



# 2024 benefits at a glance



Find this document and more information about your benefits online, on Stryker's Total Rewards site at [totalrewards.stryker.com](https://totalrewards.stryker.com). Access it at work, at home and on most mobile devices.

Updated: 9/22/2023

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Eligibility for plans may differ for full-time and part-time employees. For a summary of how part-time status impacts your eligibility, see the [Part-Time Benefits document](#) on [totalrewards.stryker.com](https://totalrewards.stryker.com) > Documents > Additional forms and documents. You can find full details in the plan certificates and summary plan descriptions on [totalrewards.stryker.com/spd](https://totalrewards.stryker.com/spd).

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The benefits outlined in this document are summaries only and are subject to the actual provisions of the respective plan documents in effect covering such benefits. Stryker reserves the right to alter, modify, amend, or terminate these benefits within the law, in a manner in which we believe to be in our and our employees' best interest as affected by business conditions. If there are any differences between the information in this summary and the plan documents or contracts, the plan document or contract will prevail.

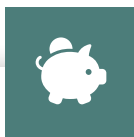
# Your Total Rewards

At Stryker, we understand that your health and wellbeing are important. That's why we offer you a comprehensive Total Rewards package, which helps protect your (and your family's) health and finances so you can focus on life and work.



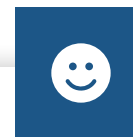
## Health

- Medical and prescription drug
- Critical illness insurance
- Accident insurance
- Hospital indemnity insurance
- Dental
- Vision
- Personalized healthcare support
- Wellbeing program
- Tobacco cessation program



## Money

- Health Savings Account (HSA)
- Flexible Spending Accounts (FSAs)
- 401(k) plan
- Employee Stock Purchase Plan (ESPP)
- Basic life and AD&D insurance
- Supplemental life insurance
- Short-term and long-term disability insurance
- Employee discounts
- Tuition reimbursement
- Commuter benefits



## Work/Life

- International business travel policy
- Holidays
- Vacation/Sick time
- Bereavement
- Parental leave
- Military leave
- Caregiver leave
- Employee Assistance Program (EAP)
- Adoption assistance
- Breast milk shipping

Learn more by visiting [totalrewards.stryker.com](https://totalrewards.stryker.com).



# Medical and prescription plans

Your health matters, which is why our benefits program includes medical plan options with a range of coverage levels and costs designed to meet the diverse needs of our employees. When you enroll in a medical plan, you automatically receive prescription drug benefits through your medical plan provider. It's important to take advantage of all the benefits your medical plan provides, including free in-network preventive care.

To learn more about your medical plans, including plan details and covered services, visit [totalrewards.stryker.com](https://totalrewards.stryker.com).

## Medical plan—UnitedHealthcare PPO plans

The UnitedHealthcare (UHC) PPO plan options are available to employees in most Stryker locations. If you reside in Alabama, California or Hawaii, alternative medical/prescription drug plans are offered.

Plan provision	UHC Choice PPO		UHC Value PPO		Out-of-area
Annual deductible	In-network	Out-of-network*	In-network	Out-of-network*	Out-of-area**
Employee	\$350	\$700	\$750	\$1,500	\$350
Employee + 1	\$700	\$1,400	\$1,500	\$3,000	\$700
Family	\$1,050	\$2,100	\$2,250	\$4,500	\$1,050
Annual out-of-pocket maximum for coinsurance	In-network	Out-of-network*	In-network	Out-of-network*	Out-of-area**
Employee	\$2,950	\$5,900	\$4,250	\$8,500	\$2,950
Employee + 1	\$5,900	\$11,800	\$8,500	\$17,000	\$5,900
Family	\$6,250	\$12,500	\$9,250	\$18,500	\$6,250

\*Maximum Non-Network Reimbursement Program (MNRP) guidelines apply

\*\*Reasonable & Customary (R&C) guidelines apply

### UnitedHealthcare Choice Plus Network

800 387 7508

Group number—703997

[myuhc.com](https://myuhc.com)

Plans may vary by ZIP code. Please refer to your Summary Plan Description (SPD) available at [totalrewards.stryker.com/spd](https://totalrewards.stryker.com/spd).



## Medical and prescription plans—UnitedHealthcare PPO plans (continued)

	UHC Choice PPO and UHC Value PPO		Out-of-area
	In-network	Out-of-network*	Out-of-area**
	You pay	You pay	You pay
<b>Preventive care</b>	\$0 copay	40% not subject to deductible	\$0 copay
<b>Office visits</b>			
Primary care	\$25 copay	40% after deductible	20% after deductible
Specialist	\$40 copay	40% after deductible	20% after deductible
<b>Mental health and substance abuse treatment***</b>			
Inpatient	20% after deductible	40% after deductible	20% after deductible
Outpatient	\$25 copay	40% after deductible	20% after deductible
<b>Emergency care</b>			
Medical emergency	\$150 copay; waived if admitted	\$150 copay; waived if admitted	\$150 copay; waived if admitted
Non-emergency	\$150 copay; waived if admitted	\$150 copay; waived if admitted	\$150 copay; waived if admitted
Urgent care/walk-in	\$40 copay	40% after deductible	20% after deductible
<b>Hospital service</b>			
Inpatient/outpatient	Prior authorization required 20% after deductible	Prior authorization required 40% after deductible	Prior authorization required 20% after deductible
<b>Lab and X-ray</b>	20% after deductible (preventive covered at 100%)	40% after deductible	20% after deductible (preventive covered at 100%)

\*Maximum Non-Network Reimbursement Program (MNRP) guidelines apply

\*\*Reasonable & Customary (R&C) guidelines apply

\*\*\*In general, your network provider must obtain prior authorization from UnitedHealthcare, as described in the Summary Plan Description at [totalrewards.stryker.com/spd](https://totalrewards.stryker.com/spd), before you receive certain covered health services. There are some network benefits, however, for which you are responsible for obtaining prior authorization from UnitedHealthcare.

	Prescription plan copayments			Drug formulary required?
	Tier 1	Tier 2	Tier 3	
<b>Retail—30-day supply</b>	\$10	\$25	\$50	Yes
<b>Mail order—90-day supply</b>	\$25	\$62.50	\$125	Yes

Notes:

- Some Affordable Care Act (ACA) preventive medications are covered at 100% with no copay requirement.
- For more information, including your Advantage 3-Tier Prescription Drug List (PDL), visit [totalrewards.stryker.com](https://totalrewards.stryker.com).



# Medical and prescription plans

## UnitedHealthcare Choice Plus Network

800 387 7508

Group number—703997

[myuhc.com](https://myuhc.com)

### Medical plan—UnitedHealthcare HSA plans

The UnitedHealthcare (UHC) HSA plan options are available to employees in most Stryker locations. If you reside in Alabama, California or Hawaii, alternative medical/prescription drug plans are offered.

Plan provision	UHC Premium HSA		UHC Basic HSA	
2024 HSA contribution from Stryker				
Employee	\$600		\$300	
All other coverage tiers	\$1,200		\$600	
Annual deductible*	In-network	Out-of-network**	In-network	Out-of-network**
Employee	\$1,600	\$3,200	\$2,500	\$5,000
All other coverage tiers	\$3,200	\$6,400	\$5,000	\$10,000
Annual out-of-pocket maximum for coinsurance	In-network	Out-of-network**	In-network	Out-of-network**
Employee	\$5,000	\$10,000	\$6,450	\$12,900
All other coverage tiers	\$10,000	\$20,000	\$12,900	\$25,800

\*In HSA plans, the total family deductible must be met before the plan covers any expenses. No one family member's expenses are capped at an individual deductible amount.

