# 2024 Benefits Guide

Full-Time Employees



#### Tesla Full-Time Employee Benefits Guide

**Note:** Full-time Seasonal and Puerto Rico employees should refer to the Full-Time Seasonal or Puerto Rico Benefits Guide.

# TheTeslaLife

At Tesla, we put you in position to power your health and wellbeing. Our benefits package is designed to deliver top-tier plan options with exceptional quality and choice. No matter what stage of life you are in, we have a diverse suite of benefits to meet your needs. Our benefits go beyond health care, extending to the support of your total wellbeing, the people in your life and the goals you want to achieve. The details about your options are included in this guide. If you have any questions, you can visit **ts.la/theteslalife** for more information and resources.

We are glad you are part of our team and are proud to support your overall health and wellbeing.

### The Tesla Life and Virtual Benefits Fair

As you consider what your needs are today, visit **ts.la/theteslalife** or the Virtual Benefits Fair via **ts.la/benefitsfair**. Here you can access the virtual booths, explore your options and view important plan resources.



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Medical (Aetna and Kaiser)

Medical (HMSA and Kaiser Plus Hawaii)

Denta

Vision

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Other Health Benefits

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**Note:** Full-time Seasonal and Puerto Rico employees should refer to the Full-Time Seasonal or Puerto Rico Benefits Guide.

#### **Questions?**

Check out **ts.la/theteslalife** for more information and resources.

#### Consider a Base Plan

If you are currently enrolled in the Plus plan, consider if the PPO Base plan might be more cost-effective for you. We ran the numbers and for most employees, they add up to one thing — the PPO Base plan offers high-quality coverage and huge savings since you have no paycheck deductions.

#### **Check Your Beneficiaries**

Review your beneficiary information to ensure it is accurate and up to date. It is important to do this for all of your benefits, including your 401(k), stock, HSA, life and accidental death & dismemberment (AD&D) insurance.

# **Your Health**

### **Benefits to Support Your Health**

Tesla offers great medical, dental and vision plan options, some with \$0 paycheck deductions. All health care plans are selected to support your total wellbeing.

Medical: PPO Base, PPO Plus and HSA options are available through Aetna. The medical PPO Base and HSA plan options have a \$0 paycheck deduction for you and your eligible family members. The Aetna PPO Plus and Kaiser Plus plan options are available for a paycheck deduction. (The Kaiser Plus plan is available to employees in California, Colorado, Georgia, and Hawaii.) If you live in Hawaii, you are also offered a medical plan through the Hawaii Medical Service Association (HMSA). Employees in Puerto Rico should review the Puerto Rico Benefits Guide for medical coverage details.

- Dental: Base and Plus options are available for dental coverage through Delta Dental. The Base option has \$0 paycheck deduction for you and your eligible family members.
- Vision: Base and Plus options are available for vision coverage through
   Vision Service Plan (VSP). The Base option has a \$0 paycheck deduction
   for you and your eligible family members.

Click below to review your medical, dental and vision plan options.

Remember, you will receive a discounted rate when you use **in-network** providers, which means lower out-of-pocket costs for you.







Medical Plan Chart Dental Plan Chart

Vision Plan Chart

#### Consider a Medical Plan With a Health Savings Account (HSA)

When you select an HSA plan, you can pay for eligible medical, dental and vision expenses on a pre-tax basis. Even better, Tesla also contributes to your HSA to help your balance grow even faster. You can use HSA funds to pay for current expenses or save them for future expenses all the way into retirement. Unlike FSAs, remaining funds roll over at the end of each year. Your entire balance including Tesla's contributions, are yours to keep — even if you change medical plans, leave the company or retire. (Remember, however, that HSA plans have a high deductible that must be met before the plan begins to pay.)

Get the details.

# Consider a Health Care or Dependent Care Flexible Spending Account (FSA)

If you do not choose an HSA plan, you are eligible to enroll in a Health Care FSA. Similar to an HSA, you can pay for eligible out-of-pocket medical, dental or vision expenses using pre-tax dollars. You can also pay for eligible dependent care expenses using pre-tax dollars through a Dependent Care FSA. **Get the details.** 

Per IRS regulations, FSAs are "use-it-or-lose-it" plans. Any remaining funds in your account at the end of the plan year will be forfeited.

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# **Questions About Terminology?**

Please see **Definitions and Terms**.

Note: The deductible is the amount of money you are responsible for paying before your insurance starts to pay a portion of your bills. Deductibles are an annual amount, which means they reset each calendar year.

#### **Aetna Network**

Employees enrolled in an Aetna medical plan will use the Aetna Choice\*
POS II (Open Access) network. Employees who reside in Utah use the
Utah Connected Network - Aetna Choice POS II (Open Access) network,
which includes the Intermountain Healthcare (IHC) network. You will
have access to the same network of providers no matter what Aetna
plan you choose.



# **In-Network Medical Options & Coverage**

Aetna (all locations, except Hawaii and Puerto Rico)				Kaiser	
	HSA	PPO Base*	PPO Plus*	Kaiser HSA (California)	Kaiser Plus* (California, Colorado and Georgia)
Cost (per bi-weekly paycheck)	\$0	\$0	Employee-Only: \$40 Employee + Spouse/Partner: \$120 Employee + Child(ren): \$80 Employee + Family: \$160	\$0	Employee-Only: \$40 Employee + Spouse/Partner: \$120 Employee + Child(ren): \$80 Employee + Family: \$160
Deductible (Individual / Family)**	\$1,750 / \$3,500	\$750 / \$1,500	\$200 / \$400	\$1,750 / \$3,500	None
Out-of-Pocket Maximum (Individual / Family)**	\$3,250 / \$6,500	\$2,000 / \$4,000	\$2,000 / \$4,000	\$3,250 / \$6,500	\$2,000 / \$4,000
HSA Funding*** (Individual / Family)	\$750 / \$1,500	N/A	N/A	\$750 / \$1,500	N/A

#### What You Pay for Care

Coinsurance	20%	20%	20%	20%	N/A
Preventive Visits	\$0	\$0	\$0	\$0	\$0
Primary Care / Specialist	20% after deductible	\$25 copay / \$40 copay	\$20 copay / \$35 copay	20% after deductible	\$20 copay / \$35 copay
Virtual Visits	\$0	\$0	\$0	\$0	\$0
Emergency Room	20% after deductible	\$150 copay	\$150 copay	20% after deductible	\$150 copay (waived if admitted)
Urgent Care	20% after deductible	\$35 copay	\$35 copay	20% after deductible	\$20 copay
Inpatient Hospital (per admission)	20% after deductible	\$500 copay	\$250 copay	20% after deductible	\$250 copay

- \* Copays do not apply to the deductible, but most do apply to the out-of-pocket maximum.
- \*\* Most of Tesla's medical plans feature embedded family deductibles and out-of-pocket maximums, which means each covered individual is only responsible for their own portion of the family deductible or out-of-pocket maximum. However, the Aetna HSA plan features a true family deductible and out-of-pocket maximum, which means the full family amounts must be reached before the plan begins to pay benefits or fully cover care. See <u>Definitions and Terms</u> for more details.
- \*\*\* Tesla's HSA employer contribution is prorated based on hire date. Tesla contributes to your HSA on a per-paycheck basis.

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# **Questions About Terminology?**

Please see **Definitions and Terms** 

Note: The deductible is the amount of money you are responsible for paying before your insurance starts to pay a portion of your bills. Deductibles are an annual amount, which means they reset each calendar year.

# Where Can You Fill Your Prescription?

Aetna member prescriptions are administered through CVS Caremark. However, you are not required to use a CVS retail pharmacy. You can continue to use any in-network pharmacy, including Target, Wal-Mart, Costco and more.

Kaiser members fill all prescriptions through Kaiser pharmacies.



