pain treatment)	1-800-404-6050	airrosti.com
Virta Health (Diabetes management and weight loss)		virtahealth.com/join/nov
Bloom (Women's pelvic health)		join.hibloom.com/nov
Sword (Virtual physical therapy)	1-888-492-1860	join.swordhealth.com/NOV
Cigna (Dental)	1-800-244-6224	cigna.com
VSP (Vision)	1-800-877-7195	vsp.com
HSA Bank (Health savings account)	1-855-731-5220	hsabank.com
WEX (Flexible spending accounts)	1-866-451-3399	wexinc.com
MetLife (Life and AD&D)	1-866-492-6983	metlife.com/mybenefits
<b>Unum</b> (Leave of absence, short and long-term disability)	1-866-779-1054	unum.com
MetLife (Voluntary benefits)	1-800-438-6388	mybenefits.metlife.com
SupportLinc (Employee assistance program)	1-888-881-5462	global.supportlinc.com
Principal (401(k) plan)	1-800-547-7754	principal.com