\*\*Maximum Non-Network Reimbursement Program (MNRP) guidelines apply



## Medical plan—UnitedHealthcare HSA plans (continued)

	UHC Premium HSA		UHC Basic HSA	
	In-network	Out-of-network*	In-network	Out-of-network*
	You pay	You pay	You pay	You pay
<b>Preventive care</b>	0%	40% not subject to deductible	0%	50% not subject to deductible
<b>Office visits</b> Primary care and specialist	20% after deductible	40% after deductible	30% after deductible	50% after deductible
<b>Mental health and substance abuse treatment</b> Inpatient and outpatient	20% after deductible	40% after deductible	30% after deductible	50% after deductible
<b>Emergency care</b> Medical emergency	20% after deductible	20% after deductible	30% after deductible	30% after deductible
Non-emergency	20% after deductible	20% after deductible	30% after deductible	30% after deductible
Urgent care/walk-in	20% after deductible	20% after deductible	30% after deductible	30% after deductible
<b>Hospital service</b> Inpatient/outpatient	Prior authorization required 20% after deductible	Prior authorization required 40% after deductible	Prior authorization required 30% after deductible	Prior authorization required 50% after deductible
<b>Lab and X-ray</b>	20% after deductible	40% after deductible	30% after deductible	50% after deductible

\*Maximum Non-Network Reimbursement Program (MNRP) guidelines apply

In general, your network provider must obtain prior authorization from UnitedHealthcare, as described in the Summary Plan Description at [totalrewards.stryker.com/spd](https://totalrewards.stryker.com/spd), before you receive certain covered health services. There are some network benefits, however, for which you are responsible for obtaining prior authorization from UnitedHealthcare.



## Prescription plan—UnitedHealthcare HSA plans (continued)

### UnitedHealthcare HSA plans

With the UHC HSA medical plans, there are no copays for prescriptions drugs. Instead, you pay 100% of the cost for non-preventive prescription drugs, until you meet the HSA plan’s deductible.

#### Prescription costs and coinsurance

##### If your deductible has not been met...

You pay the full cost of your prescription drugs until your medical plan deductible is met.

- Some **Affordable Care Act (ACA) preventive medications** are covered at 100% with no deductible requirement.
- We cover certain **core preventive medications** before the deductible is met, meaning you only pay the appropriate coinsurance until you meet your out-of-pocket maximum.
- To learn more and find a copy of the ACA preventive and Core preventive drug lists, as well as your Advantage 3-Tier Prescription Drug List (PDL), visit [totalrewards.stryker.com](https://totalrewards.stryker.com).

##### If your deductible has been met...

You pay the applicable coinsurance amount for your prescription drugs until your out-of-pocket maximum has been reached. The coinsurance amounts are:

UHC Premium HSA	UHC Basic HSA
20%	30%





# Medical and prescription plans

## Kaiser Permanente of California

800 464 4000

Northern group number—17181

Southern group number—118506

[kaiserpermanente.org](https://www.kaiserpermanente.org)

### Medical plan—Kaiser Permanente of California

The Kaiser Permanente of California plans are only available to employees who live or work in the state of California.

California participants may also select any of the UHC PPO or UHC HSA Plan offerings.

Plan provision		In-network medical coverage only	
Annual deductible			
Employee		\$250	
All other coverage tiers		\$500	
Annual out-of-pocket maximum for coinsurance			
Employee		\$3,000	
All other coverage tiers		\$6,000	
		You pay	
Preventive care		\$0 copay	
Office visits			
Primary care and specialist		\$10 copay	
Mental health and substance abuse treatment			
Inpatient		10% after deductible	
Outpatient		\$10 copay	
Emergency care			
Medical emergency		10% after deductible	
Non-emergency		10% after deductible	
Urgent care/walk-in		\$10 copay	
Hospital service			
Inpatient and outpatient		10% after deductible	
Lab and X-ray		\$10 copay	
Prescription copayments			
	Generic	Brand name	Drug formulary required?
Retail— 30-day supply	\$10	\$30	Yes
Mail order— 100-day supply	\$20	\$60	Yes

All care and services must be coordinated by a Kaiser Permanente physician.



# Medical and prescription plans

**Blue Access® Gold for  
Business BlueCard PPO  
Blue Cross Blue Shield  
of Alabama**

800 292 8868

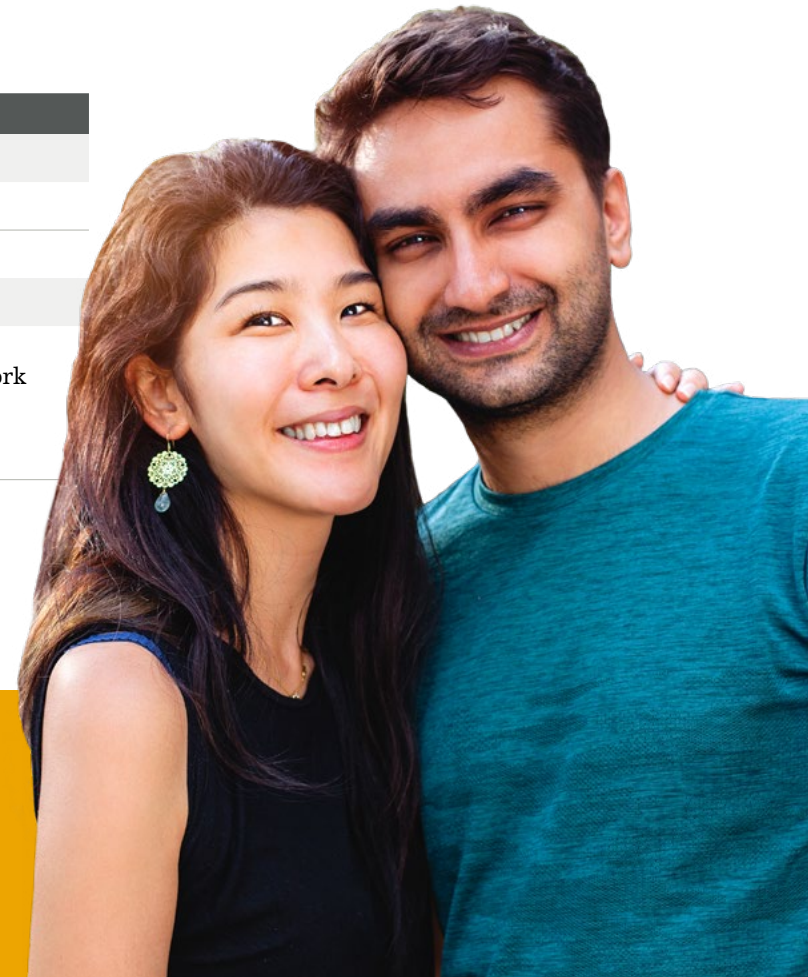
Group number—82059

[bcbosal.com](https://www.bcbosal.com)

## Medical plan—Blue Cross Blue Shield of Alabama

Blue Cross Blue Shield of Alabama is only available to employees who reside in Alabama. Alabama participants may also select the UHC PPO or UHC HSA plan offerings.

Plan provision	In-network	Out-of-network
<b>Annual deductible</b>		
Employee	\$500	\$500
All other coverage tiers	\$1,000	\$1,000
<b>Annual out-of-pocket maximum for coinsurance</b>		
Employee	\$5,000 (including annual deductible)	There is no out-of-pocket maximum for out-of-network services
All other coverage tiers	\$10,000 (including annual deductible)	





## Medical plan—Blue Cross Blue Shield of Alabama (continued)

	In-network	Out-of-network
	You pay	You pay
<b>Preventive care</b>	0%	Not covered
<b>Office visits</b>		
Primary care	\$35	20% of the allowed amount subject to annual deductible
Specialist	\$50	
<b>Emergency care</b>	\$200 copay	\$200 hospital copay and subject to annual deductible
Medical emergency		<b>Mental health and substance abuse services:</b> \$200 hospital copay
<b>Inpatient hospital and physician benefits (includes mental health and substance abuse)</b>		
Preadmission certification is required for inpatient admissions (except medical emergency services and maternity); notification within 48 hours for emergencies. Call 800 248 2342 (toll free) for precertification.		
<b>Inpatient hospital</b>	<b>Lower member cost share:</b> \$200 per day hospital copay (days 1-5 for each admission) <b>Higher member cost share:</b> \$400 per day hospital copay (days 1-5 for each admission)	20% of the allowed amount after \$800 per admission deductible <b>Note:</b> In Alabama, available only for medical emergency and accidental injury
<b>Inpatient physician visits and consultations</b>	0% up to the allowed amount subject to annual deductible <b>Mental health and substance abuse services:</b> 0% up to the allowed amount; no copay or deductible	20% of the allowed amount subject to annual deductible; in Alabama, 50% of the allowed amount subject to annual deductible <b>Mental health and substance abuse services:</b> 20% of the allowed amount; no copay or deductible
<b>Outpatient hospital benefits (includes mental health and substance abuse)</b>		
<b>Outpatient surgery (including ambulatory surgical centers)</b>	<b>Lower member cost share:</b> \$200 hospital copay <b>Higher member cost care:</b> \$400 hospital copay	20% of the allowed amount subject to annual deductible; not covered in Alabama
<b>Lab and X-ray</b>	0% of the allowed amount; no copay or deductible	20% of the allowed amount subject to calendar year deductible