# **In-Network Prescription Drugs Coverage**

	Aetna/CVS Caremark (all locations, except Hawaii and Puerto Rico)				Kaiser	
	HSA	PPO Base	PPO Plus	Kaiser HSA (California)	Kaiser Plus (California, Colorado and Georgia)	
Retail Prescription Drugs (Note: Aetna plans use CVS Caremark)*						
Generic	20% after deductible, up to \$25 copay	\$15 copay	\$10 copay	20% after deductible, up to \$25 copay	\$10 copay	
Preferred Brand	20% after deductible, up to \$50 copay	\$45 copay	\$30 copay	20% after deductible, up to \$50 copay	\$30 copay	
Non-Preferred Brand	20% after deductible, up to \$100 copay	\$90 copay	\$60 copay	20% after deductible, up to \$50 copay	\$30 copay	

#### Mail-Order Prescription Drugs (Note: Aetna plans use CVS Caremark)\*

	Aetna/CVS Caremark mail-order supply limit: up to 90 days		Kaiser mail-order supply limit: up to 100 days		
Generic	20% after deductible, up to \$50 copay	\$30 copay	\$20 copay	20% after deductible, up to \$25 copay	\$20 copay
Preferred Brand	20% after deductible, up to \$100 copay	\$90 copay	\$60 copay	20% after deductible, up to \$50 copay	\$60 copay
Non-Preferred Brand	20% after deductible, up to \$200 copay	\$180 copay	\$120 copay	20% after deductible, up to \$50 copay	\$60 copay

<sup>\*</sup> Check your specific plan for the day supply of your medication (e.g., 31 days).

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Please see **Definitions and Terms** 

Note: The deductible is the amount of money you are responsible for paying before your insurance starts to pay a portion of your bills. Deductibles are an annual amount, which means they reset each calendar year.

# **Out-of-Network Coverage**

You will pay less if you use a provider in the plan's network. If your plan includes an out-of-network benefit and you use a non-network provider, you are responsible for any difference between the covered expense and the actual non-participating provider's charge.



# **Out-of-Network Medical and Prescription Drugs Options & Coverage**

	Aetna/CVS Caremark (all locations, except Hawaii and Puerto Rico)			Kai	ser
	HSA	PPO Base*	PPO Plus*	Kaiser HSA (California)	Kaiser Plus (California, Colorado and Georgia)
Deductible (Individual / Family)†	\$1,750 / \$3,500	\$1,500 / \$3,000	\$1,000 / \$2,000	N/A	N/A
Out-of-Pocket Maximum**† (Individual / Family)	\$6,500 / \$13,000	\$4,000 / \$8,000	\$4,000 / \$8,000	N/A	N/A

#### What You Pay for Care

Coinsurance	40%	40%	40%	N/A	N/A
Preventive Visits	40% after deductible	40% after deductible	40% after deductible	N/A	N/A
Primary Care / Specialist	40% after deductible	40% after deductible	40% after deductible	N/A	N/A
Virtual Visits	\$0 after deductible	\$0	\$0	\$0 after deductible	\$0
Emergency Room	20% after deductible	\$150 copay	\$150 copay	20% after deductible	\$150 copay (waived if admitted)
Urgent Care	40% after deductible	40% after deductible	40% after deductible	20% after deductible	N/A
Inpatient Hospital (per admission); prior authorization required or coinsurance reduced to 50%	40% after deductible	40% after deductible	40% after deductible	N/A	N/A

# Retail Prescription Drugs (CVS Caremark)

Generic	40% after deductible	\$15 copay	\$10 copay	N/A	N/A
Preferred Brand	40% after deductible	\$45 copay	\$30 copay	N/A	N/A
Non-Preferred Brand	40% after deductible	\$90 copay	\$60 copay	N/A	N/A

<sup>\*</sup> Copays do not apply to the deductible, but most do apply to the out-of-pocket maximum.

<sup>\*\*</sup> In-network and out-of-network deductibles and out-of-pocket maximums cross accumulate.

<sup>&</sup>lt;sup>†</sup> Most of Tesla's medical plans feature embedded family deductibles and out-of-pocket maximums, which means each covered individual is only responsible for their own portion of the family deductible or out-of-pocket maximum. However, the Aetna HSA plan features a true family deductible and out-of-pocket maximum, which means the full family amounts must be reached before the plan begins to pay benefits or fully cover care. See <u>Definitions and Terms</u> for more details.

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# **Questions About Terminology?**

Please see **Definitions and Terms**.

Note: The deductible is the amount of money you are responsible for paying before your insurance starts to pay a portion of your bills. Deductibles are an annual amount, which means they reset each calendar year.



# In- and Out-of-Network Medical and Prescription Drugs Options & Coverage

Hawaii only	Hawaii Medical Serv	Hawaii Medical Services Association (HMSA)**		Kaiser Plus Hawaii**		
	In-Network	Out-of-Network	In-Network	Out-of-Network		
Cost (per bi-weekly paycheck)	\$0	\$0	\$0	\$0		
Deductible (Individual / Family)	\$0	\$100 / \$300	\$0	N/A		
Medical Out-of-Pocket Maximum (Individual / Family)	\$2,500 / \$7,500	\$2,500 / \$7,500	\$2,500 / \$7,500	N/A		
Rx Out-of-Pocket Maximum (Individual / Family)	\$3,600 / \$4,200	\$3,600 / \$4,200	N/A	N/A		
What You Pay for Care						
Coinsurance	20%	30%	20%	N/A		
Preventive Visits	\$0	30%	\$0	N/A		
Primary Care / Specialist	\$12 copay	30% after deductible	\$15 copay	N/A		
Virtual Visits*	\$0	N/A	\$0	N/A		
Emergency Room	20%	20% (deductible waived)	20%	20%		
Urgent Care	\$12 copay	30% after deductible	\$15 copay (20% for out of area)	N/A		
Inpatient Hospital (per admission)	10%	30% after deductible	20%	N/A		

Retail Prescription Drugs					
Generic	\$7 copay	\$7 copay + 20% (deductible waived)	\$10 copay	N/A	
Preferred Brand	\$30 copay	\$30 copay + 20% (deductible waived)	\$45 copay	N/A	
Non-Preferred Brand	\$30 copay	\$30 copay + 20% (deductible waived)	\$45 copay	N/A	
Mail-Order Prescription Drugs					
Generic	\$11 copay	N/A	\$20 copay	N/A	
Preferred Brand	\$65 copay	N/A	\$90 copay	N/A	
Non-Preferred Brand	\$65 copay	N/A	\$90 copay	N/A	

<sup>\*</sup> Cost share for HMSA Online Care

<sup>\*\*</sup> Copays do not apply to the deductible, but most do apply to the out-of-pocket maximum.

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# **Questions About Terminology?**

Please see **Definitions and Terms**.

Note: The deductible is what you pay out of pocket before your insurance starts paying its share of your costs. The calendar year maximum is the most the insurance company will pay in a year for dental costs. The orthodontia lifetime maximum is the total amount the insurance company will pay per eligible person. The dental lifetime maximum is separate from the orthodontia lifetime maximum.



	Delta Dental			
	Base	Plus		
Cost (per bi-weekly paycheck)	\$0	Employee-Only: \$5 • Employee + Spouse/Partner: \$11 Employee + Child(ren): \$12 • Employee + Family: \$18		
Deductible (Individual / Family*)	\$100 / \$300	\$0		
Calendar Year Maximum (excludes orthodontia)	\$1,000 per person	\$2,500 per person		
Service				
Preventive and Diagnostic	\$0	\$0		
Basic Restorative Care	20% after deductible	20%		
Major Restorative Care	30% after deductible	30%		
Orthodontia (children and adults)	50%; \$1,000 lifetime maximum (deductible waived)	50%; \$2,500 lifetime maximum		



	Delta Dental			
	Base	Plus		
Deductible (Individual / Family)	\$100 / \$300	\$0		
Calendar Year Maximum (excludes orthodontia)	\$1,000 per person	\$2,500 per person		
Service				
Preventive and Diagnostic	10% (deductible waived)	10%		
Basic Restorative Care	30% after deductible	30%		
Major Restorative Care	50% after deductible	50%		
Orthodontia (children and adults)	50%; \$1,000 lifetime maximum (deductible waived)	50%; \$2,500 lifetime maximum		

<sup>\*</sup> The deductible is combined for in-network and out-of-network.

