Benefits at Xerox
2013 Benefits Update
A Guide for Salaried Employees
Dear Employee:

As our Annual Enrollment approaches, it’s time to consider your benefit needs for the coming year. By now you have heard about Xerox’s new Healthy Together initiative — and the steps we’re taking to improve our health and the health of our organization.

You’ll see some important changes to your benefits program for 2013. These changes are designed to encourage you to become more active in making health care decisions and managing your health care dollars.

For 2013, we are moving to a single medical plan for all salaried employees in our Corporate and Technology organizations — The Consumer Choice Plan. The Coinsurance Plus option will no longer be available. With the Consumer Choice Plan, you can establish a Health Savings Account (HSA), your personal tax-advantaged savings account that you can use to pay for eligible health care expenses now — or in the future when you retire.

It’s important to learn all you can about the benefit changes for 2013 so you can get the most from these valuable programs. Take a look inside for an overview of the benefit changes for 2013 and the enrollment process.

Sincerely,
Peter Dowd
Vice President, Compensation & Benefits

Enrollment Starts October 11*

To enroll, go online to https://www.benefitsweb.com/xerox.html and enter your user ID and passcode. Or, call the Xerox Employee Service Center at 1.800.428.2203. Service Center Representatives are available from 8 a.m. to 8 p.m. ET, Monday through Friday, except on holidays.

Enrollment Ends October 26*

Please see page 11 to see how your benefit coverage is affected if you do not enroll.

*If you are an inpatriate or expatriate, your Annual Enrollment period will be November 19 - 30, 2012. (See page 8 for details.)
What’s New for 2013

Here is a summary of the benefit changes you’ll see for 2013 and some important things you’ll need to know about this year’s enrollment.

Medical Plan Changes

Beginning January 1, 2013, Xerox will be moving toward a single common medical plan for most employees — the Consumer Choice Plan. The Consumer Choice Plan has proven effective at helping to manage health care costs because it encourages you to become active in making your health care choices. There will be some minor changes to the Consumer Choice Plan for 2013:

• There will be a slight increase in the annual deductible for 2013 from $1,200 to $1,250 for individual coverage and from $2,400 to $2,500 for family coverage. Annual deductible amounts for this type of plan are set by the government.

• Women’s preventive care coverage will be expanded as a result of health care reform, and more services will be covered at 100% with no deductible or other out-of-pocket costs when you see an in-network provider.

• The prescription drug plan will include new minimum and maximum copays for costly specialty drugs (drugs used to treat certain complex, chronic and often costly conditions, such as asthma, cancer, HIV/AIDS, rheumatoid arthritis, etc.).

When you enroll in the Consumer Choice Plan, you will continue to have a choice of claims administrators between Anthem Blue Cross and Blue Shield and Cigna. While both Anthem and Cigna offer the same level of benefits, there may be some differences in the way that coverage is administered, such as the network of participating providers and precertification requirements. Be sure to check if your provider participates in the network before you enroll.

Note: Kaiser HMOs will continue to be available to current participants only. They’re closed to new members.

What to Expect if You’re Enrolled in Coinsurance Plus

The Coinsurance Plus option will no longer be available for 2013. If you are currently participating in this option and you don’t enroll, you will automatically be defaulted to the Consumer Choice Plan (CCP) with your current claims administrator and coverage level (for example, employee + 1 child). If you wish, you may open a Health Savings Account and receive Company contributions (if you earn $120,000 or less). Here are some differences you can expect from the Consumer Choice Plan:

• No more copays. There are no copays with the CCP. Instead, you pay a percentage of the cost of all services except preventive care, which will be covered at 100% with no deductible.

• Higher deductible. It’s true. The CCP has a higher deductible than the Coinsurance Plus option, but keep the following in mind:
  – Preventive care and screenings are free if you use in-network providers. These services are covered at 100% (no copays) and the deductible does not apply. Since there’s no cost to you, you should always get whatever screenings are recommended for you.
  – Certain preventive medications and maintenance medications you take on a regular basis (for example, if you have high cholesterol) are covered at 100% with no deductible or other out-of-pocket cost to you. The list of approved preventive medications is available at www.express-scripts.com.
  – Unlike the Coinsurance Plus option, in the CCP both prescription drug and medical expenses count toward the deductible.
  – If you open a Health Savings Account, you can put away tax-free money to cover the deductible. Plus, you’ll receive Company contributions if you earn $120,000 or less per year.

