

**Arkema Inc. Employee
Assistance Program and
Work/Life Services
Summary Plan Description**

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Disclaimer Note

This summary plan description describes certain benefits as they apply to eligible employees. Complete details about the benefit plan are in the legal plan documents. If there is any difference between the information provided in this summary plan description and provisions of the legal plan documents, the plan documents govern. Arkema Inc. reserves the right to terminate, suspend, withdraw, amend or modify any of the plans at any time and for any reason.

About This Summary Plan Description

This summary plan description (SPD) summarizes the employee assistance and work/life services components (referred to in this document as the “plan” or “EAP”) of the Arkema Inc. Flexible Benefits Plan, effective June 1, 2021. It describes the benefits as they apply to eligible employees of Arkema Inc. (the Company). Certain policy limitations and exclusions apply to coverage. Complete details of the plan are contained in the official plan document. If there is any difference between the information in this SPD and in the official plan document, the plan document will govern.

Arkema reserves the right to modify, suspend or amend the plan described in this document at any time, in whole or in part. This means the plan may be discontinued in its entirety, changed to provide different levels of benefits and/or cost sharing between the Company and employees. Any such change or termination shall be solely at the discretion of the Company. If such termination or change occurs, participants will be promptly notified.

We encourage you to read this SPD carefully and share it with your family members. If you have any questions about your benefits, please contact the Arkema Benefits Center at 1-800-406-9823. You may also access *Arkema Benefits Online* web site at **benefits.myplansconnect.com/Arkema** for more benefits information.

This Summary Plan Description (SPD) should be read in connection with the Medical Plan SPD. Keep this SPD and other applicable SPDs for your future reference when you want to find details about Arkema-sponsored benefit plans and programs. When changes are made to these programs, Arkema communicates those changes to participants. In many, but not all instances, changes are communicated through Summaries of Material Modifications (SMMs). SMMs are frequently part of the Open Enrollment materials. Please keep the communications that notify you of changes in the employee benefit programs with this document for future reference.

Eligibility and Enrollment

This booklet includes important information about your participation in the Employee Assistance Program (EAP) component of the Arkema Inc. Flexible Benefits Plan, including eligibility information, paying for coverage and when coverage ends.

Eligibility

If you are not covered by a labor contract, you are eligible to participate in the EAP only if you are a regular, full-time employee or a regular, part-time employee who is regularly scheduled to work at least 20 hours per week. A person in any other status is not eligible for coverage under the EAP.

You and your eligible dependents may participate in the EAP any time after you join the Company.

An employee who is covered by a collective bargaining agreement is eligible to participate only if the applicable labor contract incorporates the Employee Assistance Plan benefits, and if the employee meets the eligibility requirements described above and as set forth in the collective bargaining agreement.

Your Eligible Dependents

The EAP is also available to all members of your household, including:

- Your lawfully married spouse, including your common-law spouse in states where such relationships are recognized.
- Your children until the end of the month in which they turn age 26.
- Your disabled children, regardless of their age, provided they became disabled before age 26 while covered under the plan.
- Any other child(ren) for whom you are considered the legal guardian as defined by a court order or when a court order requires health insurance for the child to be supplied by an employee (for example, Qualified Medical Child Support Order (QMCSO)) until date stated in the order, but in no event beyond the end of the month in which the child reach ages 26.

Your child(ren) are your:

- Natural children,
- Stepchildren,
- Legally adopted children, and
- Children who are placed in your home for adoption.

Disabled Child(ren)

You must provide written proof of your child's disability to the Claims Administrator within 31 days after the date eligibility would otherwise end and as requested thereafter. This eligible dependent must still meet all other eligibility qualifications for coverage to be continued.

Qualified Medical Child Support Order

Any child of an employee who is an alternate recipient under a Qualified Medical Child Support Order (QMCSO) will be considered as having a right to dependent coverage under the plan. In general, a QMCSO is any judgment, decree or order, including a court-approved settlement agreement, issued by a domestic relations court or other court of competent jurisdiction, or through an administrative process established under state law which has the force and effect of law in that state, and which assigns to a child the right to receive health benefits for which an employee is eligible under the plan, and that the Plan Administrator determines is qualified under the terms of ERISA and applicable state law. A dependent child will become covered as of the date specified in a judgment, decree or order issued by a court of competent jurisdiction or through a state administrative process. For a description of Arkema procedures for a QMCSO, free of charge, contact the Arkema Benefits Center at 1-800-406-9823, Monday through Friday from 9:00 a.m. to 6:00 p.m. Eastern Time to speak with a Benefit Representative.

