2025 Annual Open Enrollment Workday Guide

IMPORTANT REMINDERS:

- 2025 Open Enrollment is Monday, October 28, 2024 through Friday, November 15, 2024 at 5pm PST
- Open Enrollment closes on Friday, November 15, 2024 at 5pm Pacific Time No Exceptions!
- Open Enrollment benefit elections are effective on January 1, 2025

	Important Benefits Open Enrollment Information
WORKD	All Open Enrollment benefit elections will need to be completed online in Workday (<u>https://www.myworkday.com/spacex</u>).
····	 NEED WORKDAY OR YUBIKEY ASSISTANCE? Workday login assistance: Open an HR JIRA service ticket by typing HRDATA/ in any browser bar on the SpaceX network. YubiKey assistance: Contact the IT Help Desk at (310) 363-6999.
	 If you are a <u>regular employee</u> normally scheduled to work at least 20 hours per week, you may participate in SpaceX's benefit program upon meeting the eligibility requirements. You also have the option to enroll your eligible dependents in certain benefits. Eligible dependents include: Your legally-married spouse (including same-sex spouse)^{1,2} Your child(ren) up to age 26, which may include natural, adopted, stepchildren, and children obtained through court appointed legal guardianship Your unmarried child(ren) of any age who are incapable of supporting themselves due to a mental or physical disability and who are totally and indefinitely dependent on you. If you are legally married to your same-sex partner, you can enroll him/her as your spouse. The federal government recognizes legal marriages of same-sex couples in all states. Enrolling your same-sex spouse allows you to pay for certain benefits with pre-tax dollars.
	2. Your legally registered domestic partner (DP) and your DP's child(ren) constitute as eligible dependents for certain fully- insured SpaceX benefits, such as Kaiser HMO (available in California only) and voluntary benefits. Premium contributions made by SpaceX on behalf of your DP and DP's child(ren) will be treated as taxable income to you, and applicable taxes and withholdings will be deducted from your wages. Please contact the SpaceX Benefits team at <u>benefits@spacex.com</u> for additional information.
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If you have any questions, please reach out to <u>benefits@spacex.com</u>

Enrollment Instructions

STEP 1. Log into Workday to complete your 2025 Open Enrollment benefit elections.

Website: https://www.myworkday.com/spacex Login Credentials: Your SpaceX Username

YubiKey: Enter in your Security Key PIN then touch your security key

For Workday login assistance, please open a HR JIRA service ticket by typing **HRDATA**/ in any browser bar on the SpaceX network.

For YubiKey assistance, please call the IT Help Desk at (310) 363-6999.



Once you click the Inbox icon, you should see a "Open Enrollment Change" task, then click "Let's Get Started." If you do not see this task in your Inbox, please contact <u>benefits@spacex.com</u> immediately.

1 item	📩 🐯 📘 Created: 10/14/2024 Effective: 01/01/2025
Q Search: All Items	Change Benefits for Open Enrollment
해 Advanced Search	XIII POF
Open Enrollment Change 10/14/2024	Open Enrollment 10/14/2024-10/18/2024 Choose new plans or re-enroll in the plans you currently have.
Effective: 01/01/2025	Let's Get Started

TROUBLESHOOTING

If your Open Enrollment task is "On Hold", then you may have other pending items in your Workday Inbox that have not been completed yet. You need to complete the pending items first and submit it to the SpaceX Benefits Team for approval. Once it has been approved, then your 2025 Open Enrollment event will become available for you to make your benefit elections. If you continue to have issues with your 2025 Open Enrollment task, please contact benefits@spacex.com.

STEP 3. Health Care – Medical, Dental & Vision

First, select your tobacco status. You must select your tobacco status at the top of the enrollment page, which will determine your Hartford Critical Illness voluntary plan rates along with your age band and elected coverage amount.

~	Heal	th Information
-	Горасо	co Use
(Question	Has any person to be insured (employee and spouse) used tobacco in the last 12 months?
4	Answer	* Yes No

... . .

