



2025

Benefits at a Glance



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

Updated: 10/10/25

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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 > Forms and documents > Additional forms and documents. You can find full details in the plan certificates and summary plan descriptions on 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.

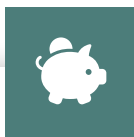
Your Total Rewards

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
- Medical benefits abroad
- 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
- Life insurance plus long-term care



Work/Life

- 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.



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.

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	\$450	\$900	\$850	\$1,700	\$450
Employee + 1	\$900	\$1,800	\$1,700	\$3,400	\$900
Family	\$1,350	\$2,700	\$2,550	\$5,100	\$1,350
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

*The allowed amount for an out-of-network claim is developed using reference-based methodology from Naviguard. Call UnitedHealthcare to find out if Naviguard can assist you with negotiations and other billing assistance.

UnitedHealthcare Choice Plus Network

800 387 7508

Group number—703997

myuhc.com

Plans may vary by ZIP code. Please refer to your Summary Plan Description (SPD) available at 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
Preventive care	\$0 copay	40% not subject to deductible	\$0 copay
Office visits			
Primary care	\$25 copay	40% after deductible	20% after deductible
Specialist	\$40 copay	40% after deductible	20% after deductible
Mental health and substance abuse treatment**			
Office visit	\$25 copay	40% after deductible	20% after deductible
Outpatient	20% after deductible	40% after deductible	20% after deductible
Inpatient	20% after deductible	40% after deductible	20% after deductible
Emergency care			
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
Hospital service			
Inpatient/outpatient	Prior authorization required 20% after deductible	Prior authorization required 40% after deductible	Prior authorization required 20% after deductible
Lab and x-ray	20% after deductible (preventive covered at 100%)	40% after deductible	20% after deductible (preventive covered at 100%)

*The allowed amount for an out-of-network claim is developed using reference-based methodology from Naviguard. Call UnitedHealthcare to find out if Naviguard can assist you with negotiations and other billing assistance.

**In general, your network provider must obtain prior authorization from UnitedHealthcare, as described in the Summary Plan Description at 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			
	Tier 1	Tier 2	Tier 3	Drug formulary required?
Retail—30-day supply	\$10	\$25	\$50	Yes
Retail—90-day supply	\$30	\$75	\$150	Yes
Mail order—90-day supply (in-network only)	\$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.



Medical and prescription plans

UnitedHealthcare Choice Plus Network

800 387 7508

Group number—703997

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	
2025 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	\$1,800	\$3,600	\$2,500	\$5,000
All other coverage tiers	\$3,600	\$7,200	\$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.

**The allowed amount for an out-of-network claim is developed using reference-based methodology from Naviguard. Call UnitedHealthcare to find out if Naviguard can assist you with negotiations and other billing assistance.



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
Preventive care	0%	40% not subject to deductible	0%	50% not subject to deductible
Office visits Primary care and specialist	20% after deductible	40% after deductible	30% after deductible	50% after deductible
Mental health and substance abuse treatment Inpatient and outpatient	20% after deductible	40% after deductible	30% after deductible	50% after deductible
Emergency care 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
Hospital service 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
Lab and x-ray	20% after deductible	40% after deductible	30% after deductible	50% after deductible

*The allowed amount for an out-of-network claim is developed using reference-based methodology from Naviguard. Call UnitedHealthcare to find out if Naviguard can assist you with negotiations and other billing assistance.

In general, your network provider must obtain prior authorization from UnitedHealthcare, as described in the Summary Plan Description at 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...	If your deductible has been met...				
In-network	You pay the full cost of your prescription drugs until your in-network medical plan deductible is met.	You pay the applicable coinsurance amount for your prescription drugs until your in-network out-of-pocket maximum has been reached. The in-network coinsurance amounts are: <table><tr><td>UHC Premium HSA</td><td>UHC Basic HSA</td></tr><tr><td>20%</td><td>30%</td></tr></table>	UHC Premium HSA	UHC Basic HSA	20%	30%
UHC Premium HSA	UHC Basic HSA					
20%	30%					
Out-of-network	You pay the full cost of your prescription drugs until your out-of-network medical plan deductible is met.	You pay the applicable coinsurance amount for your prescription drugs until your out-of-network out-of-pocket maximum has been reached. The out-of-network coinsurance amounts are: <table><tr><td>UHC Premium HSA</td><td>UHC Basic HSA</td></tr><tr><td>40%</td><td>50%</td></tr></table>	UHC Premium HSA	UHC Basic HSA	40%	50%
UHC Premium HSA	UHC Basic HSA					
40%	50%					
Limitations, exceptions, and other important information	• 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.					