Cost of Coverage

The EAP is paid for by the Company and is available to you and your eligible dependents at no cost to you.

Coordination With Your Medical Program

In some cases, the EAP may recommend follow-up or continuing treatment, including:

- Inpatient or outpatient care for alcoholism or drug abuse
- Most work-related issues, including stress and performance issues
- Family issues involving children, spouses and elderly parents
- Professional outpatient visits to a licensed physician, psychiatrist, psychologist, social worker or other Master's or Doctoral-level mental health professional, which may be covered under the regular provisions of the Arkema medical plan. Please refer to the Arkema Medical Plan SPD for more information.

Note that under the EAP component of the Arkema Inc. Flexible Benefits Plan, the Company also pays 100% of the cost for up to eight counseling sessions per issue or problem per year with a Participating EAP Provider, for you and each of your eligible household members. The EAP also offers 24/7 phone access to professionals for assessment and referral at no cost. The program increased the number of free sessions from five to eight effective June 1, 2021.

Your Right To Privacy

Your right to privacy is fully protected by law and by Company policy. Participation will not jeopardize your job or your chance for promotion.

The EAP respects confidentiality as protected under state and federal laws, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA). This means that your contacts with any Aetna EAP affiliate will remain private. If you contact Aetna on your own, through self-referral, no one at the Company will know. And, if your supervisor refers you,

there's no obligation to report whether or not you have contacted the EAP or how you are progressing, unless your referral is part of an overall performance improvement plan or a condition of your continued employment and you give your written consent. Management Referrals may require an employee to participate and comply with the EAP recommendation as part of your continuing employment, and for the employee to consent to the sharing of certain information.

The Aetna EAP and its affiliates will never release names of the employees they see—unless an employee gives express written permission to do so. Aetna only tells the Company the number of people they see along with some group data regarding typical kinds of presenting issues and other non-identifying information.

When Coverage Ends

In general, coverage under the plan will end at midnight on the day eligibility is lost. Coverage may also end for other reasons, such as:

- The date the plan is canceled,
- The date coverage for your benefit class is canceled, or
- 90 days following the date on which employment is terminated.

Your dependent's coverage will end on the day eligibility is lost for any of the following reasons:

- Your coverage ends,
- Your dependent no longer meets the definition of a dependent,
- Your dependent becomes covered as an employee,
- Your eligible dependent(s) goes on active duty in the armed forces of any country, or
- Your dependent child reaches the maximum age limit.

You and your eligible dependents may be able to continue your Company EAP coverage through the Consolidated Omnibus Budget Reconciliation Act (COBRA) (see the Arkema Medical Plan SPD for details).

COBRA Continuation

A federal law, the Consolidated Omnibus Budget Reconciliation Act (COBRA), requires that most employers sponsoring group health plans offer employees and eligible dependents the opportunity for a temporary extension of coverage (called "continuation coverage") at group rates in certain instances where coverage under the plan would otherwise end (called "qualifying events"). For more information about your rights and obligations under the continuation coverage provisions of the federal law, please see the Arkema Medical Plan summary plan description.

How the Plan Works

Employees and household members can confidentially address and resolve personal and workplace challenges through the Employee Assistance Program (EAP) and Work/life Services.

To contact the EAP directly and confidentially, call toll-free at 1-877-851-9081, 24 hours a day, 7 days a week, or visit **www.resourcesforliving.com** (login: Arkema, password: EAP). The Aetna EAP staff will take your information, assess your situation, and help you find an appropriate provider or resources.

To set up a personal account on the www.resourcesforliving.com website, you first need to log into the www.resourcesforliving.com website for Arkema. Once there, scroll down and toward the top, you will see the option for setting up a personal account. Set up your personal account. Once you do this, you don't have to log into the main member website all the time. There will be a personal login area on the main page that can be used. Just click that, enter your own username and password, and you will be in your personal account which will show your preferred content.

The Company also pays 100% of the cost for up to eight counseling sessions per issue or problem per year with a Participating EAP Provider for you and each of your eligible household members. Effective June 1, 2021 the number of free sessions increased from five to eight sessions per issue per year.

