



# Associate Benefits Summary

(Effective January 1, 2023 – December 31, 2023)

At Teknova we believe that our greatest asset is our team who contribute their dedication, creativity, insight, and experience to producing world class products. Our associates WOW us every day. As such we want to make sure our associates are well taken care of, by providing great benefits as listed below.

## Comprehensive Medical, Dental and Vision Benefit Plans

All associates working 30+ hours per week are eligible to enroll in these benefits within 30 days of the start of their full-time employment. Please refer to the section below for additional information regarding these benefits.

## Employee Stock Purchase Plan (ESPP)

Teknova offers an Employee Stock Purchase Plan (ESPP). ESPPs are an exciting benefit that allow associates to acquire Teknova stock at a discount. All associates working 20+ hours per week are eligible to participate in Teknova’s ESPP after 6 months of employment. The ESPP will allow you to purchase Teknova stock at a 15% discount through a payroll deduction arrangement. If enrolled, you purchase stock at the discounted price once every six months with your accumulated payroll contributions.

## Paid Time Off and Paid Sick Leave

Full Time Associates, those working 35+ hours per week will begin accruing Paid Time Off (“PTO”) immediately at the rate of three weeks per year. PTO increases to four weeks per year beginning in the fifth year of employment. Associates whose role is Director level or above participate in a self-managed Flexible Time Off program. Part Time Associates (working less than 35 hours / week) and Summer Interns / Temporary Associates will begin accruing sick leave immediately at the rate of 1 hour for every 30 hours worked, up to an accrual cap of 48 hours.

## Paid Holidays

All full-time associates (those who work 35 hours or more per week on average) are eligible for Holiday Pay for each observed holiday, beginning from their first day of employment. Please refer to the current Holiday Schedule for observed dates.

- New Year’s Day
- Presidents Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Break
- End of Year Break / Week of Rest
- Floating Holiday

## Discounted Gym Membership

Gym memberships are available through Hollister’s Rovella’s Gym for as little as \$15 per pay period. Partnering with the local gym, we are able to make payment simple with an easy payroll deduction.

## 401K Retirement Plans with a 4% Employer match

All associates are eligible to enroll in the Company’s 401(k) retirement plan during the next quarterly enrollment after 30 days of the start of their employment. The company has a guaranteed 401(k) match up to the first 4.0% of contributions. In addition, the company may elect to match an additional percentage amount (the additional percentage varies year-to-year as a function of profitability).

## Teknova’s WALKSTAR Program

Your health is important, and to show our support we offer gifts to all our WALKSTARS through a walking program! If you walk the designated route during your regular breaks, you can get a walking point.

First 20 walking points within a calendar month you will be gifted a WALKSTAR T-Shirt plus a \$25 gift card to a location of your choice (choices may include Target, Safeway, Starbucks -- just to name a few). Each calendar month thereafter that you walk at least 20 times you will be gifted a \$25 gift card! **Are you ready to WALK?**



## Continuous Learning Opportunities

Teknova supports associate’s outside learning opportunities including seminars, workshops, and classes that are relevant to the associate’s success and future. In addition, the company provides opportunities for associates to cross-train and learn new skills from other departments.



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## HEALTH INSURANCE

Administered by Cigna (Group # is: 637693)

Teknova offers three comprehensive medical plans through Cigna designed to give you choices to best meet your family's specific needs. With Cigna plans, you can visit any provider in the United States. However, your out-of-pocket costs will generally be lower if you see a provider who participates in the Cigna Open Access + (OAP) network. To locate a participating Cigna provider, log on to the Cigna Health Care Provider Directory (<https://hcpdirectory.cigna.com/web/public/consumer/directory/search>)