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
Annual deductible		
Employee	\$500	\$500
All other coverage tiers	\$1,000	\$1,000
Annual out-of-pocket maximum for coinsurance		
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
Preventive care	0%	Not covered
Office visits		
Primary care	\$35	20% of the allowed amount subject to annual deductible
Specialist	\$50	
Emergency care	\$200 copay	\$200 hospital copay and subject to annual deductible
Medical emergency		Mental health and substance abuse services: \$200 hospital copay
Inpatient hospital and physician benefits (includes mental health and substance abuse)		
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.		
Inpatient hospital	Lower member cost share: \$200 per day hospital copay (days 1-5 for each admission) Higher member cost share: \$400 per day hospital copay (days 1-5 for each admission)	20% of the allowed amount after \$800 per admission deductible Note: In Alabama, available only for medical emergency and accidental injury
Inpatient physician visits and consultations	0% up to the allowed amount subject to annual deductible Mental health and substance abuse services: 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 Mental health and substance abuse services: 20% of the allowed amount; no copay or deductible
Outpatient hospital benefits (includes mental health and substance abuse)		
Outpatient surgery (including ambulatory surgical centers)	Lower member cost share: \$200 hospital copay Higher member cost care: \$400 hospital copay	20% of the allowed amount subject to annual deductible; not covered in Alabama
Lab and x-ray	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
Prescription drug benefits (includes mental health and substance abuse)*	
Retail pharmacy benefits	• Generic drugs: \$15 copay per prescription • Preferred brand drugs: \$40 copay per prescription • Other brand drugs: \$60 copay per prescription • Specialty drugs: \$100 copay per prescription
Mail order pharmacy benefits • Up to 90-day supply with one copay • Mail order drugs are available through PrimeMail® (Enroll online at bcbsal.com or call 877 579 7627)	• Generic drugs: \$37.50 copay per prescription • Preferred brand drugs: \$100 copay per prescription • Other brand drugs: \$150 copay per prescription • Specialty drugs: Not covered

*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

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
Annual deductible		
Employee	\$350	\$350
Family	\$1,050	\$1,050
Annual medical out-of-pocket maximum		
Employee	\$3,000	\$3,000
Family	\$9,000	\$9,000
Annual prescription drug out-of-pocket maximum		
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
Preventive care*	No charge	30% after deductible
Office visits Primary care and specialist	\$17 copay	30% after deductible
Mental health and substance abuse treatment		
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
Emergency care		
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
Hospital service Inpatient and outpatient	20% after deductible	30% after deductible
Lab and x-ray	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
Tier 1	\$7 copay	\$11 copay	\$7 copay; then 20% coinsurance	Not covered
Tier 2	\$30 copay	\$65 copay	\$30 copay; then 20% coinsurance	Not covered
Tier 3	\$30 copay	\$65 copay	\$30 copay; then 20% coinsurance	Not covered
Tier 4	\$100 copay	Not covered	Not covered	Not covered
Tier 5	\$200 copay	Not covered	Not covered	Not covered

For more information
about HMSA prescription
drug coverage, visit
hmsa.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.

