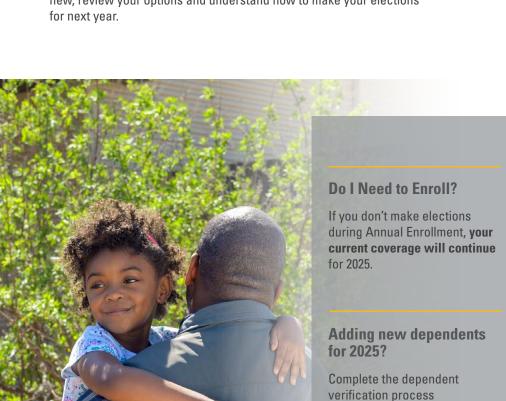
CATERPILLAR*



For retirees, spouses/eligible domestic partners and dependents under age 65

Welcome to your 2025 Caterpillar Benefits

The 2025 Benefits Annual Enrollment period is Oct. 30 - Nov. 13, 2024. Use this brochure and *CatHealthEnrollment.bswift.com* to learn what's new, review your options and understand how to make your elections for next year.



when prompted.

What's New for 2025?

We're making some exciting changes and enhancements for next year.

Medical plans	Introducing Healthcare Bluebook™, a great way to make sure you get the best bang for your health care dollars. Healthcare Bluebook is a handy tool that helps you: • Find top-quality providers who offer the best price. • Learn how your provider or facility scores on specific procedures. The green, yellow or red coding makes it easy to see independent ratings and compare options. See how you can earn cash rewards for using the tool! Learn more on page 6. Annual contribution limits are increasing to \$4,300 for individual coverage or \$8,550 if you cover dependents. If you're are 55 or		
Health Savings Account	Annual contribution limits are increasing to \$4,300 for individual coverage or \$8,550 if you cover dependents. If you're age 55 or older, you can contribute an additional \$1,000.		



Get Your Tax Form Fast – Go Electronic

Access your 2024 Form 1095-C as soon as it's available by enrolling in electronic delivery. You'll receive an email when it's ready instead of waiting two to three weeks for it to arrive in the mail. To sign up, visit CatHealthEnrollment.bswift.com and follow the instructions online.

Looking for more plan details?

Check out the Summary of Benefits and Coverage (SBCs) for each plan at CatHealthEnrollment.bswift.com.

Choose from one of three ways to make your elections.



Online

CatHealthEnrollment.bswift.com

Follow the prompts to register and set up a new username and password.



By Phone

1-833-735-2127



By Mobile Device

bswift benefits app

Download the bswift benefits app from your favorite app store.

Review and Refresh Your Beneficiary Designations

It's a good idea to review your beneficiary designations each year and ensure they reflect your current wishes.

For the HSA, visit *HealthEquity.com/caterpillar*

For the 401(k) and pension plans, visit CatBenefitsCenter.com



Coming January 1, 2025...

Shop for top-quality health care at a fair price

Introducing Healthcare Bluebook

Did you know that the cost and quality for medical procedures can vary widely between providers? Some providers are better than others at certain procedures. And depending on what you need, your out-of-pocket costs could vary by more than 500% between providers.

How do you find providers who offer the best value?

We're introducing **Healthcare Bluebook**, a handy tool to help you shop for the best care at a fair cost to you. Healthcare Bluebook includes data on more than 200 "shoppable" services, like knee, hip and back surgery, CT scans, MRIs and more.

How to shop for care

- Search for a doctor, procedure, or specialist by using the search bar at the top of the Healthcare Bluebook home page.
- Look for the green symbol to confirm you are choosing a high-quality care provider.
- Receive a reward when you use a green provider within 12 months of searching for them on the tool. You'll share in the savings with a debit card loaded with cash!*

Look for more information starting in January!



*Amount varies by procedure – between \$25-\$1,500 – and is subject to ordinary income tax.

Benefits in Your Pocket

Want to access your benefit contacts on your mobile device? Follow these steps to download the digital wallet card.