### Open Access + HDHP \$2,000

Services	In Network	Out of Network
Calendar Yr Deductible	\$2,000 INDIV \$4,000 FAM (\$3,000 / member)	\$4,000 INDIV \$12,000 FAM (\$6,000 / member)
Out of Pocket Max <i>Includes deductible, medical and Rx copays</i>	\$3,000 INDIV \$6,000 FAM (\$3,000 / member)	\$9,000 INDIV \$18,000 FAM (\$9,000 / member)
Primary Care Visit	20%*	40%*
Specialist Visit	20%*	40%*
Preventive Care	No Charge	40%*
Diagnostic Lab & X-ray	20%*	40%*
Emergency Room	20%*	
Urgent Care	20%*	40%*
Hospital – Inpatient/ Outpatient	20%*	40%*
Retail Prescription Drugs (30-day Supply)		
Generic	\$10*	40%*
Preferred Brand	\$40*	40%*
Non-preferred Brand	\$60*	40%*
Specialty	30% up to \$250*	40% up to \$250*
Mail Order Prescription Drugs (90-day Supply)		
Generic	\$30*	Not covered
Preferred Brand	\$120*	Not covered
Non-preferred Brand	\$180*	Not covered
Specialty	30% up to \$250*	Not covered

\* After deductible

### Open Access + Buy Up \$250 Ded PPO

Services	In Network	Out of Network
Calendar Yr Deductible	\$250 INDIV \$750 FAM	\$750 INDIV \$2,250 FAM
Out of Pocket Max <i>Includes deductible, medical and Rx copays</i>	\$2,500 INDIV \$5,000 FAM	\$7,500 INDIV \$15,000 FAM
Primary Care Visit	\$20	40%*
Specialist Visit	\$40	40%*
Preventive Care	No Charge	40%*
Diagnostic Lab & X-ray	No Charge	40%*
Emergency Room	\$150 then 20%*	
Urgent Care	\$25	40%*
Hospital – Inpatient/ Outpatient	20%*	40%*
Retail Prescription Drugs (30-day Supply)		
Generic	\$10	50% up to \$250
Preferred Brand	\$30	50% up to \$250
Non-preferred Brand	\$50	50% up to \$250
Specialty	30% up to \$250	50% up to \$250
Mail Order Prescription Drugs (90-day Supply)		
Generic	\$30	Not covered
Preferred Brand	\$90	Not covered
Non-preferred Brand	\$150	Not covered
Specialty	30% up to \$250*	Not covered

\* After deductible

### Open Access + Base \$1,000 Ded PPO

Services	In Network	Out of Network
Calendar Yr Deductible	\$1,000 INDIV \$3,000 FAM	\$3,000 INDIV \$9,000 FAM
Out of Pocket Max <i>Includes deductible, medical and Rx copays</i>	\$5,000 INDIV \$10,000 FAM	\$15,000 INDIV \$30,000 FAM
Primary Care Visit	\$35	40%*
Specialist Visit	\$55	40%*
Preventive Care	No Charge	40%*
Diagnostic Lab & X-ray	No Charge	40%*
Emergency Room	\$150 then 20%*	
Urgent Care	\$35	40%*
Hospital – Inpatient/ Outpatient	20%*	40%*
Retail Prescription Drugs (30-day Supply)		
Generic	\$15	50% up to \$250
Preferred Brand	\$30	50% up to \$250
Non-preferred Brand	\$50	50% up to \$250
Specialty	30% up to \$250	50% up to \$250
Mail Order Prescription Drugs (90-day Supply)		
Generic	\$40	Not covered
Preferred Brand	\$90	Not covered
Non-preferred Brand	\$150	Not covered
Specialty	30% up to \$250*	Not covered

\* After deductible

## Medical Plan Associate Costs

### Open Access + HDHP

	Per Month	Per Pay Period
Emp Only	\$0	\$0.00
Emp + Spouse	\$255	\$117.69
Emp + Child(ren)	\$175	\$80.77
Emp + Family	\$355	\$163.85

### Open Access + Base \$1,000 Ded PPO

	Per Month	Per Pay Period
Emp Only	\$135	\$62.31
Emp + Spouse	\$295	\$136.15
Emp + Child(ren)	\$215	\$99.23
Emp + Family	\$516	\$238.15

### Open Access + Buy Up \$250 Ded PPO

	Per Month	Per Pay Period
Emp Only	\$195	\$90
Emp + Spouse	\$385	\$177.69
Emp + Child(ren)	\$315	\$145.38
Emp + Family	\$635	\$293.08



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## DENTAL INSURANCE

Administered by Delta Dental (Group # is: 22095)

Teknova offers a comprehensive dental insurance program through Delta Dental. To locate a participating dentist, you can visit: <https://deltadentalins.com/find-a-dentist>