<sup>\*\*</sup>Out-of-network dentists may bill you the difference between their usual fee and Delta Dental's maximum contract allowance.

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Please see **Definitions and Terms**.



# In-Network Vision Options & Coverage

	Vision Service Plan (VSP)		
	Base	Plus	
Cost (per bi-weekly paycheck)	\$0	Employee-Only: \$2.50 • Employee + Spouse/Partner: \$6.25 Employee + Child(ren): \$5.00 • Employee + Family: \$8.75	
Well Vision Exam (per calendar year)	\$25 copay	\$10 copay	
Frames* (per calendar year)	\$25 copay; \$100 allowance	\$10 copay; \$200 allowance	
Standard Progressive Lenses	\$0	\$0	
Premium and Custom Progressive Lenses	\$0-\$175 copay	\$15-\$25 copay	
High Index Lenses	Not covered	\$0	
Contact Lenses* (per calendar year)	\$25 copay; \$100 allowance	\$10 copay; \$200 allowance	



# Out-of-Network Vision Options & Coverage\*\*

	Vision Service Plan (VSP)	
	Base	Plus
Well Vision Exam (per calendar year)	Up to \$45 allowance	Up to \$45 allowance
Frames (per calendar year)	Up to \$70 allowance	Up to \$70 allowance
Standard Progressive Lenses	Up to \$45 allowance	Up to \$45 allowance
Elective Contact Lenses	Up to \$70 allowance	Up to \$70 allowance

<sup>\*</sup> Members in the Base plan get an allowance for contact lenses or one pair of frames (not both). Members in the Plus plan have an allowance for contact lenses and an allowance for one pair of frames, in the same calendar year. These allowances are separate and cannot be combined.

<sup>\*\*</sup> Out-of-network allowances are subject to applicable copays.

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#### **Consider Urgent Care or Virtual Visits**

The emergency room isn't always the best choice for care. Using virtual visits or urgent care can save you time and money. See the chart to the right for more information..

# Make the Most of Your Health Benefits All Year Long

#### Get Personalized Help with Your Medical Benefits

All of our medical plans have teams to help you navigate the health care system. For Aetna plans, you can call the Health Care Advocate. For Kaiser plans, you can call Member Services. See the contact information below.

	Health Care Advocate (Aetna) 833.514.1394	Member Services (Kaiser) CA: 800.464.4000 CO: 800.632.9700 GA: 888.865.5813 HI: 800.966.5955
Understand your health benefits, options for care and better manage health care and prescription costs	✓	✓
Get support from advisors who can help locate doctors and schedule appointments, explain medical bills or claims and help to resolve billing issues	✓	✓
Contact an expert for any health-related questions	✓	✓

These free, personalized and confidential services are available to you and your family members. Think of them as your "go-to" resource for health information and support.

#### Know Where to Go When You Need Care

Your Tesla benefits are designed to be used. If you have a minor medical issue and your first instinct is to head to the emergency room, consider trying something new — it could save you time and money.

# Get More Value from Your Prescription Benefits

#### Generic Versus Brand-Name Drugs

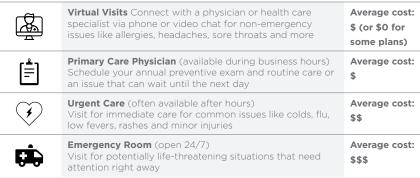
Generic drugs cost less than brand-name drugs and meet the same FDA requirements for effectiveness, quality and safety. You can save

money if your prescription is a generic drug. Check with your doctor to learn if a generic alternative is right for you.

CVS Caremark, HMSA or Kaiser's formulary list may change throughout the year, so be sure to check with them if you have questions or concerns.

#### Save Time and Money Using Prescription Mail-Order Services

The mail-order service can be used for maintenance medications you take on a regular basis. Using this service can help you save money, and you have the added convenience for many maintenance medications being delivered directly to your home. Plus, you will receive 90-100 days' worth of your prescription at a time (at the cost of 2 copays instead of 3), so you never have to worry about going to the pharmacy each month or running out of your medication. Contact your prescription drug provider to learn more and sign up. You can find your provider's contact information on the back of your member ID card.



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#### Other Health Benefits



# Mental Health Assistance Program — Lyra Confidential Counseling

Lyra provides confidential therapy when you need it, at no cost to you. Whether you are feeling stressed, anxious, depressed or are dealing with any number of life's emotional challenges, Lyra can guide you through it.

- Find personalized recommendations for top therapists just for you
- Meet with a therapist in-person, via live video or tap into self-care apps on-the-go
- Schedule appointments online at <u>tesla.lyrahealth.com</u> or by phone at **855.238.5972**
- Pay nothing up to 25 sessions are covered for you and your eligible dependents

Learn how to communicate better, improve your relationships and build your skill set for taking on life at tesla.lyrahealth.com.



# Lyra Work-Life

Tesla provides legal consultations and financial planning services in partnership with Lyra to you and your family members.

To learn more about these services, call Lyra at 844.700.8039 or visit tesla.lyrahealth.com/worklife.



# LGBTQ+ Care Concierge Service — Included Health

Included Health is a comprehensive care navigation platform for the LGBTQ+ community specializing in connecting individuals and their loved ones with quality, affirming care. This dedicated care concierge service can:

- Provide a care coordinator who can support you with provider, insurance, and support-related questions
- Help you navigate gender affirming surgery and related authorizations
- Offer support and resources toward coming out at work and managing legal name changes
- Connect you to a community of LGBTQ+ individuals and loved ones for additional support, and even provide resources for parenting a queer or trans kid

Included Health is available to all employees. Visit https://includedhealth.com/tesla/ to learn more.

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#### Other Health Benefits (cont.)



# Hinge Health

Hinge Health, available to Aetna medical plan members, delivers quality virtual physical therapy appointments with a licensed physical therapist to conquer chronic pain at home. After completing a quick evaluation to make sure it is a good fit, Hinge Health equips you with wearable sensors and connects you with a provider who will monitor your progress. Together, they help decrease your pain through self-guided exercise therapy sessions at your own pace.

Visit hingehealth.com/tesla or call 855.902.2777 to learn more.



# **Aetna Tobacco Cessation Program**

If you are enrolled in an Aetna medical plan, you have access to Quit For Life. Quit For Life is a free program that helps you and your eligible family members stop using tobacco products. The program includes a personalized plan, access to a tobacco cessation coach, nicotine replacement therapy and ongoing support from an online community of peers.

Call 866.QUIT4LIFE (866.784.8454) or visit quitnow.net to join countless others who have stopped using tobacco.



# **Kaiser Tobacco Cessation Program**

Employees enrolled in a Kaiser medical plan can get the support they need to quit using tobacco products with help from Kaiser. Visit **kp.org/quitsmoking** or call Kaiser Member Services for more information:

- Kaiser CA: 800.464.4000
- Kaiser CO: 800.632.9700
- Kaiser GA: 888.865.5813
- Kaiser HI: 800.966.5955



# **Aetna Real Appeal Weight Loss Program**

If you are enrolled in an Aetna medical plan, you have access to Real Appeal. Real Appeal connects you and your family members with a Transformation Coach, helps you track your activities and progress and gives you access to useful recipes and workouts. This online weight loss program is available at no additional cost. Learn more and sign up on ts.la/theteslalife.



# Kaiser Permanente Balance Weight Loss Program

Balance is designed to help you get to a healthier weight with a personalized action plan. This online resource has videos, goal-tracking tools and recipes to support you and your family in building new healthy habits by balancing nutrition and exercise to create a better foundation of wellness. Learn more on the **Kaiser Permanente website**.

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#### **Voluntary Benefits**

Voluntary benefits supplement your health insurance by paying a lump sum if you or a covered eligible family member have an accident, are hospitalized or become critically ill. You can use the funds for anything — medical expenses, hotel bills, groceries and more. Tesla provides three types of voluntary benefits — accident, hospital indemnity and critical illness insurance. For complete coverage details, including exclusions and limitations, go to <u>ts.la/theteslalife</u> or call 833.543.1900.