## Prescription plan—Blue Cross Blue Shield of Alabama

Plan provision	In-network
<b>Prescription drug benefits (includes mental health and substance abuse)*</b>	
	<ul style="list-style-type: none"><li>• <b>Generic drugs:</b> \$15 copay per prescription</li><li>• <b>Preferred brand drugs:</b> \$40 copay per prescription</li><li>• <b>Other brand drugs:</b> \$60 copay per prescription</li><li>• <b>Specialty drugs:</b> \$100 copay per prescription</li></ul>
<b>Mail order pharmacy benefits</b> <ul style="list-style-type: none"><li>• Up to 90-day supply with one copay</li><li>• Mail order drugs are available through PrimeMail® (Enroll online at <a href="https://www.bcbsal.com">bcbsal.com</a> or call 877 579 7627)</li></ul>	<ul style="list-style-type: none"><li>• <b>Generic drugs:</b> \$37.50 copay per prescription</li><li>• <b>Preferred brand drugs:</b> \$100 copay per prescription</li><li>• <b>Other brand drugs:</b> \$150 copay per prescription</li><li>• <b>Specialty drugs:</b> Not covered</li></ul>

\*Out-of-network prescription drugs are not covered.



# Medical and prescription plans

## Hawaii Medical Service Association (HMSA)

800 776 4672

Group number—32908-1-4

Stryker Employment

Company LLC

[hmsa.com](https://hmsa.com)

### Medical plan—Hawaii Medical Service Association

Hawaii Medical Service Association (HMSA) is only available to employees who reside in the state of Hawaii. Benefits are subject to change.

Plan provision	In-network	Out-of-network
<b>Annual deductible</b>		
Employee	\$350	\$350
Family	\$1,050	\$1,050
<b>Annual medical out-of-pocket maximum</b>		
Employee	\$3,000	\$3,000
Family	\$9,000	\$9,000
<b>Annual prescription drug out-of-pocket maximum</b>		
Employee	\$3,600	\$3,600
Family	\$4,200	\$4,200





## Medical and prescription plan—Hawaii Medical Service Association (continued)

Medical plan	In-network	Out-of-network
	You pay	You pay
<b>Preventive care*</b>	No charge	30% after deductible
<b>Office visits</b> Primary care and specialist	\$17 copay	30% after deductible
<b>Mental health and substance abuse treatment</b>		
Inpatient		
Physician services	20% after deductible	30% after deductible
Hospital and facility services	20% after deductible	30% after deductible
Outpatient		
Physician services	\$17 copay	30% after deductible
Hospital and facility services	20% after deductible	30% after deductible
<b>Emergency care</b>		
Physician services	\$17 copay	\$17 copay
Emergency room	20% after deductible	20% after deductible
Emergency medical transportation (ground/air)	20% after deductible	30% after deductible
<b>Hospital service</b> Inpatient and outpatient	20% after deductible	30% after deductible
<b>Lab and X-ray</b>	20% after deductible	30% after deductible

\*Age and frequency limitations may apply.

Prescription plan	In-network		Out-of-network	
	Retail— 30-day supply	Mail order— 90-day supply	Retail— 30-day supply	Mail order— 90-day supply
<b>Tier 1</b>	\$7 copay	\$11 copay	\$7 copay; then 20% coinsurance	Not covered
<b>Tier 2</b>	\$30 copay	\$65 copay	\$30 copay; then 20% coinsurance	Not covered
<b>Tier 3</b>	\$30 copay	\$65 copay	\$30 copay; then 20% coinsurance	Not covered
<b>Tier 4</b>	\$100 copay	Not covered	Not covered	Not covered
<b>Tier 5</b>	\$200 copay	Not covered	Not covered	Not covered

For more information  
about HMSA prescription  
drug coverage, visit  
[hmsa.com](https://hmsa.com).



# Supplemental health benefits

**Transamerica Life  
Insurance Company**

800 626 9069

Group number—G000042560

[totalrewards.stryker.com](https://totalrewards.stryker.com)

Even with comprehensive coverage from your primary medical plan, you will still have some out-of-pocket expenses if you get critically ill or are seriously injured.

Supplemental health insurance offers additional protection to help you pay for these expenses, and is intended to supplement your primary medical plan by providing payments in the event of a significant illness, accident or hospital stay. We offer three supplemental health policies to all regular employees scheduled to work 20 hours or more per week:

- Critical illness insurance
- Accident insurance
- Hospital indemnity insurance

You can find more information about supplemental health insurance and how the policies work on the next few pages, or by visiting [totalrewards.stryker.com](https://totalrewards.stryker.com).

Supplemental benefit policies are offered by Transamerica and are not ERISA-covered group health insurance plans. Enrollment is completely voluntary. If you enroll in a policy, you must deal directly with the insurance company to request assistance or submit a claim.







# Critical illness insurance

## Transamerica Life Insurance Company

800 626 9069

Group number—G000042560

[totalrewards.stryker.com](https://totalrewards.stryker.com)

If you experience a covered illness, critical illness insurance provides a lump-sum benefit payment of up to \$15,000 to help cover out-of-pocket expenses not covered by your medical plan.

### Underwritten by Transamerica Life Insurance Company

Benefits will vary by disease or illness, with some ailments paying out a smaller lump-sum. To learn more about how this policy works, including specific benefit payment amounts, go to [totalrewards.stryker.com](https://totalrewards.stryker.com). Covered illnesses include, but are not limited to:

- Heart attack
- Stroke
- Coronary artery bypass surgery
- Major organ transplant
- End stage renal failure
- Alzheimer's Disease
- Second diagnosis of a covered critical illness or cancer

**Note:** Some illnesses are only eligible for a percentage of the benefit payment amount. Please reference your policy brochure for additional details.

Limitations and exclusions may apply. [Learn more.](#)

This is a brief summary of CriticalEvents® Critical illness indemnity insurance **underwritten by Transamerica Life Insurance Company (TLIC)**, Cedar Rapids, IA. TLIC is not an authorized insurer in New York. Policy Form Series TMCI1000-0118 and TCCI1000-0118. Forms and numbers may vary. Insurance may not be available in all jurisdictions. Limitations and exclusions apply. Refer to the policy, certificate and riders for complete details.

Supplemental benefit policies are offered by Transamerica and are not ERISA-covered group health insurance plans. Enrollment is completely voluntary. If you enroll in a policy, you must deal directly with the insurance company to request assistance or submit a claim.







# Accident insurance

Accident insurance pays you a cash benefit to help cover out-of-pocket medical and other expenses, so you can focus on getting well. The amount you receive is dependent on the type of injury as well as the treatment needed. To learn more about how this policy works, including specific benefit payment amounts, go to [totalrewards.stryker.com](https://totalrewards.stryker.com).

This is a brief summary of AccidentAdvance® accident-only insurance **underwritten by Transamerica Life Insurance Company (TLIC)**, Cedar Rapids, IA. TLIC is not an authorized insurer in New York. Policy Form Series CPACC100 and CCACC200-0118. Forms and numbers may vary. Insurance may not be available in all jurisdictions. Limitations and exclusions apply. Please refer to the policy, certificate and riders for complete details.

Supplemental benefit policies are offered by Transamerica and are not ERISA-covered group health insurance plans. Enrollment is completely voluntary. If you enroll in a policy, you must deal directly with the insurance company to request assistance or submit a claim.