Delta Dental plan

Annual deductible

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

Benefit maximums

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

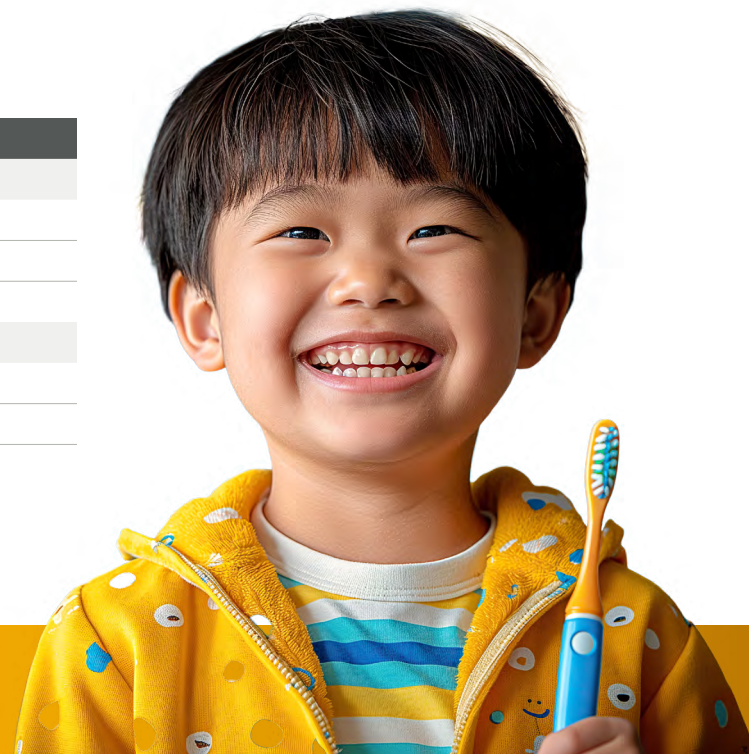
Delta Dental of Michigan Delta Dental Premier and PPO

800 524 0149

Group number—5480

deltadentalmi.com

Learn more about
your dental benefits
and find a full list of
covered services on
totalrewards.stryker.com.





Dental plan—Delta Dental (continued)

Delta Dental plan		
	PPO dentist/ Premier dentist	Nonparticipating dentist*
	You pay	You pay
Class I benefits • Diagnostic and preventive services (includes exams, cleanings, fluoride and space maintainers) • Emergency palliative treatment (to temporarily relieve pain) • Radiographs/x-rays	0%	0%
Class II benefits • Minor restorative services (includes fillings) • Oral surgery services (extractions and dental surgery) • Relines and repairs (to bridges and dentures)	20%	20%
Class III benefits • Major restorative services (includes crowns) • Implants (endosteal implants to replace missing teeth)	50%	50%
Class IV benefits • Orthodontic services (includes braces)	50%	50%

*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

EyeMed Vision Care		
	In-network	Out-of-network
Exam with dilation as necessary	\$0 copay	Up to \$35
Frames	\$150 allowance; you pay 80% of balance over \$150	Up to \$45
Standard plastic lenses		
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
Progressive	\$75 copay	Up to \$80
Contact lenses (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
Service frequency		
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)

UnitedHealthcare

800 387 7508

Group contract

number—703998

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 \$3,200. 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.

A list of eligible expenses can be found at myuhc.com or visit 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, as long as you are not enrolled in any other disqualifying coverage. For information on eligibility, refer to the [OptumBank HSA User's Guide](#).

- 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^{1,2}. 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:

- \$4,300 annually for individual coverage
- \$8,550 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

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

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

¹ 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.

² If you enroll during the Annual Enrollment period, Stryker's contribution will be available in your account by January 31, 2025. 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 for more information.



Personalized healthcare support

Included Health

855 431 5551

includedhealth.com/stryker

Included Health is a confidential service that can ease your healthcare journey by putting personalized healthcare support at your fingertips. These services are available at no cost for our medical plan participants and covered dependents.

If you are enrolled in a Stryker medical plan, **Included Health** can help you and your family by providing:

- 24/7 access to expert medical advice
- Remote second medical opinions from leading specialists
- Assistance with claims, appeals, personalized cost estimates and finding high quality providers for UHC plan members

To activate your account with Included Health, visit includedhealth.com/stryker or call 855 431 5551.

Included Health's LGBTQ+ Health

program provides healthcare offerings that are of particular interest to the LGBTQ+ community. 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.