The EAP also offers 24/7 phone access to professionals for assessment and referral at no cost.

If you use all eight of your available sessions per issue, you and your counselor decide on follow-up treatment. If you or your dependents are covered by the Company's medical plan, the medical plan may pay a portion of the cost. You are encouraged to look for Aetna in-network providers to ensure you receive the highest available benefit coverage.

Employee Assistance Program

Self-Referral

You and your household members may contact the EAP on your own. The Company is not informed of any self-referrals unless you request it.

Management Referral

The EAP is generally most effective when you access it voluntarily, but there may be circumstances, determined at Arkema's discretion that includes, but is not limited to, a pattern of decreasing performance (such as excessive absences or lateness, drop in productivity, conflicts with others, or other behavior), where your manager may feel the need to suggest or require that an employee contact EAP.

Issues Covered

While counseling cannot guarantee that an issue will be solved, it is often the critical first step toward a solution. The following are some examples of the issues for which your EAP can provide help:

- Stress related to work, family and personal life
- Balancing work and family
- Coping with change and transition
- Anxiety or depression
- Grief and bereavement
- Marital*, family and parent-child issues
- Issues with alcohol and drugs
- Financial and legal concerns

What Does the EAP Include?

- Up to eight counseling sessions per issue or problem per year with a Participating EAP Provider for you and each of your eligible household members, at no cost to you. Effective June 1, 2021, the number of sessions increased from five sessions to eight sessions.
 - An issue is defined as being a problem or reason for contacting the EAP. A problem may constitute a single, unique unsettled matter, or a number of identified problems, depending on the situation.
 - A new issue or problem is determined by a new or separate set of circumstances in which you are seeking help, or a new reason you are seeking help.
- 24/7 phone access to professionals, 365 days a year for assessment and referral
- Website access: www.resourcesforliving.com (login: Arkema, password: EAP)
- Toll-free number: 1-877-851-9081
- Legal and financial services, including an initial 30-minute consultation for each issue

** Sessions are not authorized individually for each person to attend couples counseling, even if the couple are each Arkema employees or covered under separate plan sponsors with EAP benefits. In a case with two different available EAP benefit plans, the richer of the two plans would be available to individuals seeking EAP services.*

Talkspace

Effective August 1, 2021, the EAP program offers an online therapy platform called TalkSpace. Talkspace makes it easy and convenient for you to connect with a licensed behavioral therapist—from anywhere, at any time. Best of all, it's free and secure for you to use.

With Talkspace, you can connect with a dedicated therapist via web browser or the Talkspace mobile app and you won't have any commutes, appointments or scheduling hassles. You can use the platform to connect with a therapist on the same kinds of issues you'd talk about face-to-face such as:

- Stress management
- Work/life balance

- Family issues
- Grief and loss
- Depression
- Anxiety
- Substance misuse
- Self-esteem
- Personal development and more

How it works

Talkspace uses chat to connect you with your dedicated therapist via text, video or audio messages whenever you like. Your therapist will respond within one working day up to five days a week. Without making an appointment or driving to a provider's office, chat therapy can help you:

- Lower your stress even when life keeps you super-busy
- Make time for self-care
- Set and work toward your goals

To get started messaging a therapist, simply log on to your member website to sign up for chat therapy today. Each calendar week of texting from the time you first text a therapist, counts as one of your 8 free EAP sessions per issue. There's no limit to the number of messages you can send your therapist each day. You can continue to access chat therapy services after you have completed your EAP (or pre-paid) sessions.

Please note: Chat therapy is for individual counseling for members 13 years of age and older. You have 120 days from the date you sign up to use your sessions. Chat therapy should not be considered for meeting requirements for employment, school enrollment, disability or legal documentation.

After you sign up:

- You will always message the same therapist unless you request to change providers.
- Your therapist will reply to you daily, during their business hours—five days a week.
- You'll never need to make an appointment or reschedule it because something came up.
- Whether on the go or at home, you can access Talkspace securely via your web browser or mobile app.

Taking care of your mental health can help you live a happier, healthier, and more productive life both on and off the job.

myStrength Tools

myStrength is an online wellness portal to help enhance your emotional wellbeing. You can use it to support your mind, body and spirit with tools to improve your emotional health and help you overcome depression, anxiety, stress, substance misuse and/or chronic pain. Best of all, it's a free part of your EAP program.

myStrength is:

- Clinically proven
- Easy to use
- Free and available 24/7
- Confidential

How it works

Sign-up for myStrength by registering from the link on your EAP member website. Then, start exploring all that myStrength has to offer.