## Underwritten by Transamerica Life Insurance Company

Accident insurance includes, but is not limited to, benefits for the following:

- Fracture and dislocation
- Hospital confinement
- Emergency room services
- And more

Limitations and exclusions may apply.

[Learn more.](#)



## Transamerica Life Insurance Company

800 626 9069

Group number—G000042560

[totalrewards.stryker.com](https://totalrewards.stryker.com)



# Hospital indemnity insurance

Spending time in a hospital, especially for an extended stay, can be expensive and cause lasting financial strain. Hospital indemnity insurance is an easy way to get added financial protection to help you pay for medical or ongoing living expenses. This money can help offset the hospital bill, take care of day-to-day expenses or pay for anything else you need while you are in the hospital.

**This is not major medical insurance and is not a substitute for major medical insurance. It does not qualify as minimum essential health coverage under the federal Affordable Care Act.**

This is a brief summary of Hospital Select® II hospital indemnity insurance policy **underwritten by Transamerica Life Insurance Company (TLIC)**, Cedar Rapids, IA. TLIC is not an authorized insurer in New York. Policy Form Series TMHI1000-0118. Forms and numbers may vary. Insurance may not be available in all jurisdictions. Limitations and exclusions apply. Refer to the policy, certificate and riders for complete details.

Supplemental benefit policies are offered by Transamerica and are not ERISA-covered group health insurance plans. Enrollment is completely voluntary. If you enroll in a policy, you must deal directly with the insurance company to request assistance or submit a claim.

## Underwritten by Transamerica Life Insurance Company

Below are a few examples of how your hospital indemnity insurance could be used (policy amounts may vary):

- Medical expenses, such as deductibles and copays
- Travel, food and lodging expenses for family members
- Child care
- Everyday expenses like utilities and groceries

Limitations and exclusions may apply.

[Learn more.](#)

For more information on how this insurance works, go to [totalrewards.stryker.com](https://totalrewards.stryker.com).

## Transamerica Life Insurance Company

800 626 9069

Group number—G000042560

[totalrewards.stryker.com](https://totalrewards.stryker.com)





# Dental plan—Delta Dental

Healthy teeth and gums are important to your overall wellbeing, and the dental plan from Delta Dental can help you maintain your dental health. The plan pays for most preventive and diagnostic care and helps cover the cost of basic and major restorative treatments.

With the Delta Dental PPO Plan, you have the freedom to choose any provider you wish, but you may save more money and receive a higher level of coverage when you see an in-network Delta Dental PPO or Delta Dental Premier dentist. Be sure to check for a network provider that is accepting new patients, which will be noted when searching for a provider at [deltadentalmi.com](https://deltadentalmi.com).

## Delta Dental plan

### Annual deductible

Employee	\$50
Employee + 1	\$100
Family	\$150

### Annual out-of-pocket maximum

Per calendar year excluding orthodontics	\$2,000
Lifetime maximum benefit paid for orthodontics	\$2,000

## Delta Dental of Michigan Delta Dental Premier and PPO

800 524 0149

Group number—5480

[deltadentalmi.com](https://deltadentalmi.com)

Learn more about  
your dental benefits  
and find a full list of  
covered services on  
[totalrewards.stryker.com](https://totalrewards.stryker.com).





## Dental plan—Delta Dental (continued)

Delta Dental plan		
	PPO dentist/ Premier dentist	Nonparticipating dentist*
	You pay	You pay
<b>Class I benefits</b> <ul style="list-style-type: none"><li>• Diagnostic and preventive services (includes exams, cleanings, fluoride, and space maintainers)</li><li>• Emergency palliative treatment (to temporarily relieve pain)</li><li>• Radiographs/X-rays</li></ul>	0%	0%
<b>Class II benefits</b> <ul style="list-style-type: none"><li>• Minor restorative services (includes fillings)</li><li>• Oral surgery services (extractions and dental surgery)</li><li>• Relines and repairs (to bridges and dentures)</li></ul>	20%	20%
<b>Class III benefits</b> <ul style="list-style-type: none"><li>• Major restorative services (includes crowns)</li><li>• Implants (endosteal implants to replace missing teeth)</li></ul>	50%	50%
<b>Class IV benefits</b> <ul style="list-style-type: none"><li>• Orthodontic services (includes braces)</li><li>• Orthodontic age limit (unless medically necessary)</li></ul>	50% To age 19	50% To age 19

\*When you receive services from a Nonparticipating Dentist, the percentages in this column indicate the portion of Delta Dental's Nonparticipating Dentist Fee that you will pay for those services. The eligible Nonparticipating Dentist Fee may be less than what the Dentist charges or Delta Dental approves and you are responsible for that difference.





# Vision plan—EyeMed

Your vision benefits are so much more than an eye exam—they can help you save money and stay healthy. Even if you don't wear glasses or need corrective lenses, your eyesight can change at any time. Some serious health problems can show early signs through your eyes, so it's important to take advantage of your vision plan.

## EyeMed Vision Care

866 939 3633

Group number—9706201

[eyemed.com](https://eyemed.com)

EyeMed Vision Care		
	In-network	Out-of-network
<b>Exam with dilation as necessary</b>	\$0 copay	Up to \$35
<b>Frames</b>	\$150 allowance; you pay 80% of balance over \$150	Up to \$45
<b>Standard plastic lenses</b>		
Single vision	\$20 copay	Up to \$40
Bifocal	\$20 copay	Up to \$60
Trifocal	\$20 copay	Up to \$80
Lenticular	\$20 copay	Up to \$80
<b>Contact lenses</b> (in lieu of standard plastic lenses)		
Conventional	\$150 allowance; you pay 85% of balance over \$150	Up to \$105
Disposables	\$150 allowance; you pay balance over \$150	Up to \$105
If medically necessary	Paid in full	Up to \$210
<b>Service frequency</b>		
Exam with dilation	Once every calendar year	
Frames	Once every calendar year	
Standard plastic lenses or contacts	One set of lenses or contacts every calendar year	



# Flexible Spending Accounts (FSAs)

Flexible Spending Accounts (FSAs) allow employees to contribute to an account through pre-tax deductions from each paycheck. The money accumulated can be used for reimbursement of out-of-pocket health or day care (child and adult) expenses.

## Healthcare Flexible Spending Account (HCFSA)

The minimum annual contribution is \$100 and the maximum is \$3,050. Examples of eligible expenses include but are not limited to the following: copayments, coinsurance amounts, hearing exams, hearing aids and laser eye surgery.

You can participate in an HCFSA as long as you are not participating in an HSA.

## Day Care (child and adult) Flexible Spending Account (DCFSA)

The minimum annual contribution is \$100 and the maximum is \$5,000. Examples of eligible expenses include but are not limited to the following: day care center charges for a child or an incapacitated elderly adult, after-school care, baby-sitter charges during the hours when the employee and spouse/domestic partner are working, looking for work, attending school full-time or disabled.

The DCFSA is available to all benefits-eligible employees.

## UnitedHealthcare

800 387 7508

Group contract

number—703998

A list of eligible expenses can be found at [myuhc.com](https://myuhc.com) or visit [irs.gov](https://irs.gov) and see [Publication 502](#). **Please note that the funds you contribute to a flexible spending account are subject to IRS and plan rules. Please see the summary plan description for claims filing deadlines and forfeiture rules.**





# Health Savings Account (HSA)

The Health Savings Account (HSA) is a triple tax-advantaged savings account available to employees enrolled in either the Premium HSA Plan or the Basic HSA Plan.

- Employees contribute to the account through pre-tax deductions from each paycheck (lowering your taxable income).
- Funds can be withdrawn tax-free to pay for eligible healthcare expenses and money in the account rolls over from year to year.
- Once you reach a balance of \$2,100, you have the option to invest some of your balance and potentially grow your account with tax-free earnings.

## Employee and employer contributions

Stryker also makes an annual contribution to your HSA each year you are enrolled in a Stryker HSA medical plan and your account is successfully opened at Optum<sup>1,2</sup>. You and Stryker can contribute up to the annual IRS limit. The Stryker contribution amount will vary based on the plan you choose and your coverage tier. See [page 5](#) for details.