Second, select "Manage" to elect the Medical Plan and click "Confirm and Continue" to proceed to the next page.

ost per paycheck overage		Included Employee Only			
	Manage	poverage	or Employee Only.		
5 items				≡ 🗆 L ¹	SpaceX offers five medical pl
Benefit Plan	*Selection	You Pay (Bi-weekly)	Company Contribution (Bi-weekly)	Credits (Bi-weekly)	
Collective Health _EPO (Blue Shield of California)	Select Waive	Included	\$245.94	•	 Medical EPO Medical PPO Medical Guide PPO
Collective Health _PPO (Blue Shield of California)	Select Vaive	\$33.23	\$242.64		Medical High-Deductible Health Plan (HDHP)
Collective Health Guide PPO (Blue Shield of California)	SelectWaive	\$33.99	\$253.80		 Kaiser HMO (CA only) And option to waive medic coverage
Collective Health HDHP High- Deductible Health Plan	O Select Vaive	\$28.07	\$211.47		
Waiver Opt- Out Credit	Select	Included	\$0.00	\$20.00	

STEP 3. Health Care – Medical, Dental & Vision (cont.)

Third, upon selecting a Medical Plan, proceed with enrolling your **dependents**, if applicable, and click **"Save**" to save your elections. (If you already have a dependent listed in Workday, then click on the box next to your dependent's name.)

How to add dependents:

If you'd like to add a dependent that is not yet listed in Workday, click on **"Add New Dependent"** then select **"Create Dependent"** and enter your dependent's information before adding them to your benefits.

Dependents	Add My Dependent From Enrollment	If you'd like this dependent to be a beneficiary for your
Add a new dependent or select an existing dependent fron Coverage * Employee Only Plan cost per paycheck Add New Dependent	○ Use an Existing Beneficiary or Emergency Contact :Ξ ○ Create Dependent	Life and Accidental Death & Dismemberment (AD&D) insurance, check the "use as Beneficiary" box. Otherwise, you can click "OK".
	Use as Beneficiary	

Input your dependent's information, if adding the dependent for the first time. The information required to add is indicated by a red asterisks (*). Click **"Save"** once

completed.

Add My Dependent From Enrollm	
Name	Personal Information
Country * 🛛 × United States of America 🗵 $:\equiv$	Relationship *
Prefix	Date of Birth * MM/DD/YYYY
First Name *	Age (empty) Gender *
Middle Name	Citizenship Status
Last Name *	Tobacco Use Uses Tobaccc Save Cancel
Suffix	iobacco Use Uses Iobacco ★ ○ Not Apj
	○ Yes
	○ No

You will then be prompted to enter in your dependent's Social Security Number (SSN) or the reason the SSN is not available.

	You will be able to update your dependent's SSN at a later time by following the steps below	You have dependents covered under your health SSN is Not Available if you don't have access to t	a care plan without a Social Security Number. Enter their Social Security Number their number at this time.	(SSN) or Reason
		Dependent Social Security Numbers 1 item		≣⊡ ."
	1) Log into Workday			
	2) Click "Menu"	Dependent	*Social Security Number	
	Click "Benefits and Pay"	Bene Fits		
	Click "Benefits" > "Dependents"		Social Security Number (SSN)	
	Click on "Edit" next to your dependent's name			
	Select "Update Dependent > "No Benefit Change"		Reason SSN is Not Available N/A at this time	
	Scroll down to "National IDs" and correct SSN			-
	8) Click "Submit"			
_				

To DECLINE Medical coverage, select "Waiver Opt-Out Credit". If you decline Medical coverage, you will receive a \$20.00

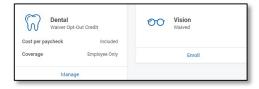
opt-out credit per paycheck.		Waiver
	Select	

Waive

Waiver Opt-Out Credit

STEP 3. Health Care - Medical, Dental & Vision (cont.)

Select "Manage" to enroll into Dental and Vision (vision will automatically enroll at the same coverage level).



Your Dental and Vision elections have to be the same coverage level. For instance, if you elect Dental "employee + child(ren)" then your Vision coverage must also be "employee + child(ren)".

To DECLINE Dental/Vision coverage, select "Waiver Opt-Out Credit". If you decline Dental/Vision coverage, you will receive a \$5.00 opt-out credit per paycheck. Please note, when you decline Dental, you must also decline Vision coverage.