Once you set up myStrength, you'll log on to a home page created just for you. From your home page, you can read articles, watch videos and try eLearning programs, or just get inspired by the daily quote.

MyStrength services do not count toward your 8 EAP sessions per issue per calendar year. You can also get inspired on the go with the myStrength mobile app. Sign on to the app to:

- Get custom inspiration right on your smartphone
- Track your mood over time
- Upload your own inspiring photos and videos
- Opt to receive check-in reminders

Legal and Financial Services

If you need assistance with a legal or financial issue, the EAP may be able to help. As an Arkema employee, you and any of your dependents are entitled to one initial 30-minute consultation for each issue.

Legal/Financial Services benefits include:

- Twenty-five percent discount when retaining attorney services
- Will preparation and review
- 60-minute telephonic fraud resolution consultation for identity theft
- Mediation services
- Investment planning
- Retirement preparation
- Family/Domestic law

Legal Services

An initial 30-minute consultation is available with a selected participating attorney on an unlimited number of new Legal Topics (each plan year) at no cost to you and any of your dependents.

If you choose to continue with the participating attorney and hire that attorney on your own, you will receive a 25% discount off of the participating attorney's fees for normal services beyond the initial consultation (excluding flat legal fees, contingency fees, and plan mediator services). You are responsible for the cost of all services beyond this benefit, including court costs, filing fees, penalties and fines.

Typical legal matters that might require assistance include:

- Family law (contested divorce, custody issues, domestic violence)
- Real estate matters
- Consumer/financial (bankruptcy, contractual disputes, landlord/tenant issues)
- Simple wills and probate
- Auto-related (DUI, traffic tickets, collection/personal injury)
- Elder law and estate planning (Social Security, Medicare, trusts)
- Simple dispute resolution

Legal services cannot be used for action against the employer or for any other employment related issues.

Certain topic areas are excluded, including employment law. Also excluded are matters that, in the attorney's opinion, lack merit.

Financial Services

An initial 30-minute consultation is available with a selected participating financial counselor on an unlimited number of new Financial Counseling Topics (each plan year) at no cost to you and any of your dependents.

Typical financial matters that might require assistance include:

- Credit counseling
- Debt management and budgeting assistance
- Tax return preparation
- Retirement preparation and college funding

If you require additional services beyond the first consultation, you may be referred to additional resources. You are responsible for the cost of all services beyond the 30-minute consultation.

Work/Life Services

In today's complex world, balancing personal needs with the demands of work and family presents many challenges. The Work/Life Service is designed to help you balance work and home-based responsibilities by providing consultation, assessment, education, resources and referrals for issues throughout your life cycle. Specific service components include: Child Care, Adoption, Educational Resources, Elder Care and Dependent Adult Care.

Work/Life Services are available to all employees and their eligible dependents. There is no charge to you for these services. Work/Life Services are provided in addition to your eight free counseling sessions with a Participating EAP Provider. (The number of free sessions increased from five to eight effective June 1, 2021.) You are, however, responsible for the cost of any care you may select for your family. All information that you share with the service providers and the services you and your family receive are confidential. To access Work/Life Services, simply call 1-877-851-9081, 24 hours a day, 7 days a week or visit www.resourcesforliving.com (login: Arkema, password: EAP).

The work/life specialist will discuss your issue with you in depth, asking many questions to help you focus and to understand exactly what you need. Within 3 business days, you will receive pertinent literature as well as a list of referrals to providers that can provide the care or services you need. Detailed information on services, facilities and costs will be provided, such as:

Child Care Consultation	Referrals to local child care providers, such as day care centers, family care homes, in-home care, school age care, or summer and emergency care, as needed. Information is given to help you select, evaluate and monitor providers. Additional resource materials are available on child development and parenting.
Adoption Consultation	Referrals to local adoption resources are provided as well as additional resource materials such as description of types of adoptions and potential costs.
Educational Resources	Supplies analysis of various colleges that might fit your needs; includes details on each college, such as enrollment size, location, fees, fields of study, as well as information about financial aid and scholarships The K-12 Service helps parents with children in kindergarten through high school in choosing schools and communities.
Elder and Dependent Adult Care	Referrals are given after in-depth discussions of your needs. Examples include day care centers, in-home care, assisted living facilities and nursing homes. Information available might include how to evaluate a service provider, planning for legal and financial needs, health topics and how to cope with the stress of care giving.