There are limits on how much you and Stryker, together, can contribute to your account. The limits for 2024 are:

- \$4,150 annually for individual coverage
- \$8,300 annually if you cover your spouse/domestic partner or dependents
- An additional \$1,000 per year as a catch-up contribution, if you are age 55 or older

## Optum Bank

800 387 7508

Group number—703997

[myuhc.com](https://myuhc.com)

For more information, visit [irs.gov](https://irs.gov) and see Publication 969 or contact the myHR Team.

A list of eligible expenses can be found at [myuhc.com](https://myuhc.com) or visit [irs.gov](https://irs.gov) and see [Publication 502](#).

<sup>1</sup> Direct temporary employees and interns are not eligible for Stryker HSA funding but are eligible to elect and contribute their own funds to the account.

<sup>2</sup> If you enroll during the Annual Enrollment period, Stryker's contribution will be available in your account by January 31, 2024. If you are a new hire or have a qualifying life event that allows you to enroll in an HSA plan mid-year, your Stryker contribution will be deposited as soon as administratively possible and is typically made after the first payroll following the effective date of your enrollment in a qualifying medical plan. If you enroll in an HSA mid-year, you may only be eligible to contribute a prorated amount. Visit [totalrewards.stryker.com](https://totalrewards.stryker.com) for more information.



# Personalized healthcare support

## Included Health

855 431 5551

[includedhealth.com/stryker](https://includedhealth.com/stryker)

Included Health is a confidential service that can ease your healthcare journey by putting personalized healthcare support at your fingertips.

When you need medical care, Included Health can find high quality in-network providers, make sure those providers are accepting new patients, and book an appointment for you. But it doesn't stop there. Included Health can do much more for you, including:

- Provide expert answers to your health questions by phone.
- Offer treatment decision support for any sort of diagnosis.
- Connect you to a free, personalized, comprehensive remote expert second opinion from their panel of world-class physicians.
- Help you better understand and find behavioral/mental health resources.
- Refer you to other Stryker benefits.

These services are available at no cost for our medical plan participants and covered dependents. To activate your account with Included Health, visit [includedhealth.com/stryker](https://includedhealth.com/stryker) or call 855 431 5551.

## LGBTQ+ Health

Included Health's LGBTQ+ Health program is designed with the unique, specialized health needs of the LGBTQ+ community in mind. LGBTQ+ Health can help:

- Schedule appointments.
- Understand what is covered under your benefits.
- Find resources and support groups for coming out at work or parenting an LGBTQ+ child.
- Start or grow your family.
- Navigate gender-affirming care.

## Black Health

Included Health's Black Health program is an inclusive care navigation and advocacy service focused on health equity and culturally competent care by:

- Connecting people to high-quality, culturally-affirming providers.
- Offering convenient digital or phone-based service.
- Assigning a dedicated care coordinator.

**The LGBTQ+ and Black Health programs are available at no cost to all U.S. benefit-eligible employees and dependents, even those not enrolled in one of Stryker's medical plans.**





# Wellbeing program

Use Strive, Stryker's wellbeing program, to learn about, implement and maintain healthy habits.

**strive**  
for wellbeing

## Strive

833 643 0408

[strive.stryker.com](https://strive.stryker.com)

There are several aspects of the Strive program and each one will contribute to your overall wellbeing. Choose what you want to work on, track your progress and earn points toward great rewards.

- **Daily cards**—Easy-to-digest information that will improve your wellbeing knowledge and inspire you.
- **Healthy habits**—Track habits to reinforce healthy behaviors.
- **Journeys**—Digital coaching that covers lifestyle topics including nutrition, physical activity, sleep, stress and financial wellbeing.
- **Challenges**—Challenge yourself, challenge others and join team challenges to keep your motivation and accountability up.

## Wellbeing partners

Within Strive, you'll find four valuable resources to help you reach your potential and stay accountable to your wellbeing goals.

- **Ayco (financial wellbeing partner)**—Participate in one-on-one financial coaching and find tools and resources that will help you manage your finances including taxes, investment planning and achieving financial goals.
- **Foodsmart (nutrition partner)**—Receive personalized nutrition guidance and create custom meal plans from simple, tasty recipes you'll love.
- **RethinkCare (mindfulness partner)**—RethinkCare is a goal-based mindfulness program that can help you learn to meditate and retrain your brain to react more positively in your daily life.
- **Wellbeats (physical wellbeing partner)**—Join over 600 workout classes on demand including yoga, HIIT, strength training and walking/running.



# Tobacco cessation program

We are committed to promoting the health and wellbeing of our employees and their families. The goal of our healthcare program is not only to make sure you have access to the services you need when you are sick, but to help you live a healthier life. If you need help quitting tobacco, you can participate in the Strive tobacco cessation journeys available at [strive.stryker.com](https://strive.stryker.com).

**Strive**

833 643 0408

[strive.stryker.com](https://strive.stryker.com)





# Employee Assistance Program (EAP)

TELUS Health (formerly known as LifeWorks), Stryker's Employee Assistance Program (EAP) provider, offers a range of services to assist you with daily concerns including, but not limited to: stress and depression, living wills, investment/retirement planning, paying for higher education, work relationships, childcare options and referrals, single parenting and blended families, elder care options, living with a disability and substance abuse.

TELUS Health will deliver practical solutions, information, advice and support to manage the demands of everyday life. This program is confidential, is available at no cost to employees and their families and includes up to five free counseling sessions.

## TELUS Health

866 785 4572

[stryker.lifeworks.com](https://stryker.lifeworks.com)

User ID: stryker

Password: 4260





# Group life insurance

Planning ahead for your family's financial security is important, in case the unexpected happens. That's why Stryker provides basic life insurance and accidental death and dismemberment (AD&D) insurance—at no cost to you—to help protect you and your loved ones.

## Basic life and AD&D

Eligible employees are provided with basic term life and accidental death and dismemberment (AD&D) insurance, fully paid for by Stryker. The basic coverage amount for both life and AD&D is equal to one times your eligible annual earnings (up to a maximum of \$500,000).

## Supplemental life insurance

Eligible employees can purchase supplemental life insurance through payroll deductions on an after-tax basis. The coverage is available from one times up to five times of the employee's eligible annual earnings, with a maximum of \$1,500,000. The cost of the coverage is based on your age and your income and can be found on the Benefits Enrollment Site ([enroll.stryker.com](https://enroll.stryker.com)).

## Spouse/domestic partner and dependent life insurance

Eligible employees may choose to elect life insurance for their spouse/domestic partner and/or child(ren)/domestic partner's child(ren). Coverage is multiples of \$10,000 (up to a maximum of \$100,000) for a spouse/domestic partner and \$10,000 for each child (\$1.04 per month), regardless of the number of children. The employee will pay the full cost of the life insurance coverage on an after-tax basis. Dependents do not have to be enrolled in Stryker's health plan in order to be eligible for dependent life insurance. The beneficiary is automatically the employee. All spouse/domestic partner life insurance elections over \$30,000 will be required to provide evidence of insurability (EOI). Child life insurance is not subject to EOI.

**Unum**

Group number—940919

**You can designate and update your life insurance beneficiaries at any time via [enroll.stryker.com](https://enroll.stryker.com).**

**Please visit the Summary Plan Description at [totalrewards.stryker.com/spd](https://totalrewards.stryker.com/spd) for details on Guaranteed Issue amounts and policy details.**





# Short-term and long-term disability

Short-term and long-term disability is provided at no cost to eligible employees. Unum's disability professionals will review medical information and make a determination on whether the disability claim can be approved.

## Short-term disability

Employees are eligible for one day up to 180 days of disability benefits if approved by Unum. The maximum length of disability payments is 180 days. Short-term disability is coordinated with state disability benefits if applicable.