• Understand the real cost of services. With a higher deductible, you’ll be required to pay for medical expenses at their full cost until you meet your deductible and the plan starts to pay benefits. This will help you to better understand the true cost of health care in ways you might not have considered before and encourage you to make informed decisions about purchasing medical care, based on cost and quality. For example, you might think twice about using an out-of-network provider or requesting a brand-name medication when a generic is available.

• Health Savings Account (HSA). The HSA is truly a great advantage to participating in the CCP. The account helps you pay for medical expenses with pre-tax dollars now and in the future. It’s like an IRA but for medical expenses — you save on a tax-free basis, your account balance grows tax-free and it’s available to you after you retire. To encourage you to open an HSA, the Company will contribute to an HSA for employees earning $120,000 or less per year. See “Changes to Xerox’s HSA/Health Care FSA Contributions” for more information.

For more information, read the Consumer Choice Plan Guide, which is available on BenefitsWeb.
Changes to Xerox’s HSA/Health Care FSA Contributions

When you participate in the Consumer Choice Plan, you can establish a Health Savings Account (HSA) to help offset your out-of-pocket health care expenses. For 2013, Xerox will help you fund an HSA (the contribution amount will vary based on your pay). On January 1, 50% of Xerox’s HSA contribution will be available for your use, with the remaining balance funded on a per-pay-period basis. A key advantage of the HSA is that any balance remaining on December 31 can be carried over from year to year for future use. Note: You cannot enroll in this option and elect an HSA if you are enrolled in Medicare, or covered under any other medical plan (for example, through your spouse’s employer) unless that plan is also a qualified high deductible health plan.

An alternative to an HSA is a Health Care Flexible Spending Account (Health Care FSA). CCP participants can choose to use the Health Care FSA to help pay their out-of-pocket expenses with before-tax dollars. Generally, the advantage of choosing the Health Care FSA instead of the HSA is that your full annual contribution will be available to you on January 1. This may be beneficial if you anticipate having extensive expenses early in the calendar year. Note: The maximum amount that can be contributed to your Health Care FSA has been reduced (see “Take Note! Other Important Changes”).

You cannot participate in both an HSA and a Health Care FSA at the same time. If you have a Health Care FSA for 2012, you must use any remaining balance in that FSA by December 31, 2012. Otherwise, you cannot open an HSA until April 1, 2013. Having both an HSA and a Health Care FSA account at the same time could expose you to adverse income tax consequences.

Xerox Contribution to Your HSA or Health Care FSA (Depending on Your Annual Pay)

Xerox will make a contribution to your Health Savings Account (HSA) or Health Care Flexible Spending Account (Health Care FSA) to help you cover the cost of your deductible and other out-of-pocket expenses. The amount of the contribution, if any, is based on your annual salary as follows:

<table>
<thead>
<tr>
<th>If Your Annualized Pay Is…</th>
<th>Xerox’s 2013 Contribution Is…</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Health Savings Account</td>
</tr>
<tr>
<td>Less than $40,000</td>
<td>$600 Employee Only</td>
</tr>
<tr>
<td></td>
<td>$1,200 Family</td>
</tr>
<tr>
<td>$40,000+ to $80,000</td>
<td>$650 Employee Only</td>
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<tr>
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<td>$900 Family</td>
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<tr>
<td>$80,000+ to $120,000</td>
<td>$300 Employee Only</td>
</tr>
<tr>
<td></td>
<td>$600 Family</td>
</tr>
<tr>
<td>More than $120,000</td>
<td>None</td>
</tr>
</tbody>
</table>

New! Voluntary Supplemental Medical Benefits

Xerox’s new Supplemental Medical Benefits can offer another source of funding for your out-of-pocket medical expenses — including many non-medical expenses not typically covered by medical insurance. The plans pay a cash benefit directly to you and can provide a valuable source of income to supplement your medical coverage. Health Care FSA or HSA funds, or to allow you to reserve your HSA funds for the future. More information about these new plans, including important limitations and exclusions, is available on BenefitsWeb. The voluntary options include:

- **Supplemental Critical Illness Insurance.** This coverage pays a lump-sum, cash benefit when a diagnosis of a specific illness is made, or a health event occurs (such as cancer, heart attack or stroke). It is designed to help offset catastrophic expenses that can arise as a result of such illnesses. You can spend the benefits as you wish — for example, to use toward your deductible, pay for domestic care, college education, travel expenses for care givers, etc. In addition, to encourage you to seek preventive care, the plan also provides a $50 benefit per covered person per year for certain diagnostic wellness procedures and tests. The $50 preventive benefit applies even if the preventive care is already 100% covered by the Xerox medical plan.

You can elect coverage equal to $15,000 or $30,000 for you or you and your spouse/domestic partner. Coverage for your dependents is equal to 50% of the benefit amount you elect for yourself. The cost of coverage (available on BenefitsWeb) depends on your age and whether or not you are a smoker. Dependent children are automatically covered if you enroll.

- **Supplemental Accidental Injury Insurance.** This plan provides a cash benefit when you or a covered dependent visits a doctor for any reason. The benefit amount is $25 or $50 per visit (depending on the option you choose), up to $100 or $200 a year per family. In addition, the plan pays benefits for inpatient and outpatient services related to an injury (including a $1,000 benefit per hospital admission). The plan includes coverage for dislocations or fractures, injury-related physician or physical therapy visits, emergency room costs and ambulance charges resulting from an accident and more. The cost of coverage (as shown on BenefitsWeb) depends on the coverage option you choose.

- **Supplemental Hospital Indemnity Insurance.** This plan provides cash benefits in the event you (or a covered dependent) are hospitalized for any reason. Benefits can be used however you choose. You can elect either the Basic Plan ($1,000 per admission and $150 per day, for up to 10 days) or the Enhanced Plan ($3,000 per admission and $300 per day, for up to 10 days). Coverage is provided for one hospital admission per covered person per year. If you expect hospitalization in 2013 due to a planned procedure or even maternity, consider the benefits this plan will provide you. The cost of coverage (as shown on BenefitsWeb) depends on the coverage option you elect.
2013 Medical Contributions and Coverage Levels

Here are the 2013 annual employee contributions for the Consumer Choice Plan. (If you are eligible to enroll in an HMO, you will see the contributions for HMO coverage when you enroll on BenefitsWeb.) Contributions shown here reflect the incentive available to you and your eligible spouse/domestic partner if you both complete the wellness screening (both the online health questionnaire and lab test) and test tobacco free.

More Coverage Levels

We are introducing new coverage levels — now there will be a total of nine levels, allowing you to select and pay for the coverage that best meets your needs. Please note, there will continue to be five dental and vision coverage levels, as shown on BenefitsWeb and in your 2013 Enrollment Guide.

<table>
<thead>
<tr>
<th>Coverage Level</th>
<th>2013 Annual Consumer Choice Plan Contributions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee only</td>
<td>$473</td>
</tr>
<tr>
<td>Employee + 1 child</td>
<td>$1,079</td>
</tr>
<tr>
<td>Employee + 2 children</td>
<td>$1,685</td>
</tr>
<tr>
<td>Employee + 3 children</td>
<td>$2,291</td>
</tr>
<tr>
<td>Employee + 4 or more children</td>
<td>$2,897</td>
</tr>
<tr>
<td>Employee + spouse/domestic partner</td>
<td>$1,230</td>
</tr>
<tr>
<td>Employee + spouse/domestic partner + 1 child</td>
<td>$1,812</td>
</tr>
<tr>
<td>Employee + spouse/domestic partner + 2 children</td>
<td>$2,419</td>
</tr>
<tr>
<td>Employee + spouse/domestic partner + 3 or more children</td>
<td>$3,025</td>
</tr>
</tbody>
</table>

If You Are Covering Your Spouse/Domestic Partner

Please remember that if your spouse/domestic partner is enrolled in a Xerox medical plan, and he or she is eligible for medical coverage through another employer, you will be responsible for paying a Working Spouse/Domestic Partner Surcharge of $1,000 per year (deducted in equal amounts per paycheck throughout the year).