The Aetna EAP administers Work/Life Services. The service provides employees with referrals, not recommendations. While every effort will be made to give you the information and tools you need to make informed choices, you and your family must decide which options or resources best meet your needs and expectations.

Resources to Support Your Wellbeing during COVID-19

The EAP offers a variety of resources to help you cope during this challenging time. Visit the COVID-19 Resource Center at www.resourcesforliving.com/articles/covid-19-resource-center.

(Login: Arkema, Password: EAP) to access live and recorded webinars, podcasts, articles, and more on topics like managing stress and anxiety, parenting during COVID-19, social distancing, and self-care.

Additional Rules That Apply To This Plan

The following rules apply to this plan to the extent they are applicable to the Employee Assistance Program.

Your HIPAA Rights

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law enacted to provide improved portability and continuity of health insurance coverage for employees and dependents.

About Your Privacy and Security

HIPAA also imposes numerous requirements on employer health plans concerning the use and disclosure of individual health information. This information, known as protected health information, or PHI, includes virtually all identifiable health information held by any health plan, whether received in writing, in an electronic medium, or as an oral communication.

Arkema has implemented policies and practices to appropriately protect the privacy of your PHI. PHI that you provide will be handled in accordance with the Company's HIPAA privacy policy. For more information, see *Compliance with Privacy and Security Regulations* on page 19.

How to Reach Your EAP Service Provider

Here is how you can reach your EAP service provider:

Plan	Telephone Number	Web Site Address
Employee Assistance Program and Work/Life Services	1-877-851-9081	www.resourcesforliving.com (login: Arkema, password: EAP)
<p>To set up a personal EAP account you first need to log into the main www.resourcesforliving.com member website for Arkema. Once there, scroll down slightly, and you will see the option for setting up a personal account. Once you have created a personal account login, you don't have to log into the main member website. You can just go to the sign-in page and use the personal login, enter your own username and password to use your personal account where you can see content that you have indicated is of interest to you.</p>		

Administrative Information

This section of the booklet includes administrative information, as well as material specified by the Employee Retirement Income Security Act of 1974 (ERISA). Under ERISA, you are entitled to receive a clear and accurate description of your benefits. Therefore, the information in this section complements the material in the other sections so that together they provide a complete Summary Plan Description, as defined by ERISA.

Plan Sponsor

Arkema Inc.
Benefits Department
900 First Avenue
King of Prussia, PA 19406

Plan Name

Arkema Inc. Flexible Benefits Plan, of which the EAP is a component plan

Plan Number

501

Plan Type

Welfare plan providing employee assistance and work/life services

Plan Year

January 1 through December 31

Employer Identification Number

23-0960890

Plan Administrator

Arkema Inc.
Health & Welfare Benefits Department
900 First Avenue
King of Prussia, PA 19406

Benefits Administrator

Arkema Benefits Center
P.O. Box 9740
Providence, RI 02940

The Plan Administrator is responsible for the general administration of the EAP, and will be the fiduciary to the extent not otherwise specified in this document or in an insurance contract or administrative services agreement. The Plan Administrator has the discretionary authority to construe and interpret the provisions of the EAP and make factual determinations regarding all aspects of the EAP and its benefits, including the power and discretion to determine the rights or eligibility of employees and any other persons, and the amounts of their benefits under the EAP, and to remedy ambiguities, inconsistencies or omissions, and such determinations shall be binding on all parties.

The Plan Administrator may designate other organizations or persons to carry out specific fiduciary responsibilities in administering the EAP including, but not limited to, the following:

- Pursuant to an administrative services or claims administration agreement, if any, the responsibility for administering and managing the EAP, including the processing and payment of claims under the plan and the related recordkeeping,
- The responsibility to prepare, report, file and disclose any forms, documents and other information required to be reported and filed by law with any governmental agency, or to be prepared and disclosed to employees or other persons entitled to benefits under the EAP, and
- The responsibility to act as Claims Administrator and to review claims and claim denials under the EAP to the extent an insurer or administrator is not empowered with such responsibility.