#### **Accident Insurance**

Even with medical coverage, accidents can be very expensive. Voluntary accident insurance through Aetna pays you in the event that you or a family member covered under the plan is in an accident, such as a sporting injury or a household accident. Keep in mind that voluntary accident insurance is not a replacement for medical coverage.

Your cost is automatically deducted from your paycheck when you enroll online at ts.la/theteslalife. The bi-weekly cost is based on your coverage level:

- Employee-Only: \$3.08

- Employee + Spouse/Partner: \$5.62

- Employee + Child(ren): \$6.52

- Employee + Family: \$9.05

# **Hospital Indemnity Insurance**

When you or a family member is in the hospital, the last thing you want to worry about is the bill. Hospital indemnity insurance through Aetna pays you in the event that you or a family member covered under the plan is hospitalized.

Your cost is automatically deducted from your paycheck when you enroll online at ts.la/theteslalife. The bi-weekly cost is based on your coverage level:

- Employee-Only: \$6.33

- Employee + Spouse/Partner: \$13.38

- Employee + Child(ren): \$8.10

- Employee + Family: \$15.14

#### Critical Illness Insurance

Dealing with a serious illness is hard. Critical illness insurance through Aetna pays a benefit in the event that you or a covered family member become critically ill. Covered illnesses include heart attack, stroke and kidney failure, among others. Your cost is automatically deducted from your paycheck when you enroll online at **ts.la/theteslalife**. Your bi-weekly cost is based on your coverage level, age and smoking status. You have three plan options — the Low, Medium and High plan. These plans pay up to \$10,000, \$20,000 or \$30,000, respectively.

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Health Savings Account (HSA)

HSA Contribution Limit

Health Care Flexible Spending Account (HCFSA)

Dependent Care Flexible Spending Account (DCFSA)

Note: Tesla's HSA employer contribution is prorated based on hire date.

**Note:** Full-time Seasonal and Puerto Rico employees should refer to the Full-Time Seasonal or Puerto Rico Benefits Guide.

# **Your Spending Accounts**

Tesla offers several spending accounts that give you a tax break on your eligible health care and dependent care expenses by having tax-free Health Savings Account (HSA) or Flexible Spending Account (FSA) contributions taken from your paycheck. (That is where the tax break and savings come in.)

You can use your Health Care FSA or HSA debit card to pay for your eligible medical, dental and vision expenses, or you can submit claims to request reimbursement for your eligible health care and dependent care expenses online via **optumbank.com** or using the Optum Bank mobile phone app.

# Health Savings Account: Tesla's Contribution to Your HSA

When you enroll in the Aetna Health Savings Account Plan or Kaiser Health Savings Account Plan, you pay nothing out of your paycheck for your medical plan premiums — plus, you get access to a Health Savings Account (HSA). An HSA is a great way to save tax-free\* money for current and future health care expenses. Tesla will contribute to your HSA account to help offset your deductible, up to \$1,500, depending if you cover any dependents. You can also contribute up to \$4,150 (individual) or \$8,300 (family) per year of your own funds to add to your account.

- In most states, HSA contributions are tax-free.\* That means they are deducted from your paycheck before taxes are figured, which reduces the tax amount withheld from your paycheck.
- The money in your account grows tax-free,\* and it is yours to keep even if you leave Tesla or move to another country.
- You are not taxed\* when you use your HSA to pay for eligible medical, dental and vision expenses. Find a full list of qualified health care expenses at irs.gov/publications/p502/.
- Your HSA balance rolls over from year to year and never expires, even into retirement. Once you are 65, you can withdraw funds for any reason without paying a penalty, but they will be subject to ordinary income tax (with the exception of qualified medical expenses, which would remain tax-free).
- If you claim your domestic partner on your tax return and cover them under your medical plan, you may use your HSA funds to cover their eligible health care expenses.

#### What You Can Do With an HSA

You can use the money in your HSA to:

- 1. Pay for current qualified health care expenses, like your medical, dental and vision copays, coinsurance and deductible
- 2. Save for future qualified health care expenses
- 3. Invest you can choose from a variety of investment options once your balance exceeds \$2,000

<sup>\*</sup> In California and New Jersey, you can contribute to an HSA before federal taxes are withheld, but state taxes are still withheld. HSA earnings are subject to state tax in CA and New Jersey. Please consult with your tax advisor.

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Health Savings Account (HSA)

**HSA Contribution Limits** 

Health Care Flexible Spending Account (HCFSA)

Dependent Care Flexible Spending Account (DCFSA)

# Understanding FSA Deadlines: Use It or Lose It

Any amount remaining in an HCFSA account at the end of the plan year is forfeited. All the money in your HCFSA must be spent by March 15 of the following year, and claims must be submitted by April 30 of that year.

#### **Tesla's Contribution**

If you elect an eligible medical plan and open an HSA, Tesla will contribute to your account. The amount depends on your hire date and if you are covering dependents.

Coverage Level	Contribution Amount
Individual coverage	\$750
Individual + any dependent coverage	\$1,500

Tesla's HSA employer contribution is prorated based on hire date. For example, if you are hired in June, you will receive half of the annual employer contribution because you are only working for Tesla half of the year.

#### **HSA Contribution Limits**

The IRS determines how much you can contribute to your HSA each year. In 2024, contribution limits are as follows:

- **\$4,150** for individual coverage
- **\$8,300** for family coverage

These amounts include Tesla's contribution to your HSA. If you are 55 or older, you can contribute an additional \$1,000 each a year as a "catch-up" contribution.

# Health Care Flexible Spending Account (HCFSA)

The HCFSA allows you to:

- Pay for certain medical, dental and vision expenses that are not covered by your health care plan (such as copays, coinsurance, non-cosmetic dental expenses, most prescription drugs and eyeglasses)
- Contribute up to \$3,050 in 2024 through tax-free payroll deductions the minimum 2024 annual contribution is \$100

Note: IRS rules require that FSAs are "use-it" plans. If you do not spend the funds within the plan year, you will lose them. If electing, you may want to be conservative if you do not anticipate any qualified expenses. You are not eligible to enroll in the HCFSA if you are enrolled in a medical plan that has a Health Savings Account (HSA).

Find a full list of eligible health care expenses at <a href="irs.gov/publications/p502/">irs.gov/publications/p502/</a>.

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# Understanding FSA Deadlines: Use It or Lose It

Any amount remaining in a DCFSA at the end of the plan year is forfeited. All the money in your DCFSA must be spent by March 15 of that year, and claims must be submitted by April 30 of that year.

Note: There are some limitations to using your Health Savings Account when you go on a leave of absence. Make sure to review the Leave of Absence Policy on **ts.la/theteslalife** for more information.

# Dependent Care Flexible Spending Account (DCFSA — Day Care Reimbursement)

A DCFSA might be right for you if you have a dependent child or senior in your life who needs day care. The DCFSA allows you to:

- Pay for certain preschool expenses, nursery school expenses, day care expenses, senior day care facility needs and licensed home child care (expenses related to child care must be for a child under the age of 13)
- Make tax-free payroll contributions up to \$5,000 annually if you are single or if you are married and file a joint tax return (\$2,500 annually if you are married and file separately)
- Note: There is a \$500 limit for certain highly compensated employees

Keep in mind that DCFSA funds can only be used to pay for a qualified dependent's day care expenses — they cannot be used to pay for health care expenses. IRS rules require that DCFSAs are "use-it-or-lose-it" plans. If you do not spend the dependent care funds within the plan year, you will lose them. For example, if you do not have children or day care expenses, you will not have any qualified DCFSA costs and may not want to enroll in this plan.

Find a full list of eligible dependent care expenses at <u>irs.gov/publications/p503/</u>.