Services	Delta Dental PPO Dentists*	Delta Dental Premier Dentists*	Non-Delta Dental PPO Dentists*
Annual Deductible (Basic & Major Services)	\$50 INDIV \$150 FAM	\$50 INDIV \$150 FAM	\$50 INDIV \$150 FAM
Annual Maximum (per person)	\$2,000 per person	\$2,000 per person	\$2,000 per person
Out of Network Reimbursement	N/A	N/A	Max Allowable Charge (MAC)
Diagnostic & Preventive Exams, cleanings, x-rays	Plan pays 100%	Plan pays 100%	Plan pays 100%
Basic Services Fillings, extractions, endodontics, periodontics, general anesthesia	Plan pays 80%	Plan pays 80%	Plan pays 80%
Major Services Crowns, prosthodontics, implants	Plan pays 50%	Plan pays 50%	Plan pays 50%
Orthodontia Max (Children through age 18)	60% up to \$2,000 per child	60% up to \$2,000 per child	60% up to \$2,000 per child

\*Reimbursements based on PPO contracted fees for PPO dentists, PPO contracted fees for Premier dentists and PPO contracted fees for Non-Delta Dental dentists.

### Dental Plan Associate Costs

	Per Month	Per Pay Period
Emp Only	\$11.90	\$5.95
Emp + Spouse	\$22	\$10.15
Emp + Child(ren)	\$35	\$16.15
Emp + Family	\$57	\$26.31

## BASIC LIFE INSURANCE

Administered by Anthem

Life insurance can help provide for your loved ones if something were to happen to you. Teknova provides eligible associates with one year's Base Annual Earnings up to \$250,000 in group life and accidental death and dismemberment (AD&D) insurance.

Teknova pays for the full cost of this benefit—meaning you are not responsible for paying any monthly premiums.

## VISION INSURANCE

Administered by Anthem (Group # is: 282192)

Teknova's vision insurance entitles you to specific eye care benefits. Our policy covers routine eye exams and other procedures, and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses. For a list of in network providers please visit <https://www.anthem.com/ca/find-care/>

Services	In Network	Out of Network
Eye Exam (covered once/calendar yr)	\$25	Reimbursed up to \$49
Standard Lenses (covered once/calendar yr)	\$No copay	Single: Reimbursed up to \$35 Bifocal: Reimbursed up to \$49 Trifocal: Reimburse up to \$74
Frames (covered once/calendar yr)	\$130 Allowance 20% discount on remaining balance	Reimbursed up to \$50
Elective Non-disposable Contact Lenses (covered once/calendar yr)	\$130 Allowance	Reimbursed up to \$92
Medically Necessary Contacts (covered once /calendar yr)	Covered in full	Reimbursed up to \$250

### Vision Plan Associate Costs

	Per Month	Per Pay Period
Emp Only	\$2.56	\$1.18
Emp + Spouse	\$5.11	\$2.36
Emp + Child(ren)	\$5.24	\$2.42
Emp + Family	\$7.50	\$3.46

## DISABILITY INCOME BENEFITS

Administered by Anthem

Teknova provides associates who are regularly scheduled for 30 hours or more a week with short- and long-term disability income benefits. Teknova pays for the full cost of short- and long-term disability insurance.

	Short-term Disability	Long-term Disability
Benefits Begin	On the 8th day following an injury/illness	On the 121st day following an injury/illness
Benefits Payable	12 Weeks	Until you reach normal Social Security normal retirement age (SSNRA)
% of Income Replaced	66.67%	66.67%
Max Benefit	Up to \$2,500 weekly	\$12,500 monthly

\* Disability benefits paid to you would be considered taxable income



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## VOLUNTARY LIFE INSURANCE

Administered by Anthem (***Paid by You***)

While Teknova offers basic life insurance, some associates may want to purchase additional coverage. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future (for example, college tuition for your child)? Depending on your needs, you may want to consider buying supplemental coverage. With voluntary life insurance, you are responsible for paying the full cost of coverage through biweekly payroll deductions. You can purchase coverage for yourself or for your spouse in \$5,000 increments. The minimum coverage level is \$10,000 and the maximum is \$500,000.