- Text CAT to 67936 (normal text or messaging rates apply).
- Click on the link in 2. the text response.
- Tap Share (iPhone) or Options (Android) in the text response.
- Click Add to Home Screen **4**_ or *Options* (Android) in the text response.

Medical Plan Options

IN-NETWORK	TRADITIONAL PLANS				
	BCBS National	UHC Choice Plus (PPO)			
Annual deductible	Individual: \$600 Family: \$1,200	Individual: \$1,000 Family: \$2,000			
Annual out-of-pocket maximum ¹	Individual: \$2,500 Family: \$5,000 (excludes Rx drugs)	Individual: \$3,500 Family: \$7,000 (excludes Rx drugs)			
Medical coinsurance	You pay 20	You pay 20% after deductible			
Health Savings Account (HSA) Contribution		N/A			
Office visit	Primary: You pay a \$20 copay Specialist: You pay a \$40 copay	You pay 20% after deductible			
Hospital	You pay 20	0% after deductible			
Visit: You pay a \$20 copay Procedures: You pay 20% after deductible		You pay 20% after deductible			
Emergency care	You pay 20% after deductible plus a \$125 fee (fee is waived if admitted)	You pay 20% after deductible plus a \$100 fee (fee is waived if admitted)			
PHARMACY	BCBS National	UHC Choice Plus (PPO)			
Caterpillar Pharmacy Network	Walmart, Kroger, Walgre	ens and CPRxN² and their affiliates			
		ens and CPRxN ² and their affiliates			
Pharmacy Network					
Pharmacy Network Annual deductible	Do	es not apply			
Pharmacy Network	Do Tier 0	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay			
Pharmacy Network Annual deductible Retail ³ up to a	Do Tier 0 Tier 1	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay			
Pharmacy Network Annual deductible Retail ³ up to a	Do Tier 0 Tier 1 Tier 2	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max)			
Pharmacy Network Annual deductible Retail ³ up to a	Tier 0 Tier 1 Tier 2 Tier 3 Tier 4	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max)			
Pharmacy Network Annual deductible Retail ³ up to a	Tier 0 Tier 1 Tier 2 Tier 3 Tier 4	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max)			
Pharmacy Network Annual deductible Retail ³ up to a	Tier 0 Tier 1 Tier 2 Tier 3 Tier 4 2025 MON (INCLUDES MEDICAL, PRESCRIPTION)	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max) NTHLY PREMIUMS ON DRUGS, DENTAL AND VISION BENEFITS)			
Pharmacy Network Annual deductible Retail ³ up to a 30-day supply	Tier 0 Tier 1 Tier 2 Tier 3 Tier 4 2025 MON (INCLUDES MEDICAL, PRESCRIPTION BCBS National	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max) NTHLY PREMIUMS ON DRUGS, DENTAL AND VISION BENEFITS) UHC Choice Plus (PPO)			
Pharmacy Network Annual deductible Retail ³ up to a 30-day supply	Tier 0 Tier 1 Tier 2 Tier 3 Tier 4 2025 MON (INCLUDES MEDICAL, PRESCRIPTION BCBS National \$261	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max) WITHLY PREMIUMS ON DRUGS, DENTAL AND VISION BENEFITS) UHC Choice Plus (PPO) \$180			
Pharmacy Network Annual deductible Retail ³ up to a 30-day supply Retiree only Spouse only	Tier 0 Tier 1 Tier 2 Tier 3 Tier 4 2025 MON (INCLUDES MEDICAL, PRESCRIPTI BCBS National \$261 \$392	es not apply You pay a \$0 copay Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay You pay 20% (\$35 min / \$70 max) You pay 50% (\$85 min / \$135 max) You pay 50% (\$110 min / \$210 max) NTHLY PREMIUMS ON DRUGS, DENTAL AND VISION BENEFITS) UHC Choice Plus (PPO) \$180			

¹The federal annual out-of-pocket maximum for 2025 is \$9,200 / \$18,400 which includes deductibles, coinsurance and copays. These amounts are subject to change each year.

²CPRxN is Community Pharmacy Prescription Drug Network.

