Visit **NidecMiddleportUnion.com** or scan the QR code for details about each of the benefits offered to you by Nidec.

2026 Benefits

Your Nidec Benefits At-A-Glance Brochure

Middleport Union

This brochure is the first step on your journey to well-being. Use it as a resource during enrollment and throughout the year. More details about all your benefits are available at **NidecMiddleportUnion.com**

Nidec
All for dreams

YOUR BENEFITS YOUR FUTURE
Your Health, Your Wellness and Your Financial Security

Visit **NidecMiddleportUnion.com** or scan the QR code for details about each of the benefits offered to you by Nidec.

Information About Several of Your Benefits

Medical

Nidec partners with BlueCross BlueShield of Alabama to offer you and your eligible dependents healthcare insurance through a Preferred Provider Organization (PPO). When you receive care in-network, you benefit from our negotiated discounts and greater plan coverage for your services. You will pay a copay for certain primary care visits to your doctor or a specialist. The following chart provides an overview of the plan. Nidec also offers eligible employees access to Hinge Health (for joint and muscle care).

	BlueCross BlueShield of Alabama PPO	
	In-Network	Out-Of-Network
Calendar Year Deductible		
Individual	$250	$500
Family	$500	$1,000
Out-of-Pocket Maximum (includes deductible)		
Individual	$1,100	$2,200
Family	$2,200	$4,400
Hospital Services		
Inpatient	Deductible then 10% coinsurance	Deductible then 30% coinsurance
Outpatient	Deductible then 10% coinsurance	Deductible then 30% coinsurance
Office Visits		
Preventive Care	100% covered	Deductible then 30% coinsurance
Primary Care Physician	$10 copay	Deductible then 30% coinsurance
Specialist	$10 copay	Deductible then 30% coinsurance
Urgent Care	$10 copay	
Emergency Room	Deductible then 10% coinsurance	
Prescription Drugs		
Retail (30-day supply)		
Tier 1	20% coinsurance*	20% coinsurance*
Tier 2	20% coinsurance*	20% coinsurance*
Tier 3	20% coinsurance*	20% coinsurance*
Mail Order (90-day supply)		
Tier 1	20% coinsurance*	Not applicable
Tier 2	20% coinsurance*	Not applicable
Tier 3	20% coinsurance*	Not applicable

** Not subject to calendar year deductible.*

Dental

Access to good oral healthcare can help keep your overall health costs down. Regular oral health exams can help detect significant medical conditions before they become serious.

Although the Delta Dental plan allows you the freedom to visit any licensed dentist, you'll save the most when you visit a Delta Dental PPO dentist. A Delta Dental Premier dentist is your next best option when you can't find a PPO dentist.

	Delta Dental PPO Network	Delta Dental Premier Network	Out-Of-Network
Calendar Year Deductible			
Individual	$50	$50	$50
Family	$150	$150	$150
Annual Maximum Benefit			
	$1,000	$1,000	$1,000
Dental Care Services			
Preventive Care	100% covered no deductible	100% covered no deductible	100% covered no deductible
Basic Care	100% covered no deductible	100% covered no deductible	100% covered no deductible
Major Care	50% covered after deductible	50% covered after deductible	50% covered after deductible
Orthodontia			
Coinsurance	50% covered no deductible		
Lifetime Maximum	$1,000		
Benefit Applies To	Adults and children		

Vision

Our vision coverage is designed to meet a variety of needs. Examples of vision coverage services are an eye exam, approved contact lenses and approved frames.

	In-Network	Out-Of-Network
Exam (once every 12 months)	$10 copay	Up to $45
Lenses (once every 12 months)		
Single Vision	$15 copay	Up to $30
Bifocal	$15 copay	Up to $50
Trifocal	$15 copay	Up to $65
Approved Contact Lenses (once every 12 months; in lieu of lenses or frames)		
Elective	Up to $150	Up to $105
Therapeutic	Covered 100%	Up to $210
Approved Frames (once every 12 months)		
	Up to $150	Up to $70

FSA

Set aside pre-tax dollars from your paycheck to pay for eligible expenses.

Maximum Flexible Spending Account (FSA) Contributions	
Health Care FSA Maximum	Dependent Care FSA Maximum
$3,300	$7,500 ($3,750 if married & filing separately)

Visit **NidecMiddleportUnion.com** or scan the QR code for details about each of the benefits offered to you by Nidec.

Accident Insurance

Certain injuries occurring off the job can be protected with Accident Insurance.

Accident Insurance: Cigna	
Some Covered Benefits	Benefit Amount
Hospital Admission	$1,500
Daily Hospital Confinement (up to 365 days)	$300
Daily ICU Confinement (up to 365 days)	$600
Burns	up to $10,000
Ambulance (Ground/Air)	$500/$2,000
Torn Knee Cartilage	$400

Critical Illness Insurance

In circumstances where major medical plans don't cover all the expenses associated with a critical illness diagnosis, Critical Illness Insurance can help make ends meet.

Critical Illness Insurance: Cigna	
Some Covered Benefits	Benefit Amount*
Invasive Cancer	100%**
Heart Attack	100%**
Advanced Obesity	25%**

** Terms, conditions, state variations, exclusions and limitations apply to these benefits.*
*** For example purposes only. The percentage corresponds to the percent of your elected coverage level.*

Hospital Indemnity Insurance*

Hospital Indemnity coverage can complement your health insurance to help you pay for out-of-pocket costs when you or your covered dependents are admitted to the hospital for a covered stay.

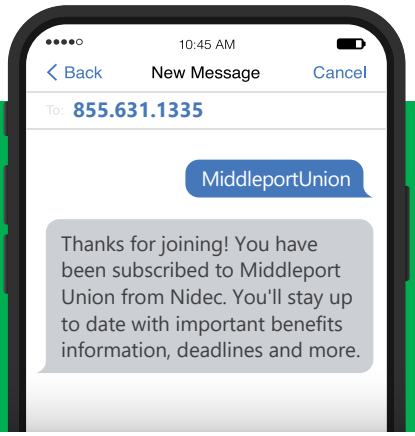
Hospital Indemnity Insurance: Cigna	
Covered Benefits	Benefit Amount
Daily Hospital Confinement (up to 30 days)	$100
Daily ICU Confinement (up to 30 days)	$200
Newborn Nursery Care Admission (limited to 1 day)	$500

** This is a fixed indemnity policy, not health insurance. Please visit the Hospital Indemnity Insurance webpage on your benefits website for important information related to Hospital Indemnity Insurance.*

Opt in for benefits texts

Get text reminders so you don't miss important benefits information and enrollment deadlines

Text keyword **MiddleportUnion** to **855.631.1335** to opt in, or scan the QR code



Disclaimer: This Benefits At-A-Glance is only intended to highlight some of the major benefits provisions of the company Plan and should not be relied upon as a complete detailed representation of the Plan. Please refer to the Plan's Summary Plan Description (SPD) or official Plan documents on NidecMiddleportUnion.com ► Resources ► Document Library for further details. Should this Benefits At-a-Glance differ from the SPDs, the SPDs prevail.