STEP 4. Voluntary Benefits – The Hartford

Voluntary Benefits: If you want to purchase The Hartford's Group Accident, Group Indemnity, and/or Group Critical Illness 10k/20k/30k/40k/50k insurance, click "**Enroll**" under each desired plan(s).

Group Accident Waived	¢	Group In Waived	demnity Medical	Z	Group Critic Waived	al Illness
Enroll		. 1	Enroll		Enro	I
Benefit Plan	*Selection	Select	Dependent		Relationship	
The Hartford	Select		Bene Fits		Child	
	 Waive 					

STEP 5. Health Savings Account & Flexible Spending Accounts

Health Savings Account (HSA): Eligible to participate if you've elected the HDHP as your medical plan. If you did not elect the HDHP, then you are ineligible for a HSA and you can skip this step.

Coverage Level	2025 IRS HSA Contribution Limit	SpaceX Automatically Contributes	For 2025 you can contribute up to
Employee Only	\$4,300	\$500	\$3,800*
Employee + Spouse	\$8,550	\$1,000	\$7,550*
Employee + Child(ren)	\$8,550	\$1,000	\$7,550*
Employee + Family	\$8,550	\$1,000	\$7,550*

Projected Total	Cost Per Paycheck	Projected Tota \$0.00	Reminder:
			HSA is only
Contribute			available if you
			are enrolled into
Per Paycheck	115.38		the HDHP
Annual 3,00	0.00		medical plan.

*if age 55 or older, eligible to contribute an additional \$1,000

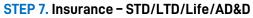
Flexible Spending Account (FSA): If you would like to enroll into the FSA(s), click "Enroll" under your desired FSA plan and enter your annual goal or bi-weekly contribution amount.

Health Care Flexible Spending Account (FSA) - HealthEquity	Dependent Care Flexible Spending Account (FSA) - HealthEquity
Projected Total Cost Per Paycheck Projected Total Credits \$0.00	Projected Total Cost Per Paycheck Projected Total Credits \$0.00
Contribute	Contribute
Per Paycheck 0.00	Per Paycheck 38.46 Annual 1,000.00 Total Paychecks 26
Annual 0.00 Total Paychecks 26 Minimum Annual Amount: \$1.00	Minimum Annual Amount: \$1.00
Maximum Annual Amount: \$3,300.00	Maximum Annual Amount: \$5,000.00

Use It or Lose It! If you do not spend all the money in your flexible spending accounts (FSAs) during the year, IRS regulations require that your forfeit any remaining balance.

STEP 6. Employee Assistance Program

Lyra Coaching is a six-session mental health program. Lyra Coaching will be available for FREE to all SpaceX employees (regular, temporary, and interns), who are normally scheduled to work at least 20 hours per week, and their eligible dependents (ages 18+). You are automatically enrolled in Lyra Coaching, so no additional action is required on your end.



SpaceX provides Short Term Disability (STD), Long Term Disability (LTD) benefits to regular, eligible employees at no cost. You are automatically enrolled into these plans, so no additional action is required on your end.

SpaceX also provides Basic Life and Basic Accidental Death & Dismemberment (AD&D) at 1x your salary coverage up to \$200,000 to eligible employees at no cost.

Select "**Manage**" to add your beneficiaries for Basic Life and AD&D insurance.



+	Beneficiaries 1 item Beneficiary		Percentage	
	× Mrs. Fits [2]	The	=	100
condary	y Beneficiaries 2 items	percentage breakdown		= □
(+)	Beneficiary	should add	Percentage	
Θ	× Zackie Fits ⊠	up to 100%.		50
	× Yackie Fits …			50

STEP 8. Insurance – Voluntary Life and AD&D

Voluntary Life and AD&D Insurance - Employee: If you want additional financial security for you and your family, you can elect voluntary life and AD&D insurance. You can elect additional voluntary life and AD&D insurance for yourself in increments of \$5,000, up to a maximum of \$500,000.

Voluntary Life Insurance - En The Hartford (Employee) UPDATED	nployee	Voluntary AD The Hartford (Em UPDATED	&D Insurance - Employee
Cost per paycheck	\$4.06	Cost per paycheck	\$1.01
Coverage	\$110,000	Coverage	\$110,000
Manage		Ма	anage
Voluntary AD&D amou	unt must ea	qual the Voluntary I	_ife amount.