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

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.



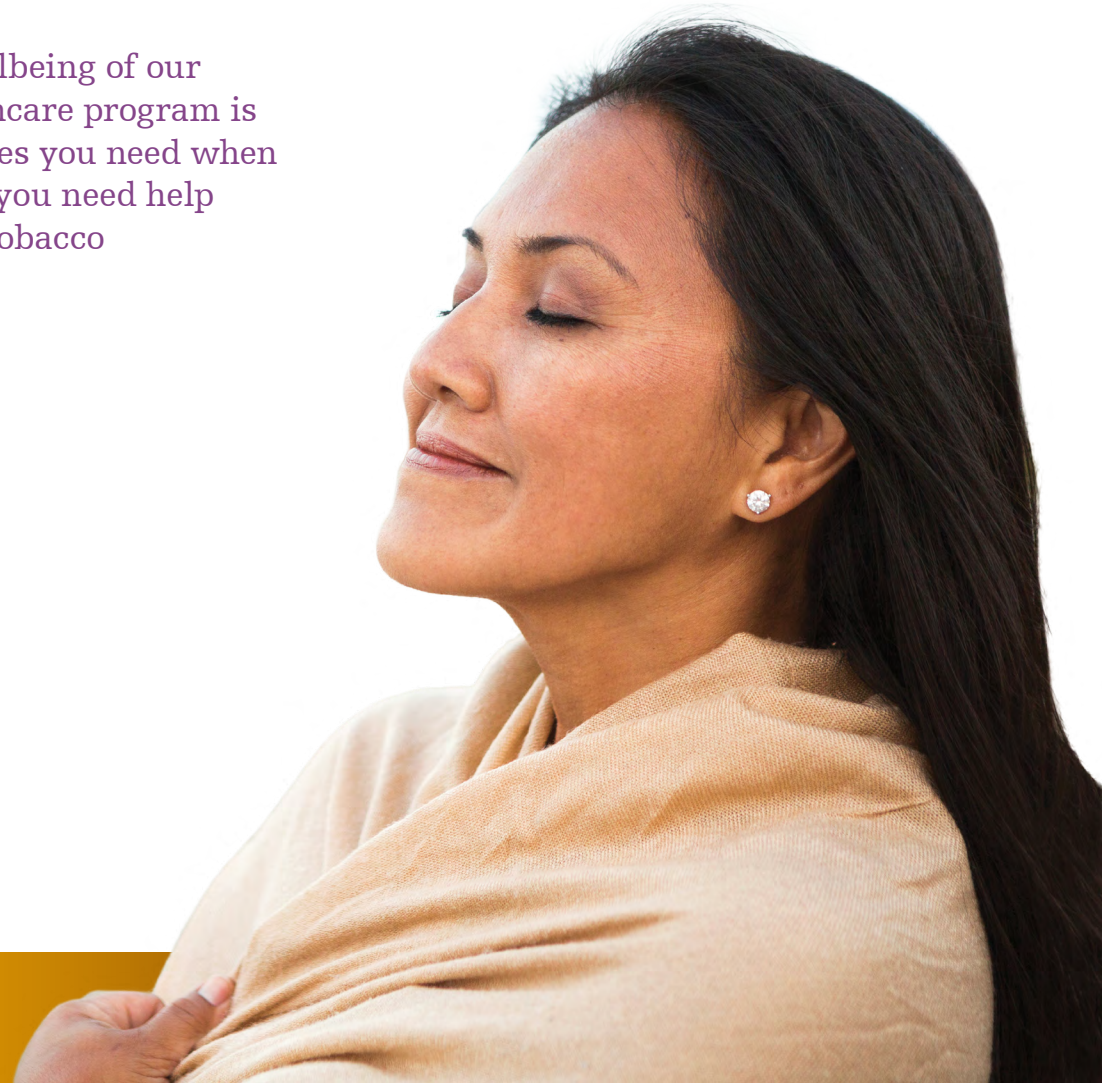
Tobacco cessation program

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.