You are not required to pay the surcharge in 2013 if your spouse/domestic partner:

- Does not work, even if he or she is enrolled in Medicare.
- Was laid off from his or her job and did not elect COBRA.
- Works for a company that does not offer medical coverage, works part-time or was not offered medical coverage through his or her employer for any other reason.
- Is a Xerox or Xerox Services employee or retiree.

Take Note!

The Working Spouse/Domestic Partner Surcharge will be applied automatically when your spouse/domestic partner is covered under a Xerox medical plan. If the surcharge does not apply to you (as outlined in the bullet points above), you must go to BenefitsWeb and select “My SP/DP has no access to medical coverage with their employer.”

The Working Spouse/Domestic Partner Surcharge was established because the availability of coverage for a spouse/domestic partner through Xerox is intended primarily for those who do not have access to another employer-provided medical plan. It applies only to medical coverage and does not apply to dental or vision coverage.

Post-65 Coverage for Medicare-Eligible Retirees Is Discontinued

Xerox reviews its benefit programs on a regular basis to ensure they continue to align with the Company’s business objectives. After careful consideration, it was determined that the individual coverage market for Medicare-eligible retirees can provide coverage that is equal to or better than the Xerox-sponsored coverage, and in many cases, for less cost to the individual.

As a result, effective January 1, 2013, Xerox-sponsored health care coverage — medical, prescription drug, dental and vision — for Medicare-eligible retirees and their Medicare-eligible dependents will no longer be available. This means that when you and your covered dependents become eligible for Medicare, you will need to purchase coverage from among the many options available in the individual market. Xerox offers free access to My Medicare Advocate (MMA), a service that can help retirees evaluate, select and enroll in the health care coverage that best meets their needs at that time.

Please Note: If your spouse/domestic partner and/or children are not eligible for Medicare, they will continue to be eligible for any Xerox-sponsored coverage under the Xerox Retiree Flex Health Care Plan.
Healthy Together — Incentives to Support Healthy Living

The focus of our benefits program for 2013 will be health improvement and preventive care. Xerox’s Healthy Together initiative is all about encouraging you to make healthy choices. By identifying health risks early, we can take action to improve our health. Over time, healthy choices can lower the health risks of Xerox’s employee population, enabling better management of health care costs for both you and the Company.

Xerox supports you by providing the tools, resources and incentives to help you lead a healthier life and make the most of your medical benefits. You will have the opportunity once again to reduce the cost of your benefits for 2013 by following some simple wellness steps. Be sure you and your eligible spouse/domestic partner participate in the free, voluntary and confidential wellness screenings by November 2 to benefit from the incentives. This is your last chance to participate and benefit from the 2013 incentive!

Wellness Screenings — Confidential, Easy and Rewarding!

Xerox is introducing free, confidential and voluntary wellness screenings to help employees identify health risks early and take action to improve their health. The wellness screening has two parts:

- A confidential online health questionnaire, and
- A free lab test (blood draw) through three convenient options:
  - At one of over 2,000 Quest Diagnostics® Patient Service Centers across the U.S.,
  - From your primary care doctor as part of your annual preventive care visit (your doctor can complete a Physician Results Form with your screening results), or
  - On-site, at several Xerox locations.

You and your covered spouse/domestic partner must be enrolled in medical coverage and complete both the health questionnaire and the lab test to earn the health incentive and the tobacco-free incentive for 2013. Note: If you do not enroll in medical coverage, you are ineligible for these incentives. Just follow these four simple steps:

- **Step 1. Register.** Go to [my.blueprintforwellness.com](http://my.blueprintforwellness.com), or call 1.866.908.9440. When prompted for your registration key, enter Xerox. You’ll then be asked to enter your 6-digit Employee ID. Once you sign in using your Employee ID, you’ll verify some information.

Your spouse/domestic partner should register at [my.blueprintforwellness.com](http://my.blueprintforwellness.com) using your Employee ID, with “S” added to the end. For example, if your ID is 123456, your spouse/domestic partner would use 123456S. (The “S” is not case sensitive.)