IN-NETWORK	CONSUMER DIRECTED HEALTH PLANS			
	UHC Consumer Choice (CDHP)	UHC Consumer Max (CDHP)		
Annual deductible	Retiree only: \$1,750 If you enroll dependents: \$3,500	Retiree only: \$3,000 If you enroll dependents: \$6,000		
Annual out-of-pocket maximum¹	Retiree only: \$3,500 If you enroll dependents: \$7,000 (includes Rx drugs)	Retiree only: \$5,000 If you enroll dependents: \$10,000 (includes Rx drugs)		
Medical coinsurance	You pay	20% after deductible		
Account (HSA)	Caterpillar contributes: Retiree only: \$300 If you enroll dependents: \$600	Caterpillar contributes: Retiree only: \$550 If you enroll dependents: \$1,100		
Health Savings Account (HSA) Contribution Office visit Hospital Urgent care Emergency care PHARMACY Caterpillar	See page	e 11 for eligibility rules.		
Office visit	You pay	20% after deductible		
Hospital	You pay	20% after deductible		
Urgent care You pay 20% after deductible				
Emergency care	You pay 20% after deductible			
PHARMACY UHC Consumer Choice (CDHP)		UHC Consumer Max (CDHP)		
Caterpillar Pharmacy Network Walmart, Kroger, Walgreens and CPRxN ² and their affiliates		reens and CPRxN² and their affiliates		
Annual deductible	the deductible, you pay the copay/c	you meet the annual deductible. After you meet oinsurance as shown in the table below. c medications on the Preventive Drug List. ⁴		
	Tier 0	You pay a \$0 copay		
D 4 112	Tier 1	Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay		
Retail³ up to a 30-day supply	Tier 2	You pay 20% (\$35 min / \$70 max)		
	Tier 3	You pay 50% (\$85 min / \$135 max)		
	Tier 4	You pay 50% (\$110 min / \$210 max)		
	2025 MONTHLY PREMIUMS (INCLUDES MEDICAL, PRESCRIPTION DRUGS, DENTAL AND VISION BENEFITS)			
Retiree only	(INCLUDES MEDICAL, PRESCRI	PTION DRUGS, DENTAL AND VISION BENEFITS)		
Retiree only Spouse only	(INCLUDES MEDICAL, PRESCRIF UHC Consumer Choice (CDHP)	PTION DRUGS, DENTAL AND VISION BENEFITS) UHC Consumer Max (CDHP)		

³Mail order (home delivery) is available through Walgreens Mail Service. Contact Prime Therapeutics Pharmacy for specialty medications.

\$226

\$396

Retiree + children

Retiree + family

⁴Caterpillar Drug Formulary, CDHP Preventive Drug List and Network Pharmacy Directory can be found at benefits.cat.com.

\$136

\$238

Which Medical Plan Option is Right for You?

Just **Ask Emma**® – a simple enrollment tool on *CatHealthEnrollment.bswift.com* – to learn which plan might be most cost-effective for you. Consider these items to help you decide:

WOULD You rather	THEN CONSIDER				COMMENTS
	BCBS National	UHC Choice Plus (PPO)	UHC Consumer Choice (CDHP)	UHC Consumer Max (CDHP)	
Pay lower premiums?			✓	✓	CDHPs have lower premiums.
Pay copays for physician office visits?	√				Additional services, like X-rays and labs, are subject to the deductible.
Have a lower deductible?	✓	✓			BCBS National and UHC Choice Plus (PPO) have lower deductibles.
Have no deductible for prescription drugs?	✓	√			In the CDHPs, you must first meet the deductibles.
Use any medical provider or hospital?		√	✓	√	BCBS National is the only plan that requires you to use in-network medical providers to receive benefits.
Have an HSA?			√	✓	CDHPs allow you and Caterpillar to contribute to an HSA, if you're eligible.
Have an HSA, but with a lower annual out-of-pocket maximum?			√		UHC Consumer Choice (CDHP) has an HSA, but the annual out-of-pocket maximum is lower than in the UHC Consumer Max (CDHP).

