



FMC Philadelphia/Princeton 2007 SUMMARY OF BENEFITS

BENEFIT ELIGIBILITY

All salaried and non-union hourly and part-time employees who are regularly scheduled to work 20 or more hours per week are eligible for benefits. New hire benefit plan eligibility is the first of the month following one month of employment if you enroll within 31 days from the day you were hired.

FLEXIBLE BENEFIT PLAN OPTIONS

Flexible benefit options allow you to choose benefits that are right for you and your family's personal situation. Flexible benefits options include:

- Medical Care
- Dental Care
- Health Care Flexible Spending Accounts
- Dependent Care Flexible Spending Accounts
- Long-term Disability
- Employee Life & Accidental Death and Dismemberment
- Spouse Life
- Child Life
- Legal Services

HEALTH CARE PLAN

Highlights

- You can cover yourself and your eligible dependents.
- Coverage begins on the first day of the month following one full month of employment.
- **Aetna Choice POS II options** -FMC offers a choice of three medical plans.
 - All options cover the same services including annual preventive care.
 - The options differ by individual and family deductibles, out-of-pocket maximums and payroll deductions.
- **Aetna HMO** - if one is available in your area.
- **Aetna Indemnity options** - available to employees who are located in areas outside of Aetna's networks.

- **Medco** -provides prescription drug coverage and is included with all medical options.
- You pay for your health care coverage with pre-tax dollars.
- There are no pre-existing condition limitations.

Your choices:

- **Aetna's Choice Point of Service II** – Choice POS II – you have three coverage options that vary by deductible, out of pocket maximums and payroll deductions. After your co-payment and annual deductible, each option’s co-insurance is either 90% or 100% of network charges based on the type of services you receive. You enjoy the highest benefit by using in-network providers. Benefit payments are significantly reduced if you use non-network providers.
- **Aetna Indemnity** – available in areas where Choice POS II networks are not available – You have three coverage options that vary by deductible, out-of-pocket maximums and payroll deductions. Each option pays 80% of the reasonable and customary covered charges after the deductible. The indemnity option is offered in areas where point-of service networks are not available.
- **Aetna Health Maintenance Organization (HMO)** – You may join a HMO if one is available at your location and you live in a HMO service area. The HMO will provide your covered medical care through its network of physicians, hospitals and other health care professionals. After your co-payments, the HMO covers all network charges in full and generally with no maximum limit. You will need to select a primary care physician who will provide care or authorize treatment with other network providers. The use of non-network providers is very limited – only for medical and accident emergencies.
- **Opt-Out** - You may decline medical coverage and receive up to \$100 per year (\$8.33 per month) as flex credit in your paycheck as taxable income.

Medical Options

Your annual deductibles and out-of-pocket limits depend on the option you choose and the number of family members you cover. Prescription drug plan deductibles are separate from medical deductibles.

Annual Deductible * (Individual/Family)	Out-of-pocket Maximum* (Individual/Family)	Prescription Drug Plan Annual Deductible (Individual/Family)
No Coverage		
\$200/\$400	\$1,500/\$3,000	\$50/\$100
\$400/\$800	\$2,000/\$4,000	\$50/\$100
\$1,000/\$2,000	\$2,500/\$5,000	\$100/\$200
HMOs (if available in your area)		\$50/\$100

***Deductions and out-of-pocket maximums double when Aetna Choice POS II participants use non-Aetna Choice POS II providers. The out-of-network co-insurance will be 60% of reasonable and customary charges.**

Your Total Cost

The total cost of your medical coverage includes: payroll deductions, deductibles, co-payments, co-insurance and charges in excess of maximum benefit limits.

Payroll deductions

You and FMC share in the cost of your medical coverage. Your payroll deductions will vary according to the medical plan you choose and the level of dependent coverage you select. Payroll deductions are determined annually.

Co-Payments - is the payment you make for certain services at the time you receive care. If you enroll in the Aetna Choice POS II Plan or an Aetna HMO there is a \$15 co-payment for non-surgical office visits if you go to a network provider; \$75 emergency room co-payment and \$240 co-payment per inpatient hospital admittance. For the Aetna Choice POS II Plan there is a \$25 co-payment for non-surgical office visit for specialists.

