SIEMENS' BENEFITS AT A GLANCE

THE BENEFITS AT SIEMENS— PUTTING YOU IN TOUCH WITH TOMORROW	Benefits are an important consideration when seeking employment with any company. That is why we are committed to providing a benefits program that helps meet the needs of our employees. Siemens offers benefits that truly put you in touch with tomorrow by not only providing for your needs today, but by helping you plan and focus on the future.
SEEING You As An Individual	While we provide a comprehensive benefits program, we also recognize that you are unique—with a set of requirements that may be unlike those of any other person. So, some of the benefits we offer allow you to choose your coverages from among various options. This way, you can design a benefits package that meets your individual and family needs.
WHAT BENEFITS ARE AVAILABLE?	To demonstrate the breadth and variety of benefit coverages offered by the Company, here is a description of what is available for full-time, regular employees.

MEDICAL

You can choose among several medical plans with various coinsurance levels and deductibles. Dependent coverage is available for your spouse and unmarried child(ren) under 19, or up to age 25 if a full-time student.

	Low Option	Middle Option	Preferred Provider Organization (if available)	Health Maintenance Organization (if available)
Annual Deductible	\$1,000/person \$3,000 family maximum	\$300/person \$900 family maximum	In-network \$150/person \$450 family max.	Generally not required
			Out-of-network \$300/person \$900 family max.	
Coinsurance/ Copay	You pay 20%	You pay 20%	In-network \$15 office visits; 10% for other charges	Varies by HMO (e.g., \$10 copay for office visits; hospital stays fully covered)
			Out-of-network 30%	

DENTAL

You can choose among several options with various coinsurance levels and deductibles. Dependent coverage is available for your spouse and unmarried child(ren) under 19, or up to age 25 if a full-time student.

	Your Coinsurance			Per Person Benefit Maximum			
Option	Deductible	Diagnostic & Preventive	Basic Dental	Major Dental	Orthodontia	Annual Benefit	Lifetime Orthodontia
Preventive	None	0% with no deductible	No Coverage	No Coverage	No Coverage	\$500	No Coverage
Comprehensive Dental, Vision and Hearing*	\$75/person \$225 family maximum	0% with no deductible	20%	50%	50%	\$1,500	\$1,250
Dental Health Maintenance Organization	Each DHMO	differs in the level o	f payment requi	red. DHMOs an	e available in mos	st locations.	

* Annual vision coverage is one exam at 100% and two lenses at 80%. Hearing coverage is one exam per year and one hearing aid per ear each 48 months all covered at 80%. These coverages only available with the comprehensive option. Comprehensive dental deductible is \$50/person and \$150 family maximum if location does not offer vision and hearing coverage.

DISABILITY INCOME PLANS	Short-Term Disability—Replaces from 66-2/3 % to 100% of your pay up to 26 weeks.
	Long-Term Disability—If you are unable to work and disabled as defined by the plan for more than 26 weeks, Long-Term Disability (LTD) coverage begins.
	LTD replaces a percentage of your pay depending on the option you choose: 40%, 60%, or 75% up to certain maximums.
EMPLOYEE LIFE	Various choices are available of up to seven times your annual pay.
INSURANCE	Two different types of optional coverage are available:
	Basic Life—Provides term life insurance coverage that pays a benefit to your beneficiary in the event of your death.
	Group Universal Life—Provides a death benefit but also has other features, such as a savings option and portability.
DEPENDENT LIFE INSURANCE	You can choose to cover your spouse and/or dependent children.
INSURANCE	Group Universal Life coverage of up to \$100,000 is available for your spouse.
	You can cover your dependent children with term coverage of up to \$10,000 per child for a single premium.
HEALTH CARE SPENDING ACCOUNT	You make an annual election of up to \$3,500 of tax-free deposits from your pay to help you offset certain medical costs.
	Equal amounts are deducted from each paycheck.
	You can use this account to pay for nonreimbursable expenses, such as deductibles, coinsurance, and items not covered by the medical plan, with tax-free dollars.
DEPENDENT CARE	Covers the cost of eligible dependent care so you can work.
	You make an annual election of up to \$5,000 of tax-free deposits.
	Equal amounts are deducted from each paycheck.
EYE CARE PLAN OF AMERICA	You can save up to 60% on eyewear such as lenses, contacts, and frames by choosing this plan.
	Covers you and your qualifying dependents.
LONG-TERM CARE	Provides a benefit to help pay the cost of care in a nursing home or in your home if you cannot care for yourself.
	Coverage is available for the employee and spouse.
	Varying daily benefit amounts, lengths of coverage, and inflation protection features are available.

401(K) Savings Plan	You can invest up to 16% of your pay on a pre-tax or post-tax basis. The Company matches 50 cents on the dollar of the first 6% of your contributions. You vest in Company matching contributions in increments: 40% vested after two years, 60% vested after three years, 80% vested after four years, and 100% vested after five years. Seven investment options are available, ranging from fixed rate of return to aggressive growth. You can generally access your money through loans and withdrawals.
PENSION PLAN	This Company-provided pension benefit is based on years of service and your pay.
	Normal retirement is at age 65 after five years of employment service; early retirement is at age 55 after ten years of employment service.
	The Company pays the entire cost of this benefit.
ACCIDENT INSURANCE	Pays a benefit if an accident results in death or a qualifying loss.
	Different types of coverages are available:
	Accidental Death and Dismemberment—For employees only. Coverage of up to two times your pay is available.
	<i>Personal Accident</i> —For employees only or the entire family. Coverage of up to \$500,000 is generally available.
	<i>Business Travel Accident</i> —For employees only. Coverage of up to five times your basic annual earnings, with a \$500,000 benefit limit, is provided automatically at no cost to you.
FINANCIAL PLANNING	Printed materials, computer diskettes, telephone consultations, and one-on-one counseling are available to help you plan your financial future.
VACATION	Vacation increases with length of service. The number of weeks provided per year varies by location.
HOLIDAYS AND	Paid holidays each year vary by location.
OTHER PAID TIME OFF	Paid time off is also provided for other personal matters. Policies vary by location but could include a death in your immediate family, jury duty, and military duty.
EDUCATIONAL ASSISTANCE PROGRAM	Tuition reimbursement may be available for college-level courses related to your job.
NATIONAL MERIT	May provide scholarship funds for eligible dependents of employees.
Scholarship Program	Selection is done by the National Merit Scholarship agency.