#### **Know the Fine Print**

The IRS has certain rules for HCFSAs and DCFSAs:

- Estimate your contributions and budget carefully. There is a "use-it-or-lose-it" rule funds left over at the end of each year will be forfeited.
- Enrollment is not automatic. You have to re-enroll each year if you want to participate in an FSA.
- You can enroll in one or both accounts, but you cannot transfer money between accounts.
- You cannot enroll in the HCFSA if you are enrolled in a medical plan that has a Health Savings Account (HSA). All employees are eligible to enroll in a DCFSA, regardless of their medical plan election.
- You can use the funds in these accounts for eligible expenses only.
- To be eligible for the DCFSA, you and your spouse must be working, looking for work or attending school on a full-time basis. This would include if you are enrolled in an HSA through your spouse/domestic partner.
- There are some limitations to using your FSA when you go on a leave of absence. Review the Leave of Absence Policy on <u>ts.la/theteslalife</u> for more information.

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**Note:** Full-time Seasonal and Puerto Rico employees should refer to the Full-Time Seasonal or Puerto Rico Benefits Guide.

# **Your Finances**

#### Save With the Tesla 401(k) Plan

Tesla offers both traditional and Roth 401(k) options to help you save for retirement. As a new hire, you must actively make a contribution election with Fidelity to participate in the Tesla 401(k) Plan. You are always in control of your contributions and can change your contribution at any time throughout the year. Even as little as 1% of your salary (the minimum contribution) can make a positive impact when you retire.

If you are new to Tesla, do not risk over contributing. Make sure to report any contributions that you made to a prior employer's 401(k) this year to <a href="mailto:payroll@tesla.com">payroll@tesla.com</a>. Failure to do so may result in tax implications.

#### Tesla 401(k) Plan Discretionary Employer Match

Tesla is committed to accelerating your retirement savings goals by boosting your contributions with an Employer Match. The match formula is 50% of the first 6% (capped at \$3,000 annually) of your eligible compensation that you contribute to the Plan. Employer matching contributions are fully vested after you have one year of service.

\*Interns and seasonal employees are not eligible for matching contributions.

#### You Choose How to Invest Your Funds

To make things easy, when you first enroll in the 401(k) Plan, you will automatically contribute to a "life cycle" fund. This type of fund is based on your date of birth and a retirement age of 65. It is actively managed by investment experts who monitor and adjust the investments mix as you approach retirement.

Tesla also provides a variety of options that allow you to control and actively manage your investments in the 401(k) Plan.

Learn more about your options and manage your 401(k) Plan account by visiting ts.la/theteslalife.

# **Employee Stock Purchase Plan (ESPP)**

Through this voluntary program, you can purchase company stock at a 15% discount off the market price at either the beginning or the end of the 6-month offering period, whichever is lower. Tesla partners with E\*TRADE Financial to help employees manage their Tesla stock purchases.

Offering periods begin March 1 and September 1, and purchases are made on the last day of each offering period. Shares are purchased using after-tax contributions made through payroll deductions that accumulate during the 6-month offering period.

Shortly after the shares are purchased, they are deposited into your E\*TRADE Stock Plans account where you can hold them as long as you want or (subject to Tesla's Insider Trading Policy) you may sell or gift the shares without any holding period restrictions. For questions, email the Stock team at stockadmin@tesla.com.

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# **Equity Incentive Plan**

Tesla created the Equity Incentive Plan to give you the opportunity to own a portion of the company. Through equity based awards, Tesla can recognize outstanding work performance and allow employees to benefit from Tesla's continued success. You can personally contribute to that value through innovation, efficiency and commitment to quality. Hard work is as evident in the exceptional products we deliver to customers as it is in the performance of our stock.

The value of vested shares of Tesla stock can be a significant portion of your total compensation. Tesla partners with E\*TRADE Financial to help you manage and stay updated on the status of your equity awards. Refer to your equity grant for the specific terms and conditions and your applicable vesting schedule.

# **Student Loan Refinancing**

SoFi takes a unique approach to student loan refinancing to help save you money. SoFi is one of the few lenders that handles federal and private student loan consolidation. You can refinance through **sofi.com/tesla** and get a \$400 welcome bonus with your loan. SoFi also offers parent refinancing, checking and savings accounts, mortgages, credit health and finance tracking.

# Salary Finance

For help managing your finances and getting out of debt, Salary Finance offers a simple way to borrow and save. With Salary Finance, you can borrow at affordable rates, pay back your loan directly from your paycheck and refinance existing, higher-cost debt. You must be employed for a minimum of 6 months to be eligible for Salary Finance. Learn more on **tesla.salaryfinance.com**.

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# Imputed Income

The IRS requires Tesla to report the cost of company-paid employee life insurance in excess of \$50,000 as "imputed income." If your basic life insurance coverage exceeds \$50,000, you will have imputed income, which is subject to federal and state income taxes and payroll taxes. Visit the <a href="IRS website">IRS website</a> for additional information about group-term life insurance.

#### Basic Life Insurance

- Tesla gives you 2 times your annual earnings up to \$1 million
- Monthly premium cost is paid by Tesla

# **Optional Life Insurance**

You can purchase additional life insurance, as outlined below:

- For you: \$10,000 increments up to \$2 million maximum, not to exceed 8 times your base annual earnings
- For your spouse/domestic partner: \$10,000 increments up to \$500,000 maximum, not to exceed 100% of the total of your basic and optional life insurance amount
- For your child(ren): \$5,000 increments up to \$20,000 for each child

Employee + Spouse/Partner (Paid Separately)			
Age of Insured Person	Monthly Rate per \$1,000 of Coverage		
Under 25	\$0.038		
25-29	\$0.048		
30-34	\$0.067		
35-39	\$0.076		
40-44	\$0.086		
45-49	\$0.133		
50-54	\$0.209		
55-59	\$0.390		
60-64	\$0.589		
65-69	\$1.140		
70-74	\$1.853		
75-79	\$1.853		
80+	\$1.853		

Child		
Coverage Level	Monthly Rate*	
\$5,000 Benefit per Child	\$0.150	
\$10,000 Benefit per Child	\$0.300	
\$15,000 Benefit per Child	\$0.450	
\$20,000 Benefit per Child	\$0.600	

<sup>\*</sup> The monthly rates apply regardless of the number of children you cover.

Your cost is automatically deducted from your paycheck when you enroll online at ts.la/theteslalife.

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#### **Evidence of Insurability**

You may be required to provide proof of good health by filling out an Evidence of Insurability questionnaire, depending on the amount of optional life insurance you elect.

#### Evidence of insurability is NOT required if:

- You enroll when you are a new hire for an amount that does not exceed the lesser of 5 times your salary or \$500,000
- You elect coverage between \$10,000 and \$50,000 for your spouse, when first eligible
- You elect coverage between \$5,000 and \$20,000 for your child(ren), when first eligible

#### Evidence of insurability IS required if:

- At Annual Benefits Enrollment or during a qualifying life event, you increase your existing coverage by more than one level or any increase above \$500,000 you will need to answer a few simple health questions and your responses will be submitted to the insurance carrier for approval
- You elect coverage for any amount after previously declining coverage when first eligible you will need to answer a few simple health questions and your responses will be submitted to the insurance carrier for approval
- If you elect any amount of coverage for your spouse/domestic partner for the first time during a qualifying life event or Annual Benefits Enrollment after previously declining to elect to coverage when first eligible, or if you increase coverage for your spouse/domestic partner by more than one level or above \$50,000 your spouse/domestic partner will need to answer a few simple health questions and their responses will then be submitted to the insurance carrier for approval

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#### Basic Accidental Death & Dismemberment (AD&D) Insurance

- Tesla gives you 2 times your annual earnings up to \$1 million
- Monthly premium cost is paid by Tesla

### **Optional AD&D Insurance**

You can purchase additional AD&D insurance, as outlined below:

- For you: \$10,000 increments up to \$2 million maximum, not to exceed 8 times your base annual earnings
- For your spouse/domestic partner: \$10,000 increments up to \$500,000 maximum, not to exceed 100% of the total of your basic and optional AD&D coverage amount
- For your child(ren): \$5,000 increments up to \$20,000 for each child cost based on coverage level, as noted below

Your monthly cost of coverage is \$0.03 per \$1,000 of coverage, which is deducted from your paycheck when you enroll online at ts.la/theteslalife.