Note: Your spouse/domestic partner must be enrolled in medical coverage before he/she will be able to register on this site. If he or she isn’t currently enrolled, you’ll need to enroll him/her when the open enrollment system becomes available on October 11. Then return to [my.blueprintforwellness.com](http://my.blueprintforwellness.com) in 7 to 10 days to see if he or she has been added as eligible for the screening. If he or she has not been added, call the Xerox Employee Service Center.

**Important Consideration:** If you’ll be adding your spouse/domestic partner to your coverage for 2013, you’ll need to enroll as soon as the system becomes available (October 11) in order to meet the November 2 deadline for the wellness screening.

- **Step 2. Schedule Your Appointment or Download a Physician Results Form.** After you complete your registration:
  - You’ll be prompted to register for the screening either on-site (if available in your area) or at a Quest Diagnostics Patient Service Center.
  - You can download a Physician Results Form from [my.blueprintforwellness.com](http://my.blueprintforwellness.com), under the My Account links on the left hand side. Click on About My Program to open the form. If you do not have access to on-site screenings or a convenient Quest Diagnostics Patient Service Center, give this form to your physician instead.

Your spouse/domestic partner may only participate by visiting a Quest Diagnostics Patient Service Center, unless you live or work in the Rochester, NY area where the on-site screenings are held in local hotels and in Building 200, Cafeteria 334 in Webster.

- **Step 3. Complete the Health Questionnaire.** After you register and schedule your appointment, stay on the website and complete the health questionnaire. This should take about 15 minutes.

- **Step 4. Keep Your Screening Appointment.** You must remember to fast before your lab test. No food or drink except water 9-12 hours prior to your lab test unless otherwise advised by your primary care doctor. Take all medications as prescribed by your doctor. After your screening, Quest Diagnostics will send the required participation information to the Xerox Employee Service Center so you can receive your incentive. (If you use a Physician Results Form, follow the instructions on the form to submit your results.)
**Earning Your Incentive**

You can earn up to $600 toward your 2013 medical coverage costs or up to $1,200 if you’ll be covering your spouse/domestic partner for medical benefits in 2013. Here’s how:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Earn</th>
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<tbody>
<tr>
<td>You participate in the wellness screening (questionnaire and lab test)</td>
<td>$300</td>
</tr>
<tr>
<td>You test negative for tobacco*</td>
<td>$300</td>
</tr>
<tr>
<td>Your covered spouse/domestic partner participates in the wellness screening (questionnaire and lab test)</td>
<td>$300</td>
</tr>
<tr>
<td>Your spouse/domestic partner tests negative for tobacco*</td>
<td>$300</td>
</tr>
</tbody>
</table>

*You may also be eligible to receive the tobacco-free incentive if your physician certifies that it is inadvisable or unreasonably difficult for you to quit tobacco at this time due to a medical condition.

**Quit For Life® Program Tobacco Cessation Program**

The Quit for Life Program, brought to you by the American Cancer Society® and Alere Wellbeing, is available to all benefits-eligible employees regardless of coverage under a Xerox medical plan, and all spouses/domestic partners and dependent children (18 or older) who are covered under a Xerox medical plan. Participation is free.

While the tobacco-free incentive is not tied to your participation in this plan, Xerox encourages tobacco users to participate in the Quit For Life program. You’ll be on the road to meeting the tobacco-free requirement for 2014.

If you enroll in the voluntary and confidential program, your Quit Coach will help you develop a personalized quit plan. The Quit Coach will also determine whether nicotine patches, gum or prescription medication will be helpful for you during the quit process. If you choose to include the nicotine patch or gum in your quitting plan, it will be mailed directly to your home, along with a Quit Guide. Participants will also have access to Web Coach, the Quit for Life Program’s interactive website.

To enroll, call 1.866.QUIT.4.LIFE (1.866.784.8454). A registration specialist will verify your eligibility to enroll and transfer you to a Quit Coach. Go to [www.quitnow.net](http://www.quitnow.net) to learn more or to register online.
Here are some other important changes to be aware of for 2013:

• **New Anthem Program Helps CCP Participants Find Diagnostic Imaging Services.** Diagnostic imaging services (for example, cardiac PETs and MRIs) provide you and your doctor with a valuable look inside your body. However, these services can vary in cost dramatically because different places charge different prices for their imaging services. A higher price doesn’t necessarily mean higher quality. That’s why Anthem will offer the Anthem Integrated Radiology Management Solution to Consumer Choice Plan participants to help you find quality imaging services at lower prices beginning January 1, 2013.