Strive

833 643 0408

strive.stryker.com





Mental health and Employee Assistance Program (EAP)

Lyra Health offers a comprehensive and convenient mental health program and Employee Assistance Program (EAP) for you and your household family members.

- Instant access to individualized care, whether you want self-guided care, mental health coaching or ongoing care with a licensed therapist
- Ten free mental health sessions that suit your personal preferences, including in-person, video conferencing and text messaging
- Expert-facilitated group discussions on relevant mental health topics

Lyra Health offers more than mental healthcare:

- On-demand interactive courses and short videos on a number of topics
- Legal consultations, financial consultations and identity theft support
- Child, elder and pet care consultations, resources and referrals

Lyra Health

833 511 0159

stryker.lyrahealth.com





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).

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.

Unum

Group number—940919

You can designate and update your life insurance beneficiaries at any time via enroll.stryker.com.

Any increases due to a change in benefit option or new enrollments (outside of your new hire enrollment window) in supplemental and/or spouse/domestic partner life insurance will require evidence of insurability (EOI).

Please visit the Summary Plan Description at 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.





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 to learn more about all of discounts and programs available to you.





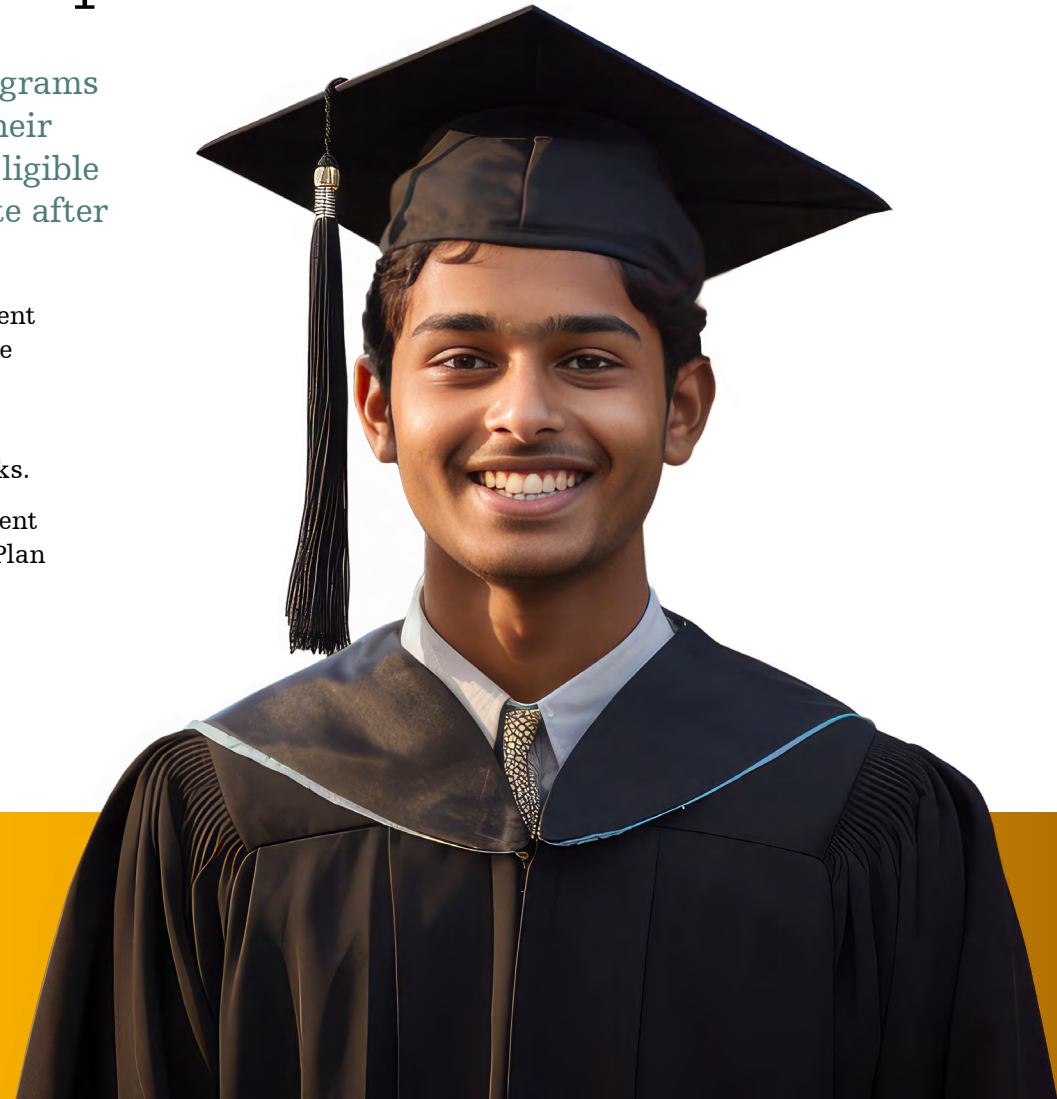
Tuition reimbursement plan

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 \$315 for transit and \$315 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 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

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 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.

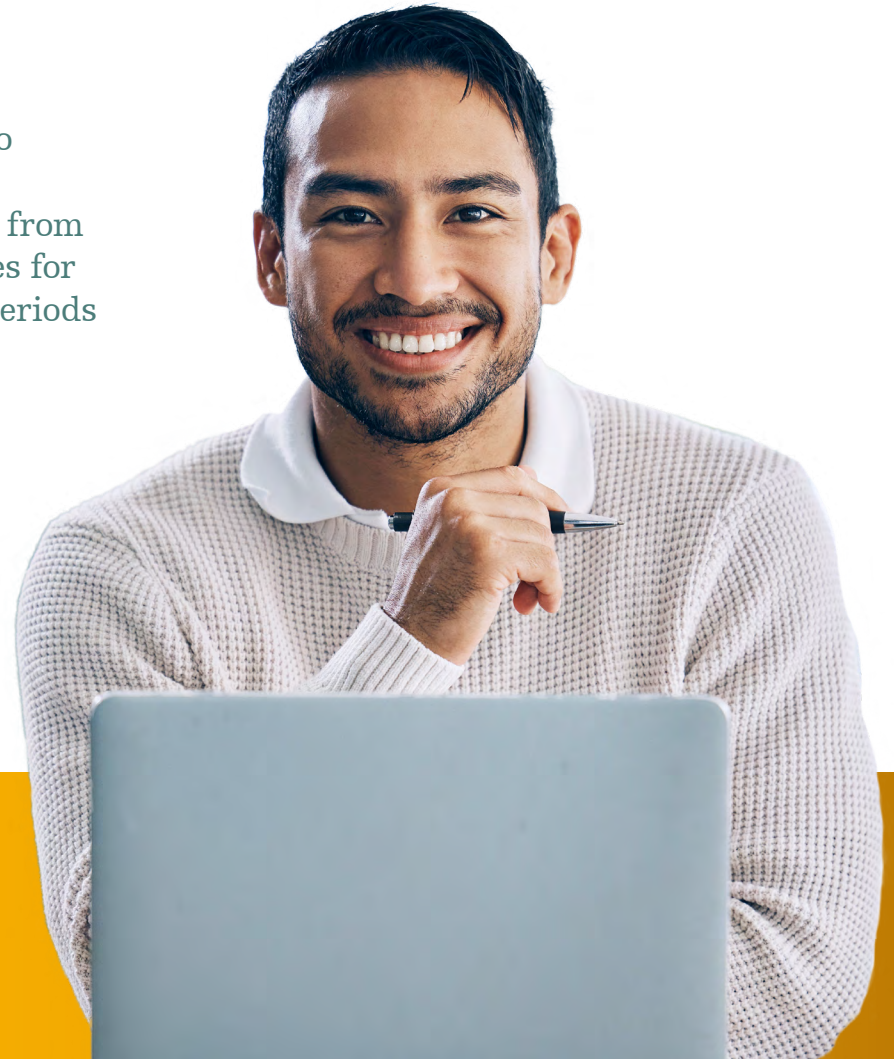
For more details visit totalrewards.stryker.com/spd, or visit the Money section of totalrewards.stryker.com.