The Plan Sponsor will administer the EAP on a reasonable and nondiscriminatory basis and shall apply uniform rules to all persons similarly situated. Except to the extent superseded by laws of the United States, the laws of the state of Pennsylvania will be controlling in all matters relating to the Arkema Inc. Employee Assistance Program and Work/Life Services.

Employee Assistance Program and Work/Life Services Administrator

Aetna Behavioral Health
151 Farmington Avenue
Hartford, CT 06156

Agent for Service of Legal Process

Arkema Inc.
c/o Legal Dept.
900 First Avenue
King of Prussia, PA 19406

Program Funding and Type of Program Administration

The EAP is an insured benefit. Benefits are provided under a group insurance contract entered into between Arkema and the Claims Administrator. Claims for benefits are sent to the Claims Administrator who is responsible for paying claims, not the Plan Sponsor. However, the Claims Administrator and Arkema Inc. share responsibility for administering the plan.

Future of the Plan

While the Plan Sponsor intends to continue the plan indefinitely, the Plan Sponsor reserves the right to amend, modify, suspend, or terminate any plan, plan or any benefit coverage, in whole or in part, at any time without prior notice. For example, the Plan Sponsor reserves the right to amend or terminate covered expenses, and reserves the right to amend a plan to require or increase employee contributions or copays. The Plan Sponsor also reserves the right to amend a plan to implement any cost control measures that it may deem advisable. The Plan Sponsor may make any such amendment, modification, suspension, or may terminate the plan. The Plan Sponsor's decision to change or terminate any of the plans may be due to changes in the federal or state laws governing benefits, the requirements of the Internal Revenue Code or ERISA, or for any other reason.

Any amendment, termination or other action by the Plan Sponsor with respect to a plan will be by a duly adopted resolution of the Board of Directors or may be made by any person duly authorized to take such action on behalf of the Board. Amendments may be retroactive to the extent necessary to comply with applicable law. No amendment or termination will reduce the amount of any benefit otherwise payable under a plan for charges incurred prior to the effective date of such amendment or termination.

In the event of the dissolution, merger, consolidation or reorganization of the Plan Sponsor, the plan will terminate unless the plan is continued by a successor to the Program Sponsor.

If a benefit is terminated and surplus assets remain after all liabilities have been paid, such surplus shall revert to the Plan Sponsor to the extent permitted under applicable law, unless otherwise stated in the plan or plan.

Your Employment

Your eligibility or your right to benefits under the Arkema Inc. Employee Assistance and Work/Life Services should not be interpreted as a guarantee of employment. The Company's employment decisions are made without regard to the benefits to which you are entitled upon employment.

This SPD provides detailed information about the plan and how it works. This SPD does not constitute an expressed or implied contract or guarantee of employment.

Non-assignment of Benefits

EAP participants cannot assign, pledge, or borrow against any benefit payable under the EAP before receipt of that benefit. However, benefits will be provided to a participant's child if required by a Qualified Medical Child Support Order. In addition, subject to the written

direction of a EAP participant, all or a portion of benefits provided by the EAP may, at the option of the EAP, and unless a participant requests otherwise in writing, be paid directly to the person rendering such service. Any payment made by the Plan in good faith pursuant to this provision shall fully discharge the Plan and Arkema to the extent of such payment.

Misstatement of Fact

In the event of a misstatement of any fact affecting your coverage under the EAP, the true facts will be used to determine the coverage in force.

Your Legal Rights

As a participant in the EAP you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974 (ERISA). ERISA provides that all program participants shall be entitled to the following information.

Receive Information About Your Plan and Benefits

You have the right to examine, without charge, at the Plan Administrator's office, all documents governing the EAP, including insurance contracts and collective bargaining agreements, and a copy of the latest annual report (Form 5500 Series) filed by the plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.

You may obtain, upon written request to the Plan Administrator, copies of documents governing the operation of the EAP, including insurance contracts and collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and most recent Summary Plan Description. The Administrator may make a reasonable charge for the copies.

You have the right to receive a summary of the EAP's annual financial report. The Plan Administrator is required by law to furnish each participant with a copy of this summary annual report.

Prudent Actions by Program Fiduciaries

In addition to creating rights for EAP participants, ERISA imposes duties upon the people who are responsible for the operation of employee benefit plans. The people who operate your EAP, called "fiduciaries" of the EAP, have a duty to do so prudently and in the interest of you and other participants and beneficiaries. No one, including your employer, your union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a welfare benefit or exercising your rights under ERISA.

