TEAM MEMBER Locke BENEFIT SUMMARY

ELIGIBILITY & ENROLLMENT

Eligibility

If you are a full-time team member of Locke Lord LLP who is regularly scheduled to work at least 30 hours per week, you are eligible to participate in the medical, dental, vision, life and disability plans, and other additional benefits. Coverage is available for you, your spouse/domestic partner and/or your child(ren) up to age 28. If you decide to waive medical coverage now, you may be eligible to enroll later after a "qualifying event" (marriage, divorce, adoption, or birth of a child, death of a family member or loss of medical coverage) or during the next open enrollment period.

When Does Coverage Begin?

The elections you make are effective on the first day of employment. Due to IRS regulations, once you have made your choices for the plan year, you won't be able to change your benefits until the next enrollment period unless you experience a qualifying life event.

WELLNESS

ABA Pledge

The Firm is committed to the overall well-being of our attorneys and team members and is a signatory to the ABA's Well-Being Pledge. The ABA Well-Being Pledge is designed to help recognize that substance abuse and mental health problems represent a significant challenge for the legal profession.

Member Rewards

Member Rewards, a BCBSIL program, offers a cash reward when a lower-cost, quality provider is selected from several possibilities. When a doctor recommends treatment, log into Blue Access for Members at bcbsil.com. Then search the Doctors and Hospitals for a provider that offers the procedure at a lower cost. When you choose that provider location, you may earn a cash reward. Once you complete your procedure and it is verified, you will receive a check within 4-6 weeks. Just call the number on the back of your member ID card if you have questions.

Preventive Care Incentive

Our medical plans cover a set of Preventive services – such as immunizations and screening tests – at no cost to you! This includes an Annual Preventive Physical Incentive of \$50.

Prescription Drug Coverage for Medical Plans

Our Prescription Drug Program is coordinated through Blue Cross Blue Shield of Illinois. That means you will only have one ID card for both medical care and prescriptions. You may find information on your benefits coverage and search for network pharmacies by logging on to www.bcbsil.com or by calling the Customer Care number on your ID Card. Your cost is determined by the tier assigned to the prescription drug product. All products on the list are assigned as generic, preferred, non preferred or specialty.

Medical Plan Summary

You have the option of enrolling in one of the two PPO plans: the Base Plan or the High Deductible Health Plan (HDHP). If you choose to participate in the HDHP plan, you will be able to open a Health Savings Account (HSA) that can be funded with pre-tax dollars and used to pay for qualified expenses. However, unlike a Flexible Spending Account (FSA) the unused funds will roll over from year to year. The chart below provides a summary of the medical and pharmacy benefits provided by Blue Cross Blue Shield of Illinois. All covered services are subject to medical necessity as determined by the plan. Please be aware that all out-of-network services are subject to Reasonable and Customary (R&C) limitations.

	BASE PLAN		HDHP	
	IN-NETWORK	NON-NETWORK	IN-NETWORK	NON-NETWORK
CALENDAR YEAR DED	UCTIBLE			
INDIVIDUAL	\$1,000	\$2,000	\$2,000	\$4,000
FAMILY	\$2,000	\$5,000	\$4,000	\$8,000
COINSURANCE	20%*	40%*	20%*	40%*
CALENDAR YEAR OUT	-OF-POCKET MAXIMU	M (INCLUDES DEDUC	TIBLE)	
INDIVIDUAL	\$3,500	\$8,000	\$4,000	\$8,000
FAMILY	\$7,000	\$15,000	\$7,500	\$16,000
COPAYS/COINSURAN	CE			
PREVENTIVE CARE	100%	40%*	100%	40%*
PHYSICIAN COPAY	\$25	40%*	20%*	40%*
PHYSICIAN SPECIALIST	\$40	40%*	20%*	40%*
DIAGNOSTIC SERVICES	20%*	40%*	20%*	40%*
INPATIENT HOSPITAL	20%*	40%* after \$250 deductible	20%*	40%* after \$250 deductible
OUTPATIENT HOSPITAL	20%*	40%*	20%*	40%*
URGENT CARE	20%* after \$50 copay	40%* after \$50 copay	20%*	40%*
EMERGENCY ROOM	20%* after \$150 copay	20%* after \$150 copay	20%*	20%*
TELEMEDICINE	\$25	N/A	20%*	N/A
RETAIL RX (30-DAY SU	PPLY)			
GENERIC	\$15	\$15 plus 25% coinsurance	\$15*	\$15* plus 25% coinsurance
PREFERRED	\$35	\$35 plus 25% coinsurance	\$35*	\$35* plus 25% coinsurance
NON-PREFERRED	\$50	\$50 plus 25% coinsurance	\$50*	\$50* plus 25% coinsurance
MAIL ORDER RX (90-D	AY SUPPLY)			
GENERIC	\$37.50	N/A	\$37.50*	N/A
PREFERRED	\$87.50	N/A	\$87.50*	N/A
NON-PREFERRED	\$125.00	N/A	\$125.00*	N/A

*After Deductible

TELEMEDICINE

Pressed for time or too sick to drive to the doctor? Consider a more convenient way to seek medical care.