For questions, contact the [myHR Team](#).

Computershare

800 639 0119

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





Voluntary benefits

Transamerica Life Insurance Company

800 626 9069

Group number—G000042560

totalrewards.stryker.com

Supplemental health benefits

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.

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.





Voluntary benefits

Transamerica Life Insurance Company

800 626 9069

Group number—G000042560

totalrewards.stryker.com

Critical illness insurance

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. 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.





Voluntary benefits

Transamerica Life Insurance Company

800 626 9069

Group number—G000042560

totalrewards.stryker.com

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.

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.](#)

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.





Voluntary benefits

Transamerica Life Insurance Company

800 626 9069

Group number—G000042560

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.

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.

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.





Voluntary benefits

**Trustmark Insurance
Company**

866 813 7192

stryker.yourcare360.com

Life insurance plus long-term care

Life insurance plus long-term care, provided through Trustmark Insurance Company, provides long-term care benefits funded by permanent life insurance. This voluntary life plus long-term care coverage pays cash benefits for long-term care from professionals or family and offers a death benefit after you're gone, no matter your age or life stage. The benefit is not just for elder care or later stages in life but covers incidents for all ages, including care due to unexpected events like car accidents, sports injuries, severe illnesses like cancer, and even cognitive impairments such as Alzheimer's.

Actively-at-work U.S. Stryker employees working 20+ hours per week and between the ages of 18 – 75 may apply for life plus long-term care coverage. Spouses/registered domestic partners who are between the ages of 18 – 70 may also apply. Employees may add life insurance coverage for their dependent children up to age 25 (death benefit only) in addition to their life plus long-term care benefits. Life insurance coverage for children is guaranteed issue and the employee must apply for coverage to cover dependents.

You can enroll in life insurance plus long-term care year-round beginning October 1, 2024.

Contact ACSIA Partners at 877 904 0643 to request a tailored quote and plan design in order to enroll. Premiums are paid directly to Trustmark via monthly ACH bank draft.

The Life plus Long-term Care insurance policies are underwritten by Trustmark Insurance Company and are not ERISA-covered plans. Enrollment is completely voluntary. If you enroll in a policy, you must work directly with Trustmark® to request assistance or submit a claim. Trustmark® and Trustmark Life + Care® are registered trademarks of Trustmark Insurance Company.





Cost of coverage

For part-time employee costs of coverage, visit enroll.stryker.com or contact the myHR Team.

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.

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

	Employee only	Employee + 1	Family
UHC Choice PPO Plan	\$161	\$315	\$494
UHC Value PPO Plan	\$141	\$274	\$433
UHC Premium HSA Plan	\$123	\$230	\$366
UHC Basic HSA Plan	\$66	\$88	\$120
UHC Out-of-Area Plan	\$157	\$308	\$483
Kaiser Permanente of Northern California	\$213	\$389	\$612
Kaiser Permanente of Southern California	\$164	\$290	\$430
Blue Cross Blue Shield of Alabama	\$197	\$364	\$538
Hawaii Medical Service Association	\$35	\$328	\$510
Delta Dental	\$20	\$40	\$60
EyeMed Vision	\$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).

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

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

Critical illness insurance (monthly employee costs)

Age of employee	Employee	Employee + child(ren) (one-parent family)	Employee + spouse/domestic partner/Family (two-parent family)
Under 25	\$2.90	\$3.20	\$3.35
25 – 29	\$3.35	\$3.65	\$4.10
30 – 34	\$3.65	\$3.95	\$4.55
35 – 39	\$4.40	\$4.70	\$5.75
40 – 44	\$5.90	\$6.20	\$8.30
45 – 49	\$9.20	\$9.50	\$12.95
50 – 54	\$12.65	\$12.95	\$18.35
55 – 59	\$18.05	\$18.35	\$26.30
60 – 64	\$24.50	\$24.80	\$36.20
65+	\$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](https://myhr.stryker.com) at myhr.stryker.com or call 877 795 2002.
- Visit 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.