\* You do not have to be enrolled for dependent coverage to elect Optional Life or AD&D coverage. Dependent coverage may not exceed 100% of combined Basic + Optional Employee coverage.

# **Disability Benefits**

Tesla provides Short- and Long-Term Disability coverage at no cost to you. These benefits can provide up to two-thirds of your income if you become disabled due to illness or injury that keeps you from working for an extended period of time.

- Short-Term Disability (STD): STD provides 66.67% of weekly pre-disability earnings after a 7-calendar day waiting period, up to \$2,308 per week for up to 6 months
- Long-Term Disability (LTD): After you have been disabled and unable to work for 180 days, LTD provides 66.67% of your pre-disability earnings, up to a maximum of \$15,000 per month

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Travel Assistance

Business Travel Insurance

**Note:** Full-time Seasonal and Puerto Rico employees should refer to the Full-Time Seasonal or Puerto Rico Benefits Guide

# **Your Perks**

Tesla perks make your life easier, more affordable and more enjoyable. We have a variety of perks to choose from, so there is something for everyone.

#### Tesla Fitness

Visit <u>ts.la/fitness</u> to stay up to date with fitness discounts and offerings as a Tesla employee such as discount memberships with One Pass, Gympass, 24 Hour Fitness and more.

# **Tesla Company Perks**

Tesla provides employees with access to preferred pricing offers on products and services. For the latest perks visit ts.la/perks.

#### Perks at Work

Get exclusive discounts on products and services through perksatwork.com — use your Tesla login credentials to create your account.

# **Tesla Shop Discount**

Receive up to 35% off Tesla apparel, vehicle accessories and lifestyle items. Visit **shop.tesla.com** to get started. Sign in with your Tesla email (xxx@tesla.com) to participate — no discount code necessary. Discounts are automatically applied at checkout on eligible items.

#### **Commuter Benefits**

Commuter Benefits cover the cost to ride public transit and the cost of parking at public transit stations. **Tesla subsidizes up to \$130/month of public transit costs.** In addition, Tesla employees are able to elect up to \$170/month of pre-tax dollars towards public transit for a total maximum of \$300/month. Visit Go Tesla at **ts.la/gotesla**.

# **Identity Theft Protection**

If your identity is stolen, it can take a long time to repair the damage. Identity theft protection from IdentityForce could help you catch fraud in its early stages through continuous monitoring of your personal and financial information. IdentityForce's rapid alerts and recovery services can help you act quickly to limit damage if your personal or financial information is compromised.

Your cost for coverage is \$3.23 bi-weekly, which is deducted from your paycheck when you enroll through <u>ts.la/theteslalife</u>. For a complete list of identity theft protection services available, go to ts.la/theteslalife or call 833.543.1900.

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# **Legal Services**

Having access to reliable Legal services comes in handy for everyday needs in life. Some you plan for (like creating a will, building your family through surrogacy or egg or sperm donations or buying a home), while others you do not (like fighting a traffic ticket or getting your deposit back from a difficult landlord). With legal services, Network attorney fees are paid for most covered matters.

Your cost for coverage is \$8.95 bi-weekly, which is deducted from your paycheck on an after-tax basis when you enroll through <u>ts.la/theteslalife</u>. You must enroll during your enrollment window. Visit <u>ts.la/theteslalife</u> or call <u>833.543.1900</u> for additional information.

#### Pet Insurance

Tesla offers voluntary pet insurance through MetLife. This benefit reimburses you for eligible veterinary expenses, including accidents, illnesses, hereditary conditions and more. Visit <u>metlife.com/getpetquote</u> to get a quote and enroll. You may enroll at any time throughout the year. All premiums due are paid directly to MetLife and not through Tesla payroll deductions. After you enroll, go to <u>metlife.com/mybenefits</u> or call **800.GET.MET8** for questions.

#### **Travel Assistance**

Enjoy travel away from home, worry-free. with Tesla's free personal travel assistance for you and your covered family members. Services are available for trips more than 100 miles from home and up to 180 consecutive days. Tesla employees can enjoy a long list of travel services, including medical referrals, emergency medical and security evacuation, prescription replacement and telemedicine and more. Services are provided by International Medical Group (IMG), a global assistance provider with extensive experience handling complex and remote medical transport situations, as well as providing support for travel concerns when they arise. IMG's on-site 24/7/365 customer service center is available day or night to provide high-quality care you can depend on.

#### **Business Travel Insurance**

This plan is available to you at no cost and provides 24-hour support when traveling on business, including pre-travel assistance, medical travel services and personal security assistance. You also have access to concierge services for local recommendations and arrangements. Visit **ts.la/theteslalife** to learn more.

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# Make Use of Your Maternity Care Benefits

Be sure to take advantage of all the resources available through your medical plan for every stage of pregnancy, labor and delivery, and your baby's first few weeks at home.

- Aetna members: Text BABY to 66902 to get started with the Aetna Enhanced Maternity Program, or call 800.272.3531 to learn more.
- Kaiser members: Visit <u>kp.org/maternity</u> for in-depth maternity resources, including articles, checklists, videos, virtual tours of Kaiser maternity wards and more.
- HSMA members: The Pregnancy Support Program is voluntary
  and offered at no cost to you. Contact HMSA for more
  information, or to enroll as soon as your pregnancy is confirmed,
  by calling 855.329.5461. You can also enroll online at
  hmsa.com/pregnancysupport.

**Note:** Full-time Seasonal and Puerto Rico employees should refer to the Full-Time Seasonal or Puerto Rico Benefits Guide.

You must be covered by a medical plan to receive fertility benefits under the medical plan. If you are not covered, you are not able to get the fertility benefits. (For example, surrogates cannot receive benefits under an employee's medical plan.)

# Your Family

# **Family-Building Benefits**

There is no one way to define a family — families and household arrangements are diverse. To recognize and support the many paths to grow your family, Tesla is proud to offer best-in-class family-building and fertility benefits. These services include comprehensive medical treatment and medications as well as expert support to help you find the best practitioners to meet your unique needs. You must be a covered member of a medical plan to receive that plan's fertility benefits. (Adoption and surrogacy benefits are available to all benefit-eligible employees and their eligible family members, even if not enrolled in a medical plan.)

While all medical plans include family-building benefits, the Aetna plans provide more services, flexibility and choice. Please note, Tesla's contributions toward family-building benefits incur additional taxes because they are classified as "fringe benefits" by IRS regulations. If you take advantage of this benefit, you may see Tesla's contributions listed as "Imputed Income" on your pay stub with applicable tax deductions.

Fertility Benefits	Aetna (+) Kindbody	Kaiser <sup>1</sup>	HMSA <sup>2</sup>
Diagnosis of Infertility	Not required	Required	Required
Limits	<b>⊘</b>	0	<b>⊘</b>
	\$40,000 lifetime max (medical);	1 ART" cycle (medical & prescription)	1 cycle (medical & prescription)
	\$20,000 lifetime max (prescription)	lifetime maximum	lifetime maximum
Infertility Diagnosis, Studies & Test	⊗	⊗	•
Egg & Sperm Donors	⊗	Not covered	Not covered
Cryopreservation (sperm, egg & embryo)	⊗	<b>⊘</b>	
	Elective cryopreservation — up to 1 year	Medically necessary — up to 6 months	Not covered
	(included in lifetime limits)	in conjunction with ART <sup>3</sup> cycle	
Stimulated Intrauterine Insemination (IUI)	⊗	⊗	•
In Vitro Fertilization (IVF)	⊗	⊘	⊗
Fertility Medications <sup>1</sup>	⊗		
	(through Schraft Pharmacy)	•	•

	Up to \$25,000 lifetime max	Up to \$25,000 lifetime max	Up to \$25,000 lifetime max
Surrogacy Benefits <sup>3</sup> (through Kindbody) — available to all benefits-eligible employees and their eligible family members			
Eligible Surrogacy Benefit	<b>O</b>	•	<b>O</b>
	Up to \$25,000 lifetime max	Up to \$25,000 lifetime max	Up to \$25,000 lifetime max

<sup>&</sup>lt;sup>1</sup> Subject to any applicable cost share.