Health Savings Account (HSA)

(For UHC Consumer Choice or UHC Consumer Max CDHP participants)

	HSA ¹
Who is eligible	There are certain legal requirements to be eligible to open and contribute to an HSA. For details, see IRS <i>Publication 969</i> or <i>HealthEquity.com/caterpillar</i> . If you enroll in an HSA using the online enrollment process, you'll be prompted to confirm your eligibility and provide authorization.
to contribute:	Got a Caterpillar HRA? If you or your spouse have a Caterpillar Health Reimbursement Arrangement (HRA), you're not eligible to contribute to an HSA or receive a company contribution.
	\$4,300 for individual coverage \$8,550 for retiree + spouse, child(ren) or family coverage
2025	During the year you turn age 55 and up to age 65, you can contribute an additional \$1,000.
contribution limit	If your spouse has their own HSA, your combined contribution totals are subject to the family contribution limit.
	You can contribute post-tax funds into your account – up to the annual contribution limit – and then deduct those contributions on your annual tax return.
Caterpillar health care plan option the HSA can pair with	UHC Consumer Choice (CDHP) or UHC Consumer Max (CDHP)
Eligible expenses ²	Out-of-pocket medical, prescription drug, dental, vision and hearing expenses for you and your dependents
How much money	Consumer Choice CDHP: \$300 individual coverage / \$600 retiree + spouse, child(ren) or family coverage
does Caterpillar contribute in January 2025?	Consumer Max CDHP: \$550 individual coverage / \$1,100 retiree + spouse, child(ren) or family coverage
	Certain restrictions may apply. See IRS <i>Publication 969</i> for details.
What happens to unused funds at year-end?	You can carry over unused funds from year to year. And the account is yours to keep if you change plans. Once your balance reaches \$1,000, you have the option to invest in mutual funds.
Who administers the benefit?	HealthEquity

For more information on HSAs, see *HealthEquity.com/caterpillar*.

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¹ Your HSA is an account with HealthEquity. It's not administered by Caterpillar, is not an employer-sponsored plan and is not an ERISA plan. Contributions may be subject to state taxes in some states. Check with your state department of revenue.

² Eligible expenses are determined by the Internal Revenue Service. For a complete listing of eligible expenses, visit irs.gov to view IRS Publication 502 (Health Care).

Dental Benefits (Included with your medical plan premium)

CIGNA DENTAL BENEFITS		
Annual deductible (does not apply to preventive services)	\$50 for individual \$100 for family	
Annual maximum (amount the plan will pay per person per year)	\$2,000 per person	
Preventive care (two cleanings per 12-month period, annual exams and X-rays)	Covered at 100%, not subject to deductible; annual maximum applies	
Basic services (fillings, root canals, periodontics and oral surgery)	You pay 20% after deductible	
Major services (crowns, bridges, partials and dentures, or implants)	You pay 50% after deductible	
Orthodontia (for dependents age 21 and younger)	Plan pays 50% up to \$1,500 lifetime maximum per person	

Vision Benefits (Included with your medical plan premium)

Below is a summary of benefits when using VSP providers.

VSP - FOR GLASSES		
Eye exams Once per calendar year	You pay a \$20 copay	
Lenses Once per calendar year	You pay a \$20 copay for standard lenses (single vision, lined bifocal/trifocal)	
Frames Every other calendar year	You pay a \$20 copay; receive up to \$200 allowance for one pair of frames	
VSP - FOR CO	ONTACT LENSES	
Contact lens exam Once per calendar year	You pay up to a \$60 copay	
Contact lenses (in lieu of lenses and frames)	Receive up to \$140 allowance per calendar year	
Medically necessary contact lenses (limited to members whose vision can't be corrected through glasses)	You pay a \$20 copay per calendar year in lieu of lenses and frames	

Hearing Aid Benefits (Included with your medical plan premium)

Hearing aids	You're eligible for new hearing aids every 60 months through EPIC Hearing Healthcare.
Getting started	Call EPIC at 1-866-956-5400 to register and speak with a counselor who will assess your needs and coordinate a referral to a provider near you. Use an EPIC Hearing Healthcare network provider to receive the maximum coverage.