Co-insurance - is the percentage of the charges you pay after the deductible or co-payment is satisfied. The percentage of charges you pay depends on your coverage option and where the service is received, either in or out-of-network.

Out-of-pocket Maximum - Once you or your eligible dependents reach the out-of-pocket limit for covered medical expenses in a calendar year the Plan pays all future eligible charges at 100% for the remainder of the calendar year. If you have family coverage, once the family limit is reached, the plan pays 100% of all future covered expenses for your family for the remainder of the calendar year. Certain expenses do not count towards out-of-pocket limits such as co-payments for office visits, prescription drugs, co-insurance for mental health services and substance abuse services and deductibles for prescription drugs.

PRESCRIPTION DRUG PLAN

Medco - prescription drug coverage is included when you enroll in any of FMC's medical options.

Retail: Provides access to over 50,000 pharmacies nationwide to fill your short-term and immediate prescription drug needs. A prescription for an acute condition (less than 30 days) can be filled at a local participating retail pharmacy.

Home Delivery: Maintenance medications for chronic conditions (medications taken on a long-term basis and prescribed for more than 30 days) **must** be filled through home delivery after the first prescription and two refills.

FMC offers a three-tier co-pay prescription drug plan design:

- **Generic**
- **Formulary Brand** (Preferred) – a list of generic and brand-name drugs that are preferred by Medco. Formulary drugs are offered as a choice to help keep your prescription benefits affordable.
- **Non-Formulary Brand** (Non-preferred) – are Brand drugs not on Medco's Formulary list and are priced higher.

PRESCRIPTION DRUG PLAN (continued)

	Retail up to 30 day supply	Home Delivery up to 90 day supply
Deductible	\$50/\$100 ¹	N/A
• Generic	\$10 per prescription or refill	\$20 per prescription or refill
• Formulary Brand	\$25 per prescription or refill	\$50 per prescription or refill
• Non-formulary Brand	\$40 per prescription or refill	\$80 per prescription or refill
• Brand – if generic available	\$10 per prescription or refill plus 100% of brand/generic cost difference	\$20 per prescription or refill plus 100% of brand/generic cost difference

¹\$100/\$200 if in \$1,000/\$2,000 medical plan

DENTAL PLAN OPTIONS:

Highlights

- Plans are administered by Aetna.
- No deductible for preventive care.
- Six-month waiting period for major work and orthodontia from date of plan eligibility.
- For the \$50 and \$100 deductible plans you may select an in-network or out-of-network dentist. Discounts have been negotiated with network providers and services should not exceed Reasonable & Customary (R&C) charges. Services in excess of R&C are the employee's responsibility.
- Aetna Dental Maintenance Organization (DMO) – Participants must choose a provider from a dental network.

	Aetna \$50 deductible	Aetna \$100 deductible	Aetna DMO (where available)
Annual Deductible (per person)	\$50	\$100	\$0
Preventive Care	100%	80%	100%
Basic Services	80%	70%	100%
Major Services	50%	40%	60%
Annual Maximum (per person)	\$1,200	\$1,000	Maximum limits vary by state
Lifetime Orthodontia Maximum (Children under age 19)	50% of \$1,500	50% of \$1,500	60% Maximum limits vary by state

Payroll deductions

You and FMC share in the cost of your dental coverage. Your payroll deductions will vary according to the dental plan you choose and the level of dependent coverage you select. Payroll deductions are determined annually.

FLEXIBLE SPENDING ACCOUNTS (FSAs)

Flexible Spending Accounts allow you to use **pre-tax** dollars to pay for **out of-pocket health care** and **dependent care** expenses. This means that your taxable income is reduced, which result in lower taxes. When you are reimbursed, your reimbursements are tax-free. You may deposit from \$100 to \$5,000 a year in each plan.