<sup>&</sup>lt;sup>2</sup> ART, which stands for assisted reproductive technology, refers to in vitro fertilization (IVF), gamete intrafallopian transfer (GIFT) and zygote intrafallopian transfer (ZIFT) procedures.

<sup>&</sup>lt;sup>3</sup> A surrogate cannot receive benefits under the employee's plan.

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#### Tesla Babies

Baby on board? Tesla Babies gives you access to helpful tools and resources to support a growing family. You will also find information about taking a leave of absence and the process for returning to work. You will even receive a Tesla-branded care package to celebrate your new arrival.

# Tesla.Care.com — Back-Up Daycare, Tutoring and Distance Learning Assistance

Babysitter going on vacation for a week? No problem. Tesla pays for 5 days of back-up daycare, tutoring and distance learning assistance using your own network of family and friends, or by selecting one of Care.com's background-checked providers. After you pay a small copay, Tesla pays up to \$125 per day for 5 days per year.

This benefit does not replace regular daycare. It is to be used only when regular daycare is not available for an unexpected reason. Visit <u>Tesla.Care.com</u> for more details.

#### **Kindercare Discounts**

Get a 10% tuition discount with the largest network of early childhood education programs in the U.S. through KinderCare, CCLC and Champions. Visit any KinderCare facility or **ts.la/theteslalife** under the "Your Family" tab to learn more.

#### RethinkCare

Through RethinkCare's Parental Success solution, provided at no cost to you, you have access to tools and resources to help you understand, teach and better communicate with your child, including those with developmental and learning challenges. Take advantage of the free enrollment for unlimited access to how-to videos, exclusive content to help you help your child, free expert consultations with Board Certified Behavior Analysts who specialize in working across a broad spectrum of needs and more.

Get started at connect.rethinkcare.com/sponsor/tesla.

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**Note:** Full-time Seasonal and Puerto Rico employees should refer to the Full-Time Seasonal or Puerto Rico Benefits Guide.

# **Your Contacts**

	Resource or Partner	Website or Email	Phone Number
General	Tesla Benefits Center	ts.la/theteslalife	833.543.1900
	Medical - Aetna - Kaiser CA - Kaiser GO - Kaiser GA - Kaiser HI - Hawaii Medical Services Association (HMSA)	aetna.com kp.org/thrive kp.org/thrive kp.org/thrive kp.org/thrive hmsa.com	833.514.1394 800.464.4000 800.632.9700 888.865.5813 800.966.5955 800.776.4672
	Family-Building Benefits: Kindbody	kindbody.com/tesla-benefit/.com	855.989.2020
	Kaiser CA Nurse Line	N/A	Northern CA: 866.454.8855 Southern CA: 888.576.6225
	CVS Caremark (for Aetna medical plans)	<u>caremark.com</u>	833.514.1394
	Dental: Delta Dental	deltadentalins.com/tesla	888.335.8227
	Vision: VSP	<u>vsp.com</u>	800.877.7195
Health	Tobacco Cessation  - Kaiser Tobacco Cessation Program (Kaiser members): CA  - Kaiser Tobacco Cessation Program (Kaiser members): CO  - Kaiser Tobacco Cessation Program (Kaiser members): GA  - Kaiser Tobacco Cessation Program (Kaiser members): HI  - Quit for Life (Aetna members)	kp.org/quitsmoking kp.org/quitsmoking kp.org/quitsmoking kp.org/quitsmoking quitnow.net	800.464.4000 800.632.9700 888.865.5813 800.966.5955 888.QUIT4LIFE (866.784.8454)
	Included Health	includedhealth.com/tesla	833.781.7762
	Hinge Health	hingehealth.com/tesla	855.902.2777
	Lyra Confidential Counseling and Coaching	tesla.lyrahealth.com	855.238.5972
	Lyra Work-Life	tesla.lyrahealth.com/worklife	844.700.8039
	Critical Illness, Hospital Indemnity and Accident Insurance: Aetna	aetnaresource.com/p/tesla-supplemental-health	833.514.1394
	Short-Term Disability: Sedgwick	inside.tesla.com	844.648.3752
	Long-Term Disability: New York Life	mynylgbs.com	888.842.4462
	401(k) Plan: Fidelity Investments (27719)	401k.com	800.835.5097
	Student Loan Refinancing: SoFi	sofi.com/tesla	855.456.7634
	Salary Finance	tesla.salaryfinance.com	800.317.6850
Finances	Employee Stock Purchase Plan & Equity Incentive Plan: E*TRADE	etrade.com	800.838.0908
	Life and Accidental Death & Dismemberment (AD&D): Prudential	<u>prudential.com</u>	800.524.0542
	Leave and Disability	inside.tesla.com	844.648.3752
	Health Savings Account (HSA) & Flexible Spending Account (FSA): Optum Bank	optumbank.com	HSA: 844.326.7967 FSA: 800.243.5543
Perks	Discounted Gympass Memberships	gympass.com/us/tesla-us	844.478.4744
	Commuter Benefit: Go   Tesla	ts.la/gotesla	N/A
	Identity Theft Protection: IdentityForce	ts.la/theteslalife	833.543.1900
	Legal Services: ARAG	ts.la/theteslalife	833.543.1900
	Personal Travel Assistance: IMG	imglobal.com assist@imglobal.com	855.847.2194
	Business Travel Insurance: ACE	medassist-usa@axa-assistance.uschubb.com	855.327.1414
	Pet Insurance: MetLife	To enroll: metlife.com/getpetquote After enrolled: metlife.com/mybenefits	800.GET.MET8 (800.438.6388)
	Tesla Babies, KinderCare Discounts	ts.la/theteslalife	N/A
amily	Tesla.Care.com: Back-Up Daycare and Tutoring Assistance	<u>Tesla.Care.com</u>	855.781.1303
-	RethinkCare	http://connect.rethinkcare.com/sponsor/tesla	800.714.9285

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Note: Full-time Seasonal and Puerto Rico employees should refer to the Full-Time Seasonal or Puerto Rico Benefits Guide

#### Domestic Partner Coverage and Some Family-Building Benefits are Taxed

You will be taxed on the cost to cover your domestic partner or some family-building expenses incurred in the plan year.

### Check Your Beneficiaries

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Be sure to check that your beneficiary information is accurate and up to date. It is important to do this for all of your benefits, including your 401(k), stock, HSA, life insurance and AD&D insurance.

# **Your Eligibility**

### Who Is Eligible?

All active, full-time employees on U.S. payroll who are scheduled to work at least 30 hours per week are eligible for the following benefits on their first day of work:

- Medical
- Dental
- Vision
- Hinge Health if enrolled in an Aetna medical plan
- Voluntary Accident, Hospital Indemnity and Critical Illness
- Life and Accidental Death & Dismemberment AD&D)
- Short-Term and Long-Term Disability

- Flexible Spending Accounts (FSAs)
- Health Savings Account (HSA)
- Commuter Benefits
- Voluntary Identity Theft Protection
- Voluntary Legal Plan
- Pet Insurance
- Kindbody Fertility Benefits if enrolled in an Aetna medical

All active, part-time employees on U.S. payroll in Hawaii who are scheduled to work at least 20 hours per week are eligible for medical.