Enforce Your Rights

If your claim for a welfare benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of EAP documents or the latest annual report from the EAP and this is not placed in the mail to you or given to you within 30 days, you may file suit in a federal court. In such a case, the court may require the Plan Administrator to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the Administrator. If you have a claim for benefits which is denied or ignored, in whole or in part, you may file suit in a state or federal court. In addition, if you disagree with the EAP's decision or lack thereof concerning the qualified status of a domestic relations order or a medical child support order, you may file suit in federal court. If it should happen that EAP fiduciaries misuse the plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a federal court. The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if it finds your claim is frivolous.

Assistance with Your Questions

If you have any questions about your plan, you should contact the Arkema Benefits Center or the Plan Administrator. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, you should contact the nearest office of the Employee Benefits Security Administration (EBSA), U.S. Department of Labor, listed in your telephone directory or the:

Division of Technical Assistance and Inquiries
Employee Benefits Security Administration
U.S. Department of Labor
200 Constitution Avenue, NW
Washington, DC 20210
1-202-219-8776

You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the EBSA at 1-866-275-7922 or by visiting the EBSA web site at <http://www.dol.gov/ebsa>.

Compliance With Privacy and Security Regulations

The Company has certain obligations regarding the privacy and security of your medical information according to the provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Under privacy and security rules of HIPAA, and the regulations issued thereunder at 45 CFR Parts 160 and 164 (“the HIPAA regulations”), and as HIPAA and the HIPAA regulations were amended by the American Recovery and Reinvestment Act of 2009 (“ARRA”), a group health plan must: (i) restrict the use and disclosure of protected health information (“PHI”), (ii) ensure the confidentiality, integrity, and availability of all electronic protected health information (“e-PHI”) the plan creates, receives, maintains, or transmits, (iii) protect against any reasonably anticipated threats or hazards to the security and integrity of such information, (iv) protect against any reasonably anticipated uses or disclosures of such information that are not permitted or required under the HIPAA privacy rules set forth in 45 CFR Part 164, Subpart E, and (v) ensure compliance with the HIPAA security rules set forth in 45 CFR Part 164, Subpart C by its workforce.

Permitted Use and Disclosure of Protected Health Information

Arkema may only use and disclose Protected Health Information and e-PHI it receives from the EAP as permitted and/or required by, and consistent with the HIPAA Privacy regulations found at 45 CFR Part 164, Subpart A and the HIPAA security regulations set forth in 45 CFR Part 164, Subpart C. This includes, but is not limited to, the right to use and disclose participant’s Protected Health Information and e-PHI in connection with payment, treatment and healthcare operations. The EAP and Arkema, may disclose a Covered Employee’s PHI or e-PHI to Arkema (or to the agent of the Arkema) for the plan administration functions to the extent not inconsistent with HIPAA regulations. The EAP will not disclose PHI or e-PHI to Arkema, except upon receipt of a certification by Arkema that the EAP incorporates agreement, except as otherwise permitted or required by law. The EAP will disclose Protected Health Information and e-PHI to the Company only upon receipt of a certification by the Company that the plan documents have been amended to incorporate all the required provisions as described below:

Arkema agrees to:

- Not use or further disclose the information other than as permitted or required by the plan documents or as required by law.
- Ensure that any agents, including a subcontractor, to whom it gives Protected Health Information and e-PHI received from the EAP, agrees to the same restrictions and conditions that apply to the Company with respect to such information.
- Not to use or disclose the information for employment-related actions and decisions or in connection with any other benefit or employee benefit plan of the Company.
- Report to EAP, any use or disclosure of the information that is inconsistent with the uses or disclosures provided for, of which the Company becomes aware, including reporting any breach of unsecured PHI.