• **Dental Plan Changes.** Your current MetLife dental options continue to be offered in 2013 with some minor changes:
  - A new family deductible under the MetLife Basic Dental and MetLife Dental Plus options of $150 per family.
  - Under the MetLife Basic Dental option, the annual plan maximum and orthodontia lifetime maximum will be decreased from $1,500 to $1,000 per person, but the deductible will no longer apply to diagnostic and preventive services.
  - Increased out-of-network reimbursement under the MetLife Basic Dental Option.

• **Health Care Flexible Spending Account (Health Care FSA) Updates.** Due to regulatory changes, the maximum amount you can contribute to the Health Care FSA will be reduced from $7,000 to $2,500 for 2013. In addition, the Health Care FSA grace period will be eliminated for the 2013 plan year. All eligible expenses must be incurred by December 31, 2013 and submitted for reimbursement by no later than June 30, 2014.

• **Vision Plan Enhancement.** The vision plan, provided through EyeMed, will now include a new retinal imaging benefit. This new benefit enables providers to identify potential signs of many eye diseases, including glaucoma, diabetic retinopathy or age-related macular degeneration.

• **New! Group Legal.** The Group Legal Plan, administered by Hyatt Legal Plans, provides legal advice to help resolve everyday legal issues and scheduled benefits to help pay certain legal fees. The program gives you the opportunity to get professional legal services through a network of attorneys on issues such as real estate matters; consumer protection and debt collection defense; adoptions, child custody and support matters; wills, trusts, estate administration and closings; and more.

Participants are also entitled to receive personal, confidential and professional assistance with tax planning and tax audit issues, such as help with federal income tax issues, tax forms, advice on deductions and responding to IRS notices through a toll-free helpline service, administered by TaxResources, Inc.

• **Medco and Express Scripts Have Merged.** Medco, the prescription drug administrator for the Consumer Choice Plan, recently merged with Express Scripts. The combined company will now be known as Express Scripts, and the website address will change to [www.express-scripts.com](http://www.express-scripts.com) on October 1. Medco members will continue to see the Medco name on certain communications for now. Walgreens will continue to be excluded from the Medco pharmacy network. You can use your current ID card, continue filing claims and ordering through the mail order pharmacy as you do now. New ID cards will not be issued unless you enroll in the Consumer Choice Plan for the first time.

• **Summary of Benefits and Coverage (SBC).** A new summary of benefits and coverage (SBC) will be available on BenefitsWeb. The SBC is designed to help you better understand your health insurance coverage.

• **Note for Inpatriates and Expatriates.** Your Annual Enrollment period will be held from November 19 - 30, 2012. Instead of the medical, dental and vision plans described in this Update, you will have coverage under a new UnitedHealthcare Global Solutions plan for 2013. More information about your 2013 Annual Enrollment will be provided to you.

Understanding the HSA and Health Care FSA

Before you enroll, you’ll need to decide whether you will participate in the Health Savings Account or the Health Care FSA for 2013. You cannot participate in both. While the two savings accounts are both designed to help you set aside pre-tax dollars to help offset your out-of-pocket health care expenses, there are some important differences between the two options. Learn more by accessing the Consumer Choice Plan Guide on BenefitsWeb.
Learn More…

To make the most of your health plans, it’s important to learn all you can about your health plan and the many wellness tools and resources available to you during Annual Enrollment and throughout the year. Some of the information resources available to you include:

- **BenefitsWeb.** On [https://www.benefitsweb.com/xerox.html](https://www.benefitsweb.com/xerox.html) you can ask questions via email, have a live, online chat with a Service Center Representative (during regular Service Center hours) and access benefit summaries and decision support tools.