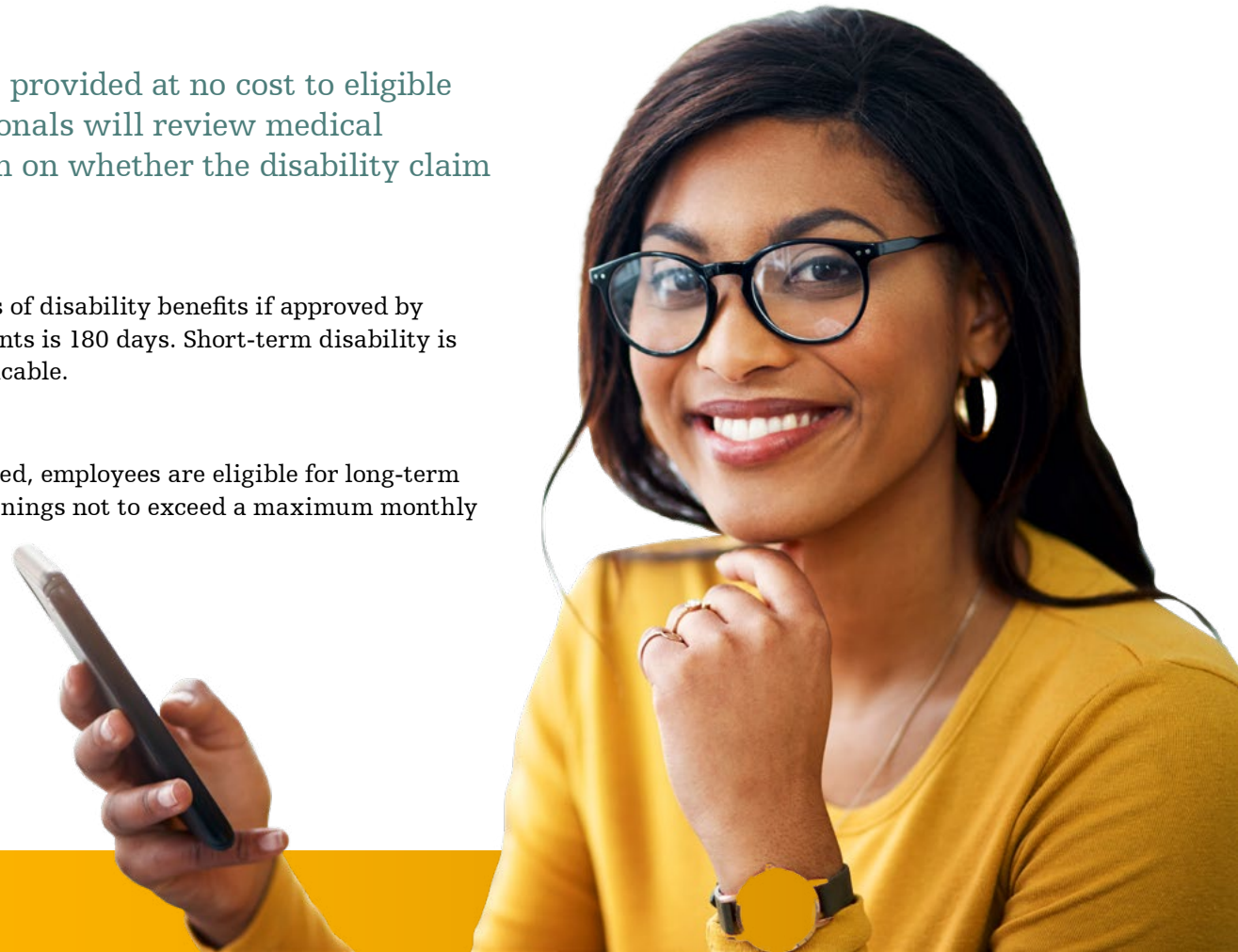
## Long-term disability

After the short-term disability benefit is exhausted, employees are eligible for long-term disability benefits with 60% of basic monthly earnings not to exceed a maximum monthly benefit of \$15,000, if approved by Unum. When an individual is eligible for Social Security, the benefit will be coordinated with the Social Security benefit and an individual will never receive more than 60% of earnings.

### Unum

Short-term disability  
Group number—940918

Long-term disability  
Group number—940915

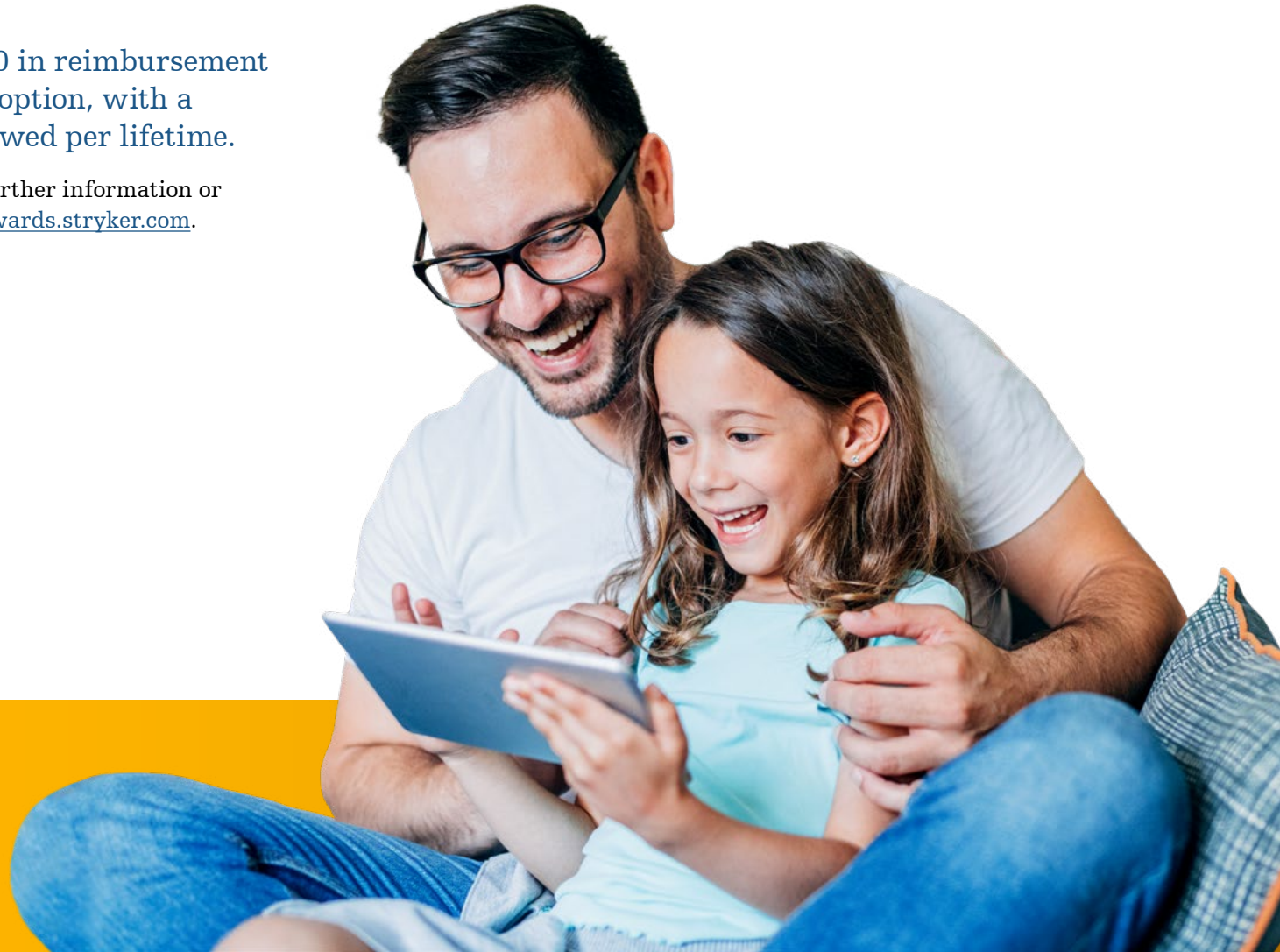




# Adoption assistance

Stryker provides up to \$5,000 in reimbursement for expenses related to an adoption, with a maximum of two claims allowed per lifetime.