Health Care Flexible Spending Accounts - may be used to cover medical/dental expenses not covered by other company benefits. Common eligible health care expenses include, but are not limited to, medical deductibles and co-insurance, dental deductibles and co-insurance, vision expenses (eye exams, glasses, contact lenses, Lasik surgery), hearing aids, orthodontia for adults, smoking cessation, most over-the-counter drugs (except dietary supplement and vitamins). Expenses such as cosmetic surgery, insurance premiums and teeth whitening are not eligible.

Dependent Care Flexible Spending Accounts - may be used to pay for dependent day care expenses for children under age 13 and dependents who reside in your home and are physically or mentally incapable of self-care, such as elderly parents whom you support. Federal Tax law requires that the day care or in-home care must be necessary to allow you and your spouse to work, unless your non-working spouse is disabled or a full-time student. The Tax Identification Number or Social Security Number of the provider is required for reimbursement. Dependent care includes day center fees, charges for care provided in your home, care that is necessary for you and your spouse to work, look for work or to attend school full-time. Expenses such as kindergarten, overnight camp, convalescent homes and Au Pair agency fees and not eligible.

LONG-TERM DISABILITY PLAN

Long-term Disability benefits provide a source of income if you disabled and cannot work. Coverage begins after 180 days of consecutive disability if you elect to participate.

The cost of LTD coverage is deducted from your pay on an after-tax basis. Since you pay the full cost of LTD coverage, any LTD benefit payments you receive are not taxable. If you do not enroll when first eligible, you will be required to provide evidence of insurability to elect coverage in the future. If you decide to enroll in the LTD Plan, you can choose either one of two plans:

50% option – your monthly LTD benefit will equal 50% of your first \$6,000 in monthly pay and 40% of the next \$6,500 of pay up to a maximum monthly benefit of \$5,600.

60% option – your monthly LTD benefit will equal 60% of your first \$6,000 in monthly pay and 50% of the next \$6,500 of pay up to a maximum monthly benefit of \$6,850.

GROUP LIFE INSURANCE PLAN

Employee Group Life Insurance Plan - FMC's Group Life Insurance Plan allows employees to elect up to seven times annual compensation up to \$3.5 million. In addition, employees are automatically enrolled for Accidental Death and Dismemberment (AD&D) coverage in an amount equal to the level of life insurance coverage chosen. In the event of your accidental death, your beneficiary will receive Accidental Death and Dismemberment (AD&D) coverage equal to your elected amount of employee life insurance.

The premium you pay for your life insurance coverage will vary according to your age and the amount of insurance you elect. FMC pays the basic level of coverage (one times annual compensation) and any coverage from two to seven times your annual compensation (supplemental coverage) is your responsibility. You may decline life insurance coverage and receive up to \$50 per month as flex credit (\$600 per year) in your paycheck as taxable income. If you do not enroll when first eligible, evidence of insurability will be required for enrollment at any level.

Spouse Group Life Plan - If you participate in the Employee Group Life Insurance Plan, you can elect spouse coverage at the following benefit levels: **\$10,000, \$20,000, or \$50,000**. The amount of coverage provided under this Plan cannot be more than the amount of Employee Group Insurance Life coverage elected. Evidence of insurability will be required if you either elect participation for the first time or elect an option to increase coverage in the future. The premium you pay for this coverage will vary according to your spouse's age and the amount of insurance chosen.

Child Group Life Plan - you can elect Child Life Insurance with a benefit level of \$5,000 per child. All covered children will be covered for the same amount. You pay the same price for Child Life Insurance regardless of the number of children covered. You can cover children from 14 days of age until age 19, or until age 23 if the child is a full-time student.

LEGAL SERVICES PLAN

Employees receive legal advice and help in resolving personal legal matters, such as; preparing a will, estate planning, adoption, buying or selling a home, financial advice, etc. Pre-Paid Legal Services is the benefit provider. Employees pay for this coverage.