- **Tools for Understanding Costs and Value.** All medical carriers offer online tools to help you compare costs for medical procedures, estimate your out-of-pocket costs and find the right providers and facilities for you. Visit the following sites to get informed:
  - For Cigna: [www.mycigna.com](http://www.mycigna.com) (for those currently enrolled in medical coverage with Cigna; you must register on the site to use this tool)
  - For Anthem: [www.anthem.com/xerox](http://www.anthem.com/xerox) (log into the site; select “Useful Tools” on the right-hand side, halfway down; select “Estimate Your Cost”; then select the procedure you want to cost from the drop-down menu)
  - For Express Scripts: [www.express-scripts.com/xeroxoe](http://www.express-scripts.com/xeroxoe) (on the home page, click “Go” under “Open Enrollment Information,” then select “Active Salaried Consumer Choice Plan,” then select “Compare Prescription Medication Costs”; you do not need to register to use this site)

- **Benefits Expo.** Want to learn more about your health and benefit plans? Visit Xerox’s Benefits Expo, accessible through a link on BenefitsWeb. Here you can view presentations in the Conference Hall and access online Health Education Courses in the Learning Center.

- **Xerox Employee Service Center.** For questions and support call the Employee Service Center at 1.800.428.2203 from 8 a.m. to 8 p.m. ET, Monday through Friday.

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**Health Fairs**

Xerox will hold health fairs in the locations shown below to help you understand how your benefits work and enable you to get answers to your questions directly from Xerox’s health partners.

<table>
<thead>
<tr>
<th>Local Health Fairs</th>
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<tbody>
<tr>
<td>Location</td>
<td>Date</td>
<td>Time</td>
<td>Room</td>
</tr>
<tr>
<td>Wilsonville, OR</td>
<td>Tuesday, October 16</td>
<td>10 a.m. to 4 p.m.</td>
<td>26600 SW Parkway Avenue Building 60, Auditorium</td>
</tr>
<tr>
<td>Rochester, NY</td>
<td>Monday, October 22</td>
<td>10 a.m. to 3 p.m.</td>
<td>Xerox Square 100 Clinton Avenue South Main Lobby</td>
</tr>
<tr>
<td>Webster, NY</td>
<td>Tuesday, October 23</td>
<td>7 a.m. to 6 p.m.</td>
<td>800 Phillips Road Building 200, Cafeteria 334</td>
</tr>
</tbody>
</table>
Enrolling Online and by Phone

To enroll online at BenefitsWeb, go to https://www.benefitsweb.com/xerox.html.

- **Forgot your passcode?** Click the “Forgot your passcode?” link. You’ll be given three choices:
  1. **Answer Challenge Questions.** If you set up the challenge questions the first time you logged into BenefitsWeb, you can answer them and retrieve your passcode. If you haven’t set up your challenge questions, once you have retrieved your passcode by one of the methods listed below and you have successfully logged in, click on the Personal Information tab, then select Login and Site Preferences, then click the Register for “Forgot your passcode?” link.
  2. **Email a Passcode Reminder.** You can request an email reminder. If you don’t receive the email within 24 hours, please contact the Xerox Employee Service Center at 1.800.428.2203.
  3. **Mail a Passcode Reminder.** You can have a letter with your passcode mailed to your house in 7 to 10 days.

- **Forgot your user ID and passcode?** Retrieve your passcode first, as described in Choice #2 above (note that your user ID is not required for this step). Once you have your passcode, click “Forgot your user ID?” and follow the onscreen prompts.

- **Forgot your user ID?** Click the “Forgot your user ID?” link. You’ll be given two choices:
  1. You can have a user ID reminder emailed to you by providing the information requested, including your passcode.
  2. To have a user ID reminder mailed to your house, click “Mail a Reminder.” You must enter your Social Security number.

- **First time logging in?** You’ll need a user ID and passcode.
  - Your **user ID** has been set to your Social Security number.
  - Your **passcode** has been set to your birth date in MMDDYY format (for example, if your birth date is March 1, 1967, your initial passcode is 030167).
  - You will be asked to change both the first time you use them.

To enroll by phone, call the Xerox Employee Service Center.

- **Dial 1.800.428.2203** between 8 a.m. and 8 p.m. ET, Monday through Friday, except holidays.
- **First time calling?** You’ll need your Social Security number and passcode.
  - Your **passcode** has been set to your birth date in MMDDYY format (for example, if your birth date is March 1, 1967, your initial passcode is 030167).
  - You will be asked to change your passcode* the first time you use it.