Please contact the myHR Team for further information or visit the Work/life section of [totalrewards.stryker.com](https://totalrewards.stryker.com).



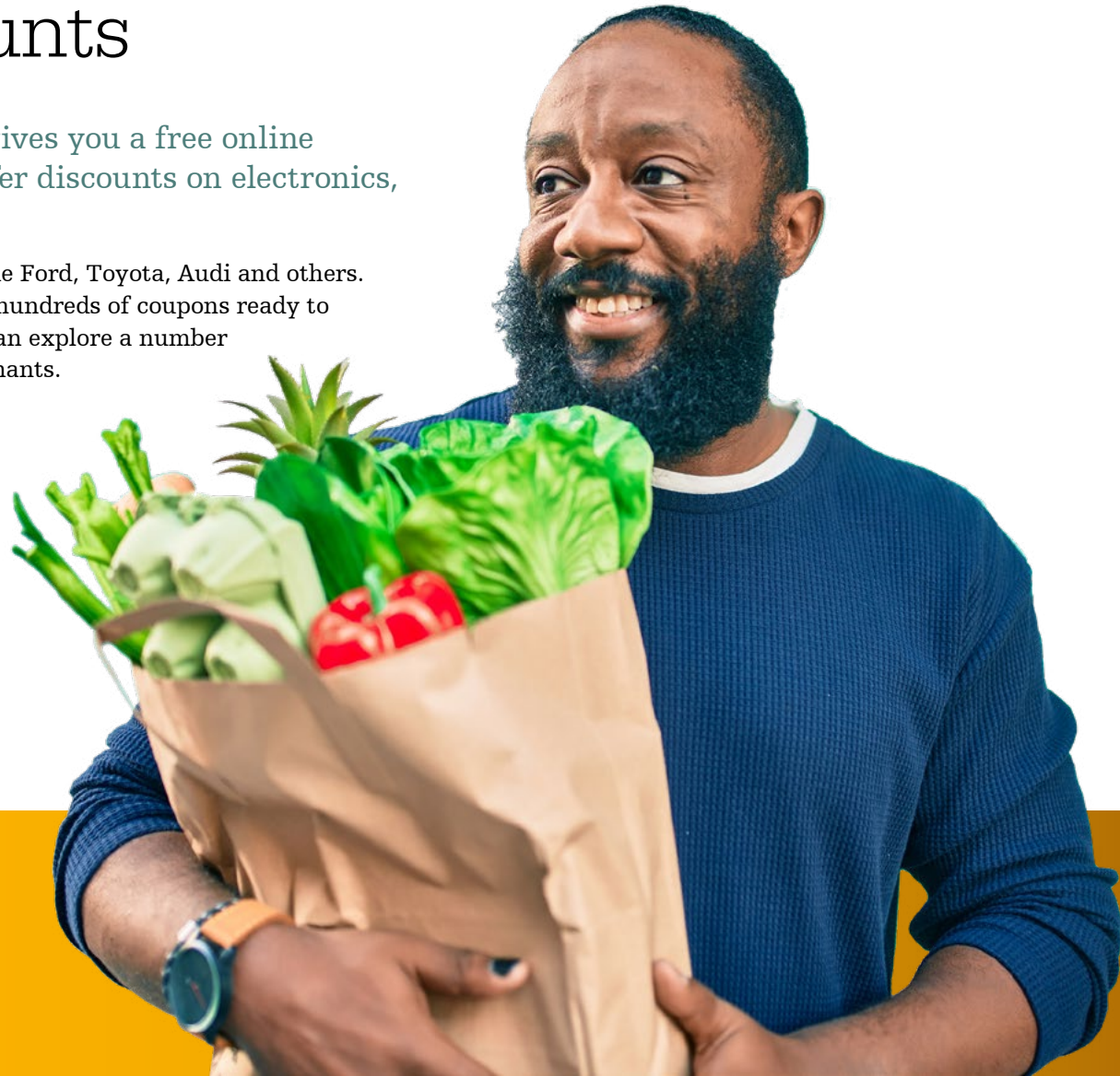


# Employee discounts

Our employee discount vendor, PerkSpot, gives you a free online platform where hundreds of merchants offer discounts on electronics, apparel, travel, automotive and more.

Looking for a new car? PerkSpot auto merchants include Ford, Toyota, Audi and others. Grocery shopping? On the PerkSpot website you'll find hundreds of coupons ready to clip, as well as discounts on meal-kit companies. You can explore a number of local deals and even request new participating merchants.

Visit the Employee Discounts page on [totalrewards.stryker.com](https://totalrewards.stryker.com) to learn more about all of discounts and programs available to you.







# Tuition reimbursement plan

Stryker supports reimbursement for educational programs that maintain and improve an employee's skills in their current job or in future work within the company. Eligible employees in good standing are eligible to participate after completing one year of service.

In order to be eligible for reimbursement, the Tuition Reimbursement Approval form must be properly submitted to your manager and the myHR Team for approval before your classes begin. The maximum reimbursement amount per employee is \$15,000 per calendar year.

Stryker will also reimburse certain additional costs, including books.

IRS regulations require you to be taxed on any tuition reimbursement received in any tax year over \$5,250. Please refer to the Summary Plan Description for additional plan limits.







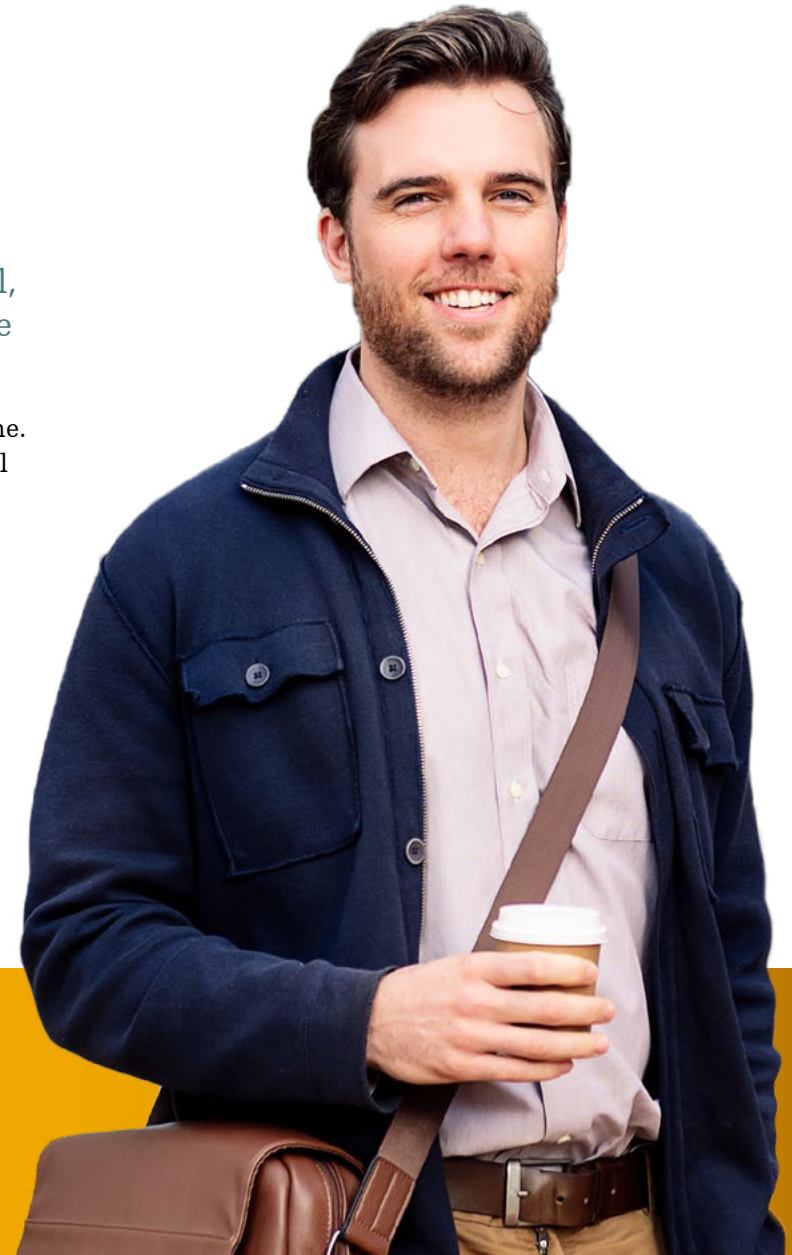
# Commuter benefits

Commuter benefits are tax-advantaged accounts for qualified commuting expenses. If you get to and from work on a bus, rail, subway or vanpool, or if you have to pay to park your car at the office, take a look at how the program can help.