	Benefit Amount and Maximum	Guaranteed Issue Amount
Associate	\$10,000 increments to \$500,000 (or 5X annual earnings, whichever is less)	\$150,000
Spouse	Increments of \$5,000 up to \$50,000 max	\$30,000
Child(ren)	\$5,000 or \$10,000	\$10,000

\* Dependent coverage cannot exceed 50 % of associate's coverage election.

## HEALTH SAVINGS ACCOUNTS (HSA)

Administered by ThrivePass

Health savings accounts (HSAs) are a great way to save money and budget for qualified medical expenses. HSAs are tax-advantaged savings accounts that accompany high deductible health plans (HDHPs). HDHPs offer lower monthly premiums in exchange for a higher deductible (the amount you pay before insurance kicks in).

Coverage Level	2023 IRS Annual Max	Teknova Annual Contribution	Max Associate Contribution
Associate Only	\$3,850	\$1,000	\$2,850
Associate + Family	\$7,750	\$2,000	\$5,750

\*If you are age 55 or older, you may make an additional "catch-up" contribution of \$1,000. You may change your contribution amount at any time throughout the year as long as you don't exceed the annual maximum.

## FLEXIBLE SPENDING ACCOUNTS (FSA)

Administered by ThrivePass

A flexible spending account (FSA) is an account that reimburses you for qualified health care or dependent care expenses. It allows you to fund qualified expenses with pre-tax dollars deducted from your paycheck. Teknova allows you to roll over up to \$610 at the end of the year to be used in the next plan year. You have 60 days after the plan year to be reimbursed for claims incurred during the plan year. **For 2023, the annual max is \$3,050.**

Dependent Care FSAs allow you to contribute pre-tax dollars to qualified dependent care. The maximum amount you may contribute each year is \$5,000 (or \$2,500 if married and filing separately). A 2 1/2 month grace period is allowed after the end of the plan year.

## EMPLOYEE ASSISTANCE PROGRAM (EAP)

Administered by Health Advocate

The nation's leading healthcare advocacy and assistance company. Short-term counseling and resources help members with personal, family and work/life concerns; includes 24/7 organizational support to stabilize and minimize the impact of disruptive events and sensitive employee issues in the workplace. Access to 6 counseling sessions (in person, telephonic, video, chat)

## HEALTH ADVOCACY

Administered by Health Advocate

Health Advocate's award-winning Health Advocacy program helps you navigate complex healthcare and insurance-related issues, saving you both time and money. Their fully integrated program, EmpoweredHealth seamlessly combines services into a single convenient solution, helping you efficiently maximize your benefits.

## ACCIDENT INSURANCE

Administered by The Hartford (***Paid by You***)

This insurance offers added financial protection by paying you a cash benefit if you or a covered dependent are injured as the result of a covered accident. Accident benefits are intended to help associates and their loved ones handle the out-of-pocket expenses and unexpected bills that can follow an accidental injury. Lump sum benefits are paid to you (or designated beneficiary), based on the amount stated in the schedule of benefits.

Accident Insurance	
Ground Ambulance	\$750
Appliance	\$200
Emergency Room	\$200
Follow-Up Treatment	\$100; 3x/accident (within 90 days)
Urgent Care	\$150 (within 72 hours)
X-ray	\$150
Concussion	\$200
Closed Dislocations	Shoulder - \$2,000; Fingers - \$500
Closed Fracture	Wrist - \$2,000; Fingers - \$500
Eye Injury	Up to \$400
Lacerations	Up to \$1,000

### Accident Insurance Plan Associate Costs

	Per Month	Per Pay Period
Emp Only	\$13.52	\$6.24
Emp + Spouse	\$21.52	\$9.93
Emp + Child(ren)	\$23.08	\$10.65
Emp + Family	\$36.22	\$16.72



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## CRITICAL ILLNESS INSURANCE

Administered by The Hartford (*Paid by You*)

A lump sum benefit is payable for a covered person when diagnosed with any covered critical illness while insurance is in effect, subject to the coverage maximum and the pre-existing condition limitation. For some covered illnesses, 100% of the coverage amount is payable, and for others, a partial benefit – less than 100% of the coverage amount – is payable. Rates vary by age.