- Make available Protected Health Information in accordance with individuals' rights to review their Protected Health Information.
- Make available Protected Health Information for amendment and incorporate any amendments to Protected Health Information consistent with the HIPAA rules.
- Make available the information required to provide an accounting of disclosures in accordance with the HIPAA rules.
- Make its internal practices, books and records relating to the use and disclosure of protected information received from the EAP available to the Secretary of HHS for purposes of determining compliance by the EAP with HIPAA.
- If feasible, return or destroy all Protected Health Information and e-PHI received from the EAP that the Company still maintains in any form. The Company will retain no copies of Protected Health Information and e-PHI when no longer needed for the purpose for which disclosure was made. An exception may apply if such return or destruction is not feasible, but the EAP must limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible.
- Ensure that there is adequate separation between the EAP and Arkema by limiting employees with access to PHI, limiting access to and use of PHI to plan administration functions and by monitoring compliance. If individuals have violated any of the restrictions then such individual shall be disciplined in accordance with the policies of Arkema, up to and including dismissal from employment. Arkema maintains records of such violations along with the persons involved, as well as disciplinary and corrective measures taken with respect to each incident in each such person's Human Resource file.
- Notify a participant or participants of an unauthorized acquisition, access, use or disclosure of PHI that compromises the security or privacy of the information (a "Breach") without unreasonable delay in a report which includes the following information:
 - (1) the names of the individuals whose PHI was involved in the Breach;
 - (2) the circumstances surrounding the Breach;
 - (3) the date of the Breach and the date of its discovery;
 - (4) the information Breached;
 - (5) any steps the impacted individuals should take to protect themselves;
 - (6) the steps the Company is taking to investigate the Breach, mitigate losses, and protect against future Breaches; and
 - (7) a contact person who can provide additional information about the Breach.

Arkema will cooperate with you in the investigation of, and response to, the Breaches it reports to you. For this purpose, the term "Breach" means an unauthorized acquisition, access, use or disclosure of PHI that compromises the security or privacy of the information.

Security Agreements of the Company

As a condition for obtaining e-PHI from the Plan, its Business Associates, Insurers, and HMOs, Arkema agrees it will:

- Implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the electronic protected health information that it creates, receives, maintains, or transmits on behalf of the Plan;

- Ensure that the adequate separation between the Plan and the Company as set forth in 45 CFR 164.504(f)(2)(iii) is supported by reasonable and appropriate security measures;
- Ensure that any agent, including a subcontractor, to whom it provides this information agrees to implement reasonable and appropriate security measures to protect the information;
- Report to the Plan any Security Incident of which it becomes aware. For purposes of this section, “Security Incident” shall mean successful unauthorized access to, use, disclosure, modification or destruction of, or interference with, the e-PHI; and
- Upon request from the Plan, the Company agrees to provide information to the Plan on unsuccessful unauthorized access, use, disclosure, modification or destruction of the e-PHI to the extent such information is available to the Company.

Separation of the Company and Arkema Inc. Employee Assistance Program and Work/Life Services

The following employees or classes of employees or other persons under the control of the Company shall be given access to Protected Health Information and e-PHI:

- Sr. Vice President — Human Resources, Communications and Site Services
- Sr. Director — Compensation, Benefits, and M&A
- Manager – Health & Welfare Benefits
- Sr. Health & Welfare Data Analyst
- Deputy General Counsel
- General Counsel

The access to and use of PHI by the individuals described above, is limited to Plan Administration functions as defined in HIPAA regulation 45 CFR §164.504(a) that are performed by Arkema for the Plan.

If Arkema or any other person(s) responsible for monitoring compliance determines that any person described above, has violated any of the restrictions of this section, then such individual shall be disciplined in accordance with the policies of Arkema established for purposes of privacy compliance, up to and including dismissal from employment. Arkema shall arrange to maintain records of such violations along with the persons involved, as well as disciplinary and corrective measures taken with respect to each incident.

If you have a concern and feel your privacy rights have been violated, you should contact Arkema Inc. Corporate Human Resources Services at 1-215-419-7349. You may also submit a written complaint to the U.S. Department of Health and Human Resources or go to their web site at www.hhs.gov for the address and more information.

PHI not Subject to this Section

Notwithstanding the foregoing, the terms of this section shall not apply to uses or disclosures of Enrollment, Disenrollment, and Summary Health Information made pursuant to 45 CFR 164.504 (f)(1)(ii) or (iii); of PHI released pursuant to an Authorization that complies with 45 CFR 164.508; or in other circumstances as permitted by the HIPAA regulations; provided however that paragraph 4 above shall apply if and only if e-PHI beyond enrollment,

disenrollment, summary health information, and authorized disclosures is obtained by the Company, and the Company adopts the literal interpretation of 45 CFR 164.314(b)(1), which would apply paragraph 4 unless the only e-PHI obtained is enrollment, disenrollment, summary health information, or authorized disclosures.