All active, full-time interns on U.S. payroll who are scheduled to work at least 30 hours per week are eligible for the following benefits on their first day of work:

- Medical
- Dental
- Vision
- Voluntary Accident, Hospital Indemnity and Critical Illness
- Life and Accidental Death & Dismemberment (AD&D)
- Short-Term Disability

- Flexible Spending Accounts (FSAs)
- Health Savings Account (HSA)
- Voluntary Legal Plan
- Pet Insurance

#### All full-time and part-time employees on U.S. payroll are eligible for the following:

- 401(k) Plan

- Rethink

- Employee Stock Purchase Plan

- Lyra Behavioral Health & Work-

(ESPP) — if scheduled over 20

hours per week

- Tesla Perks and Perks at Work

- SoFi

Life Services

- Tesla Fitness

Discounts

- Tesla.Care.com

- Included Health

- Kindbody Donor, Surrogacy and

- Tesla Babies

Adoption Services

#### Your eligible dependents for the benefits programs include your:

- Legally married spouse (unless legally separated) or qualified domestic partner
- Children up to age 26:
- Biological children
- Legally-adopted children or those placed with you for adoption
- Stepchildren or children of an enrolled domestic partner
- Children under a qualified medical child support order
- Children for whom you are the court-appointed legal guardian
- Children of any age who were totally disabled prior to reaching the maximum age limit

You must be able to verify that all dependents are eligible for coverage by submitting the required documentation. Refer to ts.la/theteslalife for a complete list of eligible dependents and documents that can be used for verification. Insurance fraud results in immediate cancellation of coverage.

Note: If you are a full-time intern, you are eligible to enroll in benefits on your first day of work. If you convert to a full-time regular employee, you will not be given an additional window to enroll or make changes to your benefits.

Click Here to Enroll Now

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#### If You Do Not Enroll as a New Hire

If you are eligible and do not make benefit elections within 31 days from your hire date, you will automatically be enrolled in the following benefits:

- Short-Term Disability
- Long-Term Disability
- Basic life insurance
- Basic Accidental Death & Dismemberment (AD&D) insurance
- Lyra Behavioral Health
- Lyra Work-Life

You will not be able to enroll in other benefits until the next Annual Benefits Enrollment period (unless you experience a qualified life event, such as those noted below).

# If Your Family Situation Changes

You have 31 days from the date of most qualified life events to change your benefit elections. If you miss the deadline, you will not be able to make changes until the next Annual Benefits Enrollment period. Eligible life events include the following:

- Marriage, divorce, legal separation or annulment
- Birth or adoption of a child
- Beginning or ending of a domestic partnership
- Court order
- Beginning or ending of benefits coverage through a spouse's or domestic partner's plan

For details on the changes that can be made for each type of life event, visit **ts.la/theteslalife** and select "Changing My Benefits."

#### Tesla Full-Time Employee Benefits Guide

**Note:** Full-time Seasonal and Puerto Rico employees should refer to the Full-Time Seasonal or Puerto Rico Benefits Guide.

# **Definitions and Terms**

**Coinsurance** — The percentage of claim and prescription costs that you pay. Once your costs reach the deductible limit, the insurance company pays for covered expenses at its level of coinsurance and you pay at your level of coinsurance. For example, once a family reaches its in-network deductible, a plan with 80% coinsurance would pay for 80% of all bills or prescriptions for covered services from that point forward. You would continue to pay your portion (20% in this example) of additional costs until you reach your in-network out-of-pocket maximum.

Copay — A flat dollar amount, such as \$20, that you pay when visiting the doctor or paying for prescriptions. Some plans have copays and others do not.

**Deductible** — The amount of money you are responsible for paying before your insurance starts to pay a portion of your bills. Deductibles are an annual amount, which means they reset each calendar year. Tesla's medical plans have two types of deductibles:

- True Family This type of deductible does not require that you or a covered eligible family member meet the "single" deductible in order to satisfy the family deductible. If more than one person in a family is covered under this plan, benefits begin for any one covered family member only after the family deductible is satisfied. The family deductible may be met by one family member or a combination of family members. The out-of-pocket maximum functions in the same way. If more than one person in a family is covered under this plan, the out-of-pocket maximum is satisfied for any one covered family member when the family out-of-pocket maximum is satisfied. The family out-of-pocket maximum may be met by one family member or a combination of family members.
- **Embedded Family** This type of deductible may be satisfied by a combination of family members, but also has an individual deductible "embedded" within the plan that may be satisfied earlier. This allows you or a covered eligible family member to begin benefits as soon as the individual's deductible is met. Another member's benefits do not begin until the person has also met his or her individual deductible, or until the group has met the family deductible. The out-of-pocket maximum functions in the same way.

Domestic Partnership — Generally, a committed, intimate relationship between two adults of the same or opposite sex who share a common residence, are not married to or in a domestic partner relationship with anyone else and are jointly responsible for their common welfare and financial obligations. To qualify your domestic partner for Tesla benefits, you both will be required to sign an affidavit attesting to your eligibility and to provide documentation to prove your joint financial responsibilities. Note: Documentation is only required outside of the Annual Benefits Enrollment period. You cannot use your Flexible Spending Accounts (FSAs) or Health Savings Account (HSA) to pay for your domestic partner's expenses unless you claim him or her as a dependent on your federal income tax return.\*

\*Under federal tax law, if your domestic partner does not qualify as your tax dependent for health coverage purposes, then the value of your domestic partner's coverage will be included in your gross income and be subject to federal income tax withholding and employment taxes and will be reported on your Form W-2. This includes any portion of the premiums that Tesla pays for your domestic partner's health coverage. Applicable state taxes may apply.

This information is only a summary of the tax provisions governing the tax status of a domestic partner for health plan purposes and is not intended nor should it be relied upon as legal or tax advice. Due to the complexity of these tax rules and the potential impact of any imputed income you may incur, you should seek advice from a competent tax professional before certifying as to the tax status of the person being enrolled. Learn more at irs.gov/publications/p501/ar02.html.

#### Tesla Full-Time Employee Benefits Guide

Flexible Spending Accounts (Required Annual Testing) — Health and Dependent Care FSAs are subject to IRS rules, which are designed to ensure that the program does not discriminate in favor of highly compensated individuals. Tesla has the right to unilaterally modify, reduce or revoke an employee's election or to treat some or all of the empoyee's contributions as taxable income without the employee's consent if such action is necessary or desirable to comply with IRS rules.

**Formulary** — A list of commonly prescribed brand-name and generic drugs that a managed care organization has listed as preferred, based on their clinical effectiveness and opportunities to help contain plan costs.

Health Savings Account (HSA) — Available with certain medical plans, this account allows you to save for eligible medical, dental and vision expenses on a pre-tax basis. The balance in the account rolls over from year to year, and the money in the account is yours to keep even if you leave Tesla. In California and New Jersey, you can contribute to an HSA before federal taxes are withheld, but state taxes are still withheld. HSA earnings are subject to state tax in CA and New Jersey. Please consult with your tax specialist.

**In-Network Coverage** — You will pay less if you use a provider in the plan's network as those networks provide services at lower cost to the insurance companies with which they have contracts.

**Out-of-Network Coverage** — You will pay less if you use a provider in the plan's network. If your plan includes an out-of-network benefit and you use a non-network provider, you are responsible for the difference between the covered expense and the actual non-participating provider's charge.

Out-of-Pocket Maximum — The annual out-of-pocket maximum is the most you and your covered family members would have to pay in a year for health care costs. The annual out-of-pocket maximum does not include premium costs (the amount that is deducted from your paycheck for health coverage).

Under all coverage levels, once a covered family member meets the individual out-of-pocket maximum, your insurance will pay the full cost of covered charges for that individual. Charges for all covered family members will continue to count toward the family out-of-pocket maximum. Once the family out-of-pocket maximum is met, your insurance will pay the full cost of covered charges for all covered family members.

**Premiums** — The amount you pay each paycheck for insurance coverage. Premiums do not count toward deductibles or out-of-pocket maximums. Premiums are also referred to as "employee contributions" or "cost of coverage."

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Tesla reserves the right to terminate, suspend, withdraw or modify the benefits described in this document, in whole or in part, at any time. Additionally, from time to time, the company may modify or discontinue certain benefits described here as needed due to business needs or local laws. No statement in this or any other document, and no oral representation, should be construed as a waiver of this right.

This is not a legal document. Please refer to the summary plan description for detailed information. This document is not intended to cover every option detail. Complete details are in the legal documents, contracts and administrative policies that govern benefit operation and administration found on **ts.la/theteslalife**.

This document is a summary for informational purposes only. If there should ever be any differences between the summaries in this handbook and these legal documents, contracts and policies, the document contracts and policies will be the final authority. Please refer to your policy documents for up to date information.