IMPORTANT: If you are electing the voluntary life and AD&D insurance for the first time during Open Enrollment or if you are increasing your coverage amount from your previous election, then you will receive an Evidence of Insurability (EOI) form from our life insurance carrier, The Hartford. Upon review of your completed EOI form, The Hartford will notify you of the coverage approval or denial. Please note, you will not be deducted for voluntary life and AD&D insurance until SpaceX is notified of your approved coverage.

Voluntary Life and AD&D Insurance – Spouse: You can elect voluntary life and AD&D insurance for your **spouse** at equal coverage in increments of \$5,000, up to the lesser of 100% of employee's amount of \$250,000. Rates are determined by your (the employee's) age – not the spouse's age.

Voluntary Life Insurance – Child(ren): You can elect voluntary life insurance for your child(ren) at \$10,000.

Voluntary Life Insu Spouse The Hartford (Spouse)		P	Voluntary AD8 Spouse The Hartford (Spo	
Cost per paycheck	\$1.38	Cost per p	aycheck	\$0.46
Coverage	\$50,000	Coverage		\$50,000
Manage			Manage	

P	Voluntary Life Insurance The Hartford (Child(ren))	- Child(ren)
Cost per p	aycheck	\$0.37
Coverage		\$10,000
	Manage	

You (the employee) must be enrolled in Employee Voluntary Life and AD&D Insurance in order for you to enroll your spouse and/or child(ren) for Voluntary Life Insurance.

STEP 9. Additional Benefits – Group Legal Plan

If you and your family want to utilize fully covered legal services from attorneys experienced in services including but not limited to: estate planning documents, civil suits, adoption, identity theft issues, select "**Enroll**".



STEP 10. Review and Confirmation of Benefit Elections

Please verify your elections carefully before submitting. When you are satisfied with your elections, please check off "I **Accept**" as your Electronic Signature and hit "**Submit**" at the bottom of the page.

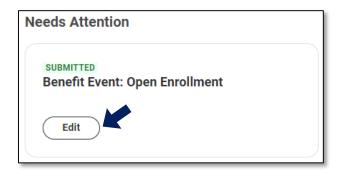
Electronic Signature
I attest by checking the "I Accept" box below that I have reviewed the information that I provided and that it is true and accurate to the best of my knowledge. I understand that outside of Annual Benefits Open Enrollment, I cannot make benefit changes during the year unless I experience a qualifying life event, such as a marriage, divorce, birth/adoption of a child, and loss/gain coverage else- where. I also understand that if I experience a qualifying life event, then I only have 30 days from the qualifying life event date to re- quest any benefit changes by making my desired benefit elections and submitting the necessary supporting documentation in Workday or by emailing <u>Benefits@spacex.com</u> . If I miss the 30-day qualifying life event window, then understand I will have to wait until the next Annual Benefits Open Enrollment period to make my desired benefit changes, or upon experiencing another qualifying life event.
If applicable, I authorize SpaceX to deduct the employee contribution amounts required for the benefit plan coverage(s) for which I elected and have been approved.
l Accept 🔽
Submit Cancel

Once submitted, to view and/or download your 2025 Benefits Statement click "View 2025 Benefits Statement"

You can download a copy of y	ccessfully submitted your 2025 Annual Benefits Open Enrollment elections! our submitted elections by clicking on the "View 2025 Benefits Statement" b mitted 2025 Annual Benefits Open Enrollment elections will be effective
To change your elections befo	ore open enrollment closes on November 15, 2024 at 5 PM PT:
From Workday's home	page select View All Apps > Benefits > Change Open Enrollment.
Important Dates:	
Benefits go into effect	01/01/2025
Final day to update benefits	10/18/2024
View 2025 Benefits State	ement

STEP 11. Making Changes

After you submit your 2025 Open Enrollment elections, you will continue to have access to make changes while the Open Enrollment period is still open by logging into Workday > Menu > View All Apps > Benefits and Pay. From there click "**Edit**" under Benefit Event: Open Enrollment



Please be sure to finalize and submit all changes by Friday, November 15, 2024 at 5pm Pacific Time / 7pm Central Time / 8pm Eastern time.