COMPANY PAID BENEFITS

(No cost to employee)

SHORT-TERM DISABILITY PLAN

To receive benefits under this plan, you must be disabled for more than three consecutive workdays, be under a doctor's care and return a completed short-term disability form. The benefit provides up to 26 weeks of income protection for disabilities that are caused by accidental injuries or illnesses within a consecutive 52-week period. The plan pays 100% or 60% of salary, depending upon your length of service and employment status.

EMPLOYEE ASSISTANCE PLAN (EAP)

The FMC EAP offers assessment, short-term counseling and referrals to professional resources when you or an eligible dependent is experiencing personal problems. Highly trained counselors and specialists including licensed psychologists, clinical social workers, marriage and family therapists, certified alcohol and drug counselors, and attorneys, as well as financial, child care, adult care, academic, adoption and personal care consultants are available to help you overcome personal, lifestyle and work-related challenges.

BUSINESS TRAVEL ACCIDENT INSURANCE PLAN

FMC's Business Travel Accident Insurance provides benefits if you accidentally die or sustain certain serious injuries while traveling on Company business. These benefits are paid in addition to life insurance and accidental death and dismemberment insurance and Workers' Compensation. The benefit amount for loss of life is two times annual pay to a maximum benefit of \$200,000. The benefit amount is less for a serious injury.

RETIREMENT PLAN

FMC SAVINGS & INVESTMENT PLAN

401(k) Provisions of the Plan

Employees are eligible to participate in this plan on the first day of the month following their employment date.

FMC sponsors a 401(k) Plan for employees which is administered by Fidelity Investments. Through automatic payroll deductions, you can contribute between **2% and 50% of eligible earnings** on a **pre-tax** and/or **after-tax** basis. Catch-up contributions may also be made by employees age 50 and over. Contributions under the Plan are subject to statutory limitations.

Basic Contributions - The first 5% of your contributions are matched in cash and will be allocated according to your investment elections. FMC will match \$.80 on the dollar for the first 2 to 5 percent (maximum match is 4 percent; $.80 \times 5\%$) of deferred earnings for eligible employees. FMC's matching contributions are subject to a vesting schedule that provides for partial vesting after 2 years, increasing to full vesting after five years of FMC service.

Supplemental Contributions - you can make additional contributions referred to as supplemental contributions of up to 45% of eligible earnings. Supplemental contributions are not matched.

Employees can also roll-over funds from other qualified plans into the FMC 401(k) plan.

Generally distributions will be made from the plan only upon termination of employment. However, under certain circumstances distributions may be made while you are employed. The plan also provides for loans if certain conditions are satisfied.

Enhanced Defined Contribution Plan Provisions for Employees Hired on or after July 1, 2007

FMC will contribute 5% of eligible earnings (base pay, premium pay and incentive pay) to the Savings and Investment Plan for eligible employees. Employees are encouraged, but not required to contribute to the plan in order to receive the Company contribution. Company contributions for eligible employees will be made at year-end.

Employees may direct their contributions to the same investment options available in the 401(k) plan. If an employee does not make an investment election, the default investment vehicle is a life cycle fund based on the age of the employee. The annual company contribution will be maintained in a separate Fidelity account source with the same web access as the current 401(k) plan.

Company contribution accounts are subject to the same graded vesting schedule that is used for the 401(k) plan, i.e. 20% in the first year, 40% in year two, 60% in year three, 80% in year four and 100% in year five. Accounts Employees will be 100% vested at age 55, or at death or disability, regardless of service.

Funds in this plan are not available for loans or withdrawal. Distribution of the account balance is available to the employee at termination, subject to certain restrictions.

OTHER FMC SPONSORED BENEFITS

WORK LIFE BENEFITS

Family Medical Leave (FMLA) - After one year of service, FMC provides up to 12 consecutive weeks employment-protected, unpaid family leave with benefits protection to eligible employees who:

- Are parents of newborn or newly adopted child(ren)
- Need to care for a seriously ill family member (child, spouse, parent, spouse's parent or other dependent)
- Need to attend to their own serious health condition

When you return from your family leave, you will be returned to your position or to a position that is similar to the one you held prior to the leave, at the same rate of pay.