Other Benefits, Programs and Resources

VENDOR Voluntary supplemental medical plans through Voya can help protect you from significant or unexpected out-of-pocket expenses and can complement your Caterpillar medical coverage. You pay the full cost for this coverage.

Voluntary Supplemental Medical Plans

Options include:

- ✓ Accident Insurance
- ✓ Hospital Indemnity Insurance
- ✓ Critical Illness Insurance

Visit YourChoiceVoluntaryBenefits.com for details and enroll through CatHealthEnrollment.bswift.com.

Group Legal Insurance Plan

Through ARAG, you can receive access to a nationwide network of attorneys for a variety of issues such as will and estate planning, real estate, traffic tickets, landlord disputes, family law matters, bankruptcy and more.

Visit YourChoiceVoluntaryBenefits.com for details and enroll through CatHealthEnrollment.bswift.com.

Identity Protection

Let Allstate Identity Protection Pro Plus protect your identity while you focus on your life. If Allstate detects suspicious activity, they will alert you. A privacy advocate will do the legwork to address the issue and restore your name. Visit YourChoiceVoluntaryBenefits.com for details, and make changes through CatHealthEnrollment.bswift.com.

If the content of this communication or any representations made by any person regarding the plans conflict with or are inconsistent with the provisions of the plan documents, the provisions of the plan documents are controlling. To the fullest extent permitted by law, Caterpillar Inc. reserves the right to amend, modify, suspend, replace or terminate any of its plans, policies or programs, in whole or in part, at any time and for any reason, by appropriate company action.





Have questions?

- For eligibility and enrollment questions or questions about voluntary benefits, call the Caterpillar Health Enrollment Center at 1-833-735-2127.
- For questions about a specific benefit or coverage situation, call the provider partner directly. You can find provider partner contact information on page 15 or download benefit contacts on your mobile device — see page 7.



Contacts

Please refer to the contact information below, benefits.cat.com or the Summary of Benefits and Coverage or Summary Plan Descriptions on CatHealthEnrollment.bswift.com (click on Learn, Resource Library and then the Plan Documents tile) for further information about your benefits.

BENEFIT	VENDOR	WEBSITE	PHONE NUMBER
Health Care and Voluntary Benefits Assistance	Caterpillar Health Enrollment Center	CatHealthEnrollment.bswift.com	1-833-735-2127
	Blue Cross Blue Shield of IL	bcbsil.com/caterpillar	1-844-228-2227
Medical	BCBS Caterpillar NetWork	MyBlueElementIL.com	1-888-228-1120
	UnitedHealthcare (UHC)	myuhc.com	1-866-228-4215
Second Opinion Service	2nd.MD (free second opinion for UHC members)	2nd.md/caterpillar or download the 2nd.MD mobile app	1-866-269-3534
Medical-	MDLive (BCBS members)	MDLIVE.com/bcbsil or download MDLive's mobile app	1-888-676-4204
Virtual Visits	UHC virtual care partners (UHC members)	myuhc.com/virtualvisits or download the UHC mobile app	N/A
	Prime Therapeutics (formerly Magellan Rx)	PrimeTherapeutics.com	1-877-228-7909
Prescription Drugs	Prime Therapeutics Pharmacy - Specialty Medications (formerly Magellan Rx)	PrimeTherapeutics.com/ specialtypharmacy/patient	1-866-554-2673
	Walgreens Mail Service - Mail Order (Home Delivery)	WalgreensMailService.com	1-866-840-1222 (TTY 1-800-925-0178)
Dental	Cigna Dental	myCigna.com	1-800-244-6224
Vision	VSP	VSP.com	1-800-877-7195
Health Savings Account	HealthEquity	HealthEquity.com/caterpillar	1-844-311-9732
Other Benefits	Caterpillar Health Enrollment Center - Accident, Hospital Indemnity and Critical Illness Insurance - Group Legal - ID Protection	Visit YourChoiceVoluntaryBenefits.com for details and enroll through CatHealthEnrollment.bswift.com	1-833-735-2127

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