*Important Information About Your Passcode

Once you change your passcode, it will be the same for both BenefitsWeb and the Xerox Employee Service Center, regardless of where you originally changed it.
What Happens If I Don’t Enroll?

Annual Enrollment ends Friday, October 26, 2012 (at 11:59 p.m., ET). If you don’t enroll, the benefits you have now will automatically continue in 2013, with these exceptions:

- **Medical.** If you are currently enrolled in the Coinsurance Plus option, you will automatically be enrolled in the Consumer Choice Plan with your current carrier and the same coverage level as you have today or the most appropriate new coverage level.

- **Working Spouse/Domestic Partner Surcharge.** The Working Spouse/Domestic Partner Surcharge of $1,000 will be applied automatically when your spouse or domestic partner is covered under a Xerox medical plan. If this surcharge should not be applied, you must go online and confirm that your spouse/domestic partner is not eligible for coverage under another employer-sponsored plan.

- **Supplemental Medical Benefits.** You must enroll during Annual Enrollment to have these voluntary benefits for 2013.

- **Health Savings Account (HSA).** Your Health Savings Account election will be handled differently based on your current status:
  
  - If you are currently enrolled in the Consumer Choice Plan and you have an HSA, your current HSA elections will continue for 2013.
  
  - If you earn $120,000 or less, an HSA will be created for you if you meet the following criteria:
    
    - You did not elect a Health Care FSA for 2013,
    
    - You do not currently have an HSA and
    
    - You are currently enrolled in the Consumer Choice Plan or the Coinsurance Plus option.

    Your HSA will remain “frozen” until you officially open it. You can open your account at any time, but you’ll want to do so as soon as possible so you can begin receiving Xerox contributions.

  - If you earn more than $120,000, you are not eligible to receive Xerox contributions to an HSA. However, you may elect to begin making contributions to an HSA at any time by opening your account using the link provided on BenefitsWeb.

- **Health Incentive and Tobacco-Free Incentive.** Be sure that both you and your covered spouse/domestic partner take the voluntary wellness screening (both the online health questionnaire and lab test) by **November 2** to receive up to $1,200 off the cost of medical coverage. There are no makeup sessions if you miss the deadline.

- **Flexible Spending Accounts.** If you do not make an election during Annual Enrollment, you will not be able to contribute to an account for 2013.

- **Life Insurance.** The higher rate for tobacco users will apply if you haven’t previously indicated (for life insurance purposes) that you (or if applicable, your spouse/domestic partner) are tobacco-free.

- **Vacation Purchase, Group Legal Plan.** You must enroll during Annual Enrollment to have these voluntary benefits for 2013.
Summary of Material Modifications

The 2013 Benefits Update and 2013 Enrollment Guide constitute a summary of material modifications. Altogether, this brochure, the enrollment guide and the most recent edition of the Summary Plan Descriptions, are only a summary of your benefit options and do not create a contract of employment between the Company and any employee.*

The official names of the plans affected by the changes are:

- The Xerox Medical Care Plan, which includes the Consumer Choice Plan, the Xerox Employee Assistance Program (XEAP) and prescription drug coverage,
- The Xerox Insured Medical Care Plan, which includes the local Health Maintenance Organizations (HMOs) and XEAP,
- The Xerox Dental Care Plan, which includes the MetLife Basic Dental, MetLife Dental Plus and Aetna DMO options, and
- The Xerox Vision Care Plan.

Details of these plans and programs can be found in the plan documents, collective bargaining agreements or HR policies that govern all aspects of the plan or program or, if applicable, in the agreements between the HMOs and the employees who elect them. In the event of a discrepancy between the information contained in this enrollment guide and the applicable HR policies, agreements, collective bargaining agreements or plan documents, the relevant HR policy, HMO agreements, collective bargaining agreements or plan documents shall be controlling. Subject only to any applicable collective bargaining obligations, the Company reserves the right to amend or terminate the plans or programs at any time for any reason.

*Temporary employees (except for certain cases in Hawaii) and independent contractors, including (without limitation) leased employees, supplemental contract workers, consultants, or any other third-party personnel, or anyone classified as such by the Company, who perform services for the Company, are neither eligible for, nor covered by, the plans and programs summarized herein (unless they qualify as eligible dependents).