Critical Illness Insurance	
Invasive Cancer	\$20,000
Non- Invasive Cancer	\$5,000
Heart Attack & Stroke	\$20,000
Major Organ Transplant/Failure	\$20,000
Multiple Sclerosis	\$5,000
Benign Brain Tumor	\$20,000
Coronary Artery By-Pass Surgery	\$5,000
Parkinson's Disease	\$20,000
Alzheimer's Disease	\$20,000
Non-Melanoma Skin Cancer	\$250
Additional Occurrence; Waiting Period	100%; 6 months
Re-occurrence; Waiting Period	100%; 6 months
Health Screening	\$50

## HOSPITAL INDEMNITY INSURANCE

Administered by The Hartford (*Paid by You*)

The added financial stress of being in the hospital can make recovery from an accident or serious illness more challenging. Even with the best primary health insurance plan, out-of-pocket costs from a hospital stay can add up. This insurance pays a fixed indemnity benefit for each day you or a covered dependent is confined in a hospital for a covered event, with additional daily benefits for related services. These benefits can help offset expenses that primary health insurance doesn't cover (like deductibles, co-insurance amounts or co-pays), or benefits can be used for any non-medical expenses (like housing costs, groceries, car expenses, etc.). Lump sum benefits are paid to you (or designated beneficiary) based on the amount stated in the schedule of benefits.

Hospital Indemnity Insurance	
Initial Hospital Admission	\$1,000
Daily Hospital Confinement	\$200; 30 days/stay
Daily ICU Confinement	\$200; 10 days/stay
Rehab Facility	N/A
Maternity	Yes
Health Screening	\$50

## Hospital Indemnity Insurance Plan Associate Costs

	Per Month	Per Pay Period
Emp Only	\$19.95	\$9.21
Emp + Spouse	\$46.55	\$21.48
Emp + Child(ren)	\$41.49	\$19.15
Emp + Family	\$71.66	\$33.07

## LegalEASE

Administered by Legal Access (*Paid by You*)

LegalEASE can help ease the two biggest stresses – finding and paying for an attorney. Nobody likes to be caught off guard, especially when it comes to legal matters. Life can be complicated. Finding a good attorney doesn't have to be. With LegalEASE, it's easy to choose the best attorney, because you get assistance from highly trained and qualified personal specialists who review the details of local attorneys and help you find your best source for legal advice. Being a LegalEASE member saves you time and costly legal fees. But most importantly, it gives you confidence and provides coverage for common legal matters.

- HOME & RESIDENTIAL**  
 Purchase of Primary Residence, Sale of Primary Residence, Refinancing of Primary Residence, Vacation or Investment Home Sale/Purchase/Refinancing, Tenant Dispute, Tenant Security Deposit Dispute, Landlord Dispute with Tenant, Security Deposit Dispute with Tenant, Construction Defect Dispute, Neighbor Dispute, Noise Reduction Dispute, Foreclosure
- AUTO & TRAFFIC**  
 Traffic Ticket, Serious Traffic Matters (Resulting in Suspension or Revocation of License), Administrative Proceeding (Regarding Suspension or Revocation of License), First-time Vehicle Buyer, Vehicle Repair and Lemon Law Litigation, DUI/DWI Defense
- ESTATE PLANNING & WILLS**  
 Will or Codicil, Complex Will, Living Will, Health Care Power of Attorney, Living Trust Document, Probate of Small Estate
- FINANCIAL & CONSUMER**  
 Debt Collection: Pre-litigation Defense & Trial Defense, Bankruptcy (Chapter 7 or 13), Tax Audits, Document Preparation, Consumer Dispute, Small Claims Court, Mail Order or Internet Purchase Dispute, Bank Fee Dispute, Cell Phone Contract Dispute, Warranty Dispute, Healthcare Coverage Disputes and Records, Student Loan Refinancing/Collection Defense, Identity Theft Defense, Financial Advisor
- FAMILY**  
 Separation, Divorce, Prenuptial Agreement, Name Change, Guardianship/Conservatorship, Adoptions, Juvenile Court Proceedings
- GENERAL**  
 Civil Litigation Defense, Incompetency Defense, Initial Law Office Consultation, Review of Simple Documents, Discounted Contingency Fees, Mediation, Misdemeanor Defense, Identity Theft Assistance

## LegalEASE Plan Associate Costs

	Per Month	Per Pay Period
Associate, Spouse, & Dependent Children Up to age 19; Age 19-26 enrolled full-time at an accredited university	\$19.79	\$9.13