Unlike other tax-advantaged benefits, you can activate commuter benefits any time. Pause, change or update your benefit election monthly. No need to wait for annual enrollment. And, there's no "use it or lose it" rule for your commuter funds.

You can elect to contribute up to the monthly IRS limit of \$300 for transit and \$300 for parking. Decide the amount you want to contribute, and the money is deducted from your paycheck, before taxes are taken out.

To learn more, enroll in the program or manage your account, visit [HealthEquity](#).





# 401(k) plan

Stryker is committed to supporting your financial wellbeing, which is why we provide the Stryker Corporation 401(k) Savings and Retirement Plan to help you prepare for retirement by offering an easy, tax-advantaged way to save for your future financial needs.

Employees who are at least 18 years of age are eligible to participate in the 401(k) plan. The plan has an auto enrollment feature, which means 3% of pre-tax earnings will be deducted as a 401(k) contribution, beginning approximately 30 days after an employee's first paycheck. Additionally, each March (or a month of the participant's choice) the deferral rate will be increased by 1%, until the deferral rate reaches 15%. Employees may enroll at a higher rate, change the investment allocation or opt out of the 401(k) at any time after they receive their welcome letter from Vanguard. **Please be sure to enter your beneficiary information on [vanguard.com](https://vanguard.com) or request a beneficiary form from Vanguard by calling them directly.**

## Contributions

Participants can choose to make pre-tax contributions, Roth after-tax contributions or a combination of pre-tax and Roth contributions. Pre-tax contributions will not be subject to current federal or state income tax. A roll-in provision is also available for employees.

## Company matching contributions

Stryker provides a matching contribution on the first 8% of eligible pay contributed by each participant, equal to \$.50 for every \$1.00 the participant contributes. Thus, the maximum matching contribution is 4%. Any eligible pay contributed by the participant above the applicable limit is not matched. All matching contributions require that the participant be credited with 1,000 hours of service during the year and remain employed on the last day of the plan year.

## Vanguard

800 523 1188

Plan number—090081

[vanguard.com](https://vanguard.com)

## Company discretionary contributions

At the end of each plan year, the company will decide on the amount of its discretionary contribution for that year. **No discretionary contribution is required to be made by the company.** Those employees in a sales representative role are not eligible for the company discretionary contribution. All discretionary contributions require that the participant be credited with 1,000 hours of service during the year and remain employed on the last day of the plan year.

## Additional information

Additional information with regard to rollovers, taxation and catch-up contributions can be found in the 401(k) Summary Plan Description. You can also find more information about your 401(k) plan, including company contributions, vesting, investment choices and more on [totalrewards.stryker.com](https://totalrewards.stryker.com) in the Money section.



# Employee Stock Purchase Plan (ESPP)

Employees who are at least 18 years of age are eligible to participate in the Employee Stock Purchase Plan (ESPP). Employees may purchase Stryker stock at a 5% discount from Fair Market Value through the ESPP. Stryker pays all fees for stock purchases through this plan. Enrollment/change periods are the first 15 days of every month. Please refer to the [ESPP Explanatory Guide](#) for more information.

For more details visit [totalrewards.stryker.com/spd](https://totalrewards.stryker.com/spd), or visit the Money section of [totalrewards.stryker.com](https://totalrewards.stryker.com).

For questions, contact the myHR Team.

**Computershare**

800 639 0119

[www-us.computershare.com/  
employee](https://www-us.computershare.com/employee)





## Cost of coverage

Completion of the Tobacco Use Affidavit is required if electing medical coverage. An additional \$50 monthly Tobacco Use Surcharge will be added if you or your covered spouse/domestic partner are tobacco users and have not completed a tobacco cessation journey in Strive or other physician-directed program.

For part-time employee costs of coverage, visit [enroll.stryker.com](https://enroll.stryker.com) or contact the myHR Team.

### Medical, dental and vision plans (monthly full-time employee costs)

	Employee only	Employee + 1	Family
<b>UHC Choice PPO Plan</b>	\$154	\$301	\$472
<b>UHC Value PPO Plan</b>	\$135	\$262	\$413
<b>UHC Premium HSA Plan</b>	\$117	\$220	\$349
<b>UHC Basic HSA Plan</b>	\$63	\$84	\$115
<b>UHC Out-of-Area Plan</b>	\$150	\$294	\$461
<b>Kaiser Permanente of Northern California</b>	\$201	\$368	\$579
<b>Kaiser Permanente of Southern California</b>	\$152	\$268	\$398
<b>Blue Cross Blue Shield of Alabama</b>	\$178	\$328	\$485
<b>Hawaii Medical Service Association</b>	\$33	\$311	\$484
<b>Delta Dental</b>	\$20	\$40	\$60
<b>EyeMed Vision</b>	\$5	\$10	\$15

### Supplemental life insurance

The cost of the coverage is based on your age and your income and can be found on the Benefits Enrollment Site ([enroll.stryker.com](https://enroll.stryker.com)).

### Spouse/domestic partner life insurance (monthly full-time employee costs)

<b>\$10,000</b>	\$1.28 per month	<b>\$60,000</b>	\$7.70 per month
<b>\$20,000</b>	\$2.57 per month	<b>\$70,000</b>	\$8.98 per month
<b>\$30,000</b>	\$3.85 per month	<b>\$80,000</b>	\$10.26 per month
<b>\$40,000</b>	\$5.13 per month	<b>\$90,000</b>	\$11.55 per month
<b>\$50,000</b>	\$6.42 per month	<b>\$100,000</b>	\$12.83 per month

(Continued on the [next page](#))



## Cost of coverage (continued)

### Dependent life insurance (monthly full-time employee costs)

Each child (\$10,000 of coverage)	\$1.04 per month (regardless of the number of children)
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### Critical illness insurance (monthly employee costs)

Age of employee	Employee	Employee + child(ren) (one-parent family)	Employee + spouse/domestic partner/Family (two-parent family)
<b>Under 25</b>	\$2.90	\$3.20	\$3.35
<b>25 – 29</b>	\$3.35	\$3.65	\$4.10
<b>30 – 34</b>	\$3.65	\$3.95	\$4.55
<b>35 – 39</b>	\$4.40	\$4.70	\$5.75
<b>40 – 44</b>	\$5.90	\$6.20	\$8.30
<b>45 – 49</b>	\$9.20	\$9.50	\$12.95
<b>50 – 54</b>	\$12.65	\$12.95	\$18.35
<b>55 – 59</b>	\$18.05	\$18.35	\$26.30
<b>60 – 64</b>	\$24.50	\$24.80	\$36.20
<b>65+</b>	\$44.30	\$44.60	\$65.90

### Accident insurance (monthly employee costs)

Employee	\$5.03
Employee + spouse/domestic partner	\$7.76
Employee + child(ren)	\$6.74
Family	\$9.70

### Hospital indemnity insurance (monthly employee costs)

Employee	\$8.92
Employee + spouse/domestic partner	\$18.42
Employee + child(ren)	\$12.88
Family	\$20.80



# Need more information?

- Contact the myHR Team at [myhr.stryker.com](https://myhr.stryker.com) or call 877 795 2002.
- Visit [totalrewards.stryker.com](https://totalrewards.stryker.com).



The benefits outlined in this document are summaries only and are subject to the actual provisions of the respective plan documents in effect covering such benefits. Stryker reserves the right to alter, modify, amend, or terminate these benefits within the law, in a manner in which we believe to be in our and our associates' best interest as affected by business conditions. If there are any differences between the information in this summary and the plan documents or contracts, the plan document or contract will prevail.