Your FMC benefits will continue during family leave in accordance with the family leave provisions for each benefit plan.

Participation in the Savings and Investment Plan, Flexible Spending Accounts and Long-term Disability Plan will be suspended.

Adoption Assistance - Employees who complete one year of service are eligible for adoption assistance. FMC will reimburse employees up to \$5,000 for a single-child adoption and up to \$10,000 for a sibling group.

COMMUTER ASSISTANCE PLAN

(Available to Employees who work in Philadelphia and Chicago only)

The Commuter Assistance Plan allows you to set aside **pre-tax** dollars to be reimbursed for qualified, work related transportation expenses.

The Parking Reimbursement Account - allows you to set aside up to \$215 per month (2007 IRS limit) for qualified work related parking expenses.

The Transportation Reimbursement Account – allows you to set aside up to \$110 per month (2007 IRS limit) for qualified mass transit or vanpooling expenses.

Monthly limits are indexed annually based on cost of living adjustments issued by the IRS.

EDUCATIONAL ASSISTANCE PLAN

The Educational Assistance Plan reimburses 100% of the cost of tuition, registration fees, lab costs and textbooks for approved courses with a grade "C" or better. A transcript and receipts for covered charges are also required for reimbursement. An application form signed by your local HR Manager is required prior to enrolling in classes. You must work for FMC at least one year following the date of your last reimbursement for either a class or for a course of study. If you should voluntarily leave FMC prior to the completion of this one year period, you are required to pay back either all or a portion of the tuition reimbursement you received from FMC.

MERIT SCHOLARSHIP PROGRAM

Your child may be eligible to receive education assistance through the FMC Merit Scholarship Program. Children of employees are eligible for the program. FMC supports 2 scholarships at \$1,000 each for 4 years and the Edward J. Keating National Merit Scholarship valued at \$1,000 for each of 4 years.

MATCHING GIFTS PLAN AND DOLLARS FOR DOERS

Matching Gift Plan - the FMC Matching Gift Plan provides support through both company and employee contribution to support institutions of higher education and includes secondary education, and art and cultural organizations.

Providing a 1 to 1 match, the Plan is designed to double your contribution. This means that the designated organization will receive the gifts - your gift and a gift of the same amount from FMC.

FMC will match charitable contributions to eligible organizations made in cash or marketable securities, of \$25 or more, to a maximum of \$10,000 per employee per year.

Dollars for Doers - to recognize and encourage community service, the FMC Dollars for Doers program matches volunteer hours to eligible not-for-profit organizations with a financial contribution from FMC.

VACATION PLAN

FMC recognizes taking time off away from work for rest and relaxation. You are eligible for one to five weeks of paid vacation based on your years of service.

Years of Service	*Amount of Paid Vacation Time
1-5 years of service**	2 weeks
5 – 10 years of service	3 weeks
10 – 20 years of service	4 weeks
20 or more years of service	5 weeks

*Vacation entitlement is effective January 1 in the year of your anniversary.

**You are eligible to take your first week of vacation after six months of service and the second week after twelve months of service. Starting with the calendar year following your first anniversary of employment, you are entitled to two weeks vacation on January 1.

With your manager's approval, you can carry over to the next calendar year up to two weeks of vacation.

2007 HOLIDAYS

11 paid holidays per year

Monday, January 1	New Year's Day Observed
Monday, January 15	Martin Luther King, Jr. Day
Friday, April 6	Spring Break Day
Monday, May 28	Memorial Day
Wednesday, July 4	Independence Day
Monday, September 3	Labor Day
Thursday, November 22	Thanksgiving Day
Friday, November 23	Day after Thanksgiving Day
Monday, December 24	Christmas Eve
Tuesday, December 25	Christmas Day

*1 Personal Holiday

This is a descriptive summary that highlights plan coverage only and should not be taken as a statement of policy.

FMC fully expects the benefit plans described will continue, but reserves the right to amend, modify or terminate a plan if necessary. This synopsis provides a brief description of FMC's benefit plans; FMC's Summary Plan Descriptions contain complete information and eligibility requirements.