Telemedicine through MDLIVE is an additional benefit available to team members and their dependents. With MDLIVE, you have on-demand access to board-certified doctors and pediatricians by online video, phone or secure email.

For a copay of \$25 under the PPO plan, or 20% after deductible under the HDHP per consultation, you can be treated for various general health care (adult & pediatric) and behavioral health issues without leaving the comfort of your home.

This service can be utilized for after-hours non-emergency care, when your primary care physician is not available or if you are traveling and need general medical care. Examples of items that can be treated include allergies, asthma, headache, pink eye, respiratory infections, ear infections and much more.

Please note that some states do not allow physicians to prescribe medications via telemedicine. For more information, visit www.MDLIVE.com/bcbsil.

MDLIVE doctors can treat many medical conditions, including:

- » Cold & flu symptoms
- » Urinary tract infection
- » Allergies» Bronchitis
- » Respiratory infection
- » S
 - » Sinus problems

MDLIVE doctors can also share information with your primary care physician with your consent.



FLEXIBLE SPENDING ACCOUNTS

Flex your spending power! A Flexible Spending Account (FSA) is a special tax-free account you put money into to pay for certain out-of-pocket expenses.

Healthcare FSA. You can contribute up to the IRS calendar year limit for qualified out-of-pocket expenses (deductibles, copays and coinsurance, for example) with pre-tax dollars, which will reduce the amount of your taxable income and increase your take-home pay. All eligible expenses incurred through BCBSIL, Delta Dental and VSP will automatically be processed through your PayFlex FSA for reimbursement. For the medical flexible spending account only, you have the ability to carry over up to \$640 of unused money for the next plan year. Any amount over \$640 remaining in your account as of December 31 will be lost.

Dependent Care FSA. In addition to the Health Care FSA, you may opt to participate in the Dependent Care FSA as well — whether or not you elect any other benefits. The Dependent Care FSA allows you to set aside \$5,000 pre-tax funds to help pay for expenses associated with caring for elder or child dependents. Unlike the Health Care FSA, reimbursement from your Dependent Care FSA is limited to the total amount that is deposited in your account at that time.



Contributions to an HSA are tax free. You may contribute up to the IRS calendar year limit for qualified out-ofpocket expenses (deductibles, copays and coinsurance). Contributions can be made through payroll deduction on a pre-tax basis when you open an account with HSA Bank. The money in this account (including interest and investment earnings) grows tax free. As long as the funds are used to pay for qualified expenses, they are spent tax free.

HSA FUNDING LIMITS					
INDIVIDUAL	\$4,150				
FAMILY	\$8,300				
CATCH-UP CONTRIBUTION (AGES 55+)	\$1,000				

DENTAL BENEFITS

Dental

Delta Dental provides a nationwide PPO dental plan. Locke Lord provides coverage at no cost for each team member. Additional coverage can be purchased for spouse/domestic partner and/or child(ren) up to age 28. Find a network provider at www.deltadentalins.com.

DELTA DENTAL

CALENDAR YEAR DEDUCTIBLE				
INDIVIDUAL	\$50			
FAMILY	\$150			
CALENDAR YEAR MAXIMUM				
PER PERSON	\$3,500			
COVERED SERVICES				
PREVENTIVE SERVICES	100% (no deductible)			
BASIC SERVICES	80%*			
MAJOR SERVICES	50%*			
ORTHODONTICS Adults & Dependents	50%			
ORTHODONTIC LIFETIME MAXIMUM	\$3,500			
*After Deductible				

*After Deductible

Network Dentists

If you choose to use a dentist who doesn't participate in your plan's network, your out-of-pocket costs will be higher, and you are subject to any charges beyond the Reasonable and Customary (R&C).

VISION BENEFITS

Vision

Team members have the option to purchase vision coverage through VSP for themselves, spouse/domestic partner and/or child(ren) up to age 28. In-network providers will provide you a higher level of benefit coverage and can be found at www.vsp.com.

	VSP			
	IN-NETWORK	NON- NETWORK	FREQUENCY	
EXAMS				
COPAY	\$10	\$50 allowance	12 months	
LENSES				
SINGLE VISION	100% after copay*	\$50 allowance	12 months	
BIFOCAL	100% after copay*	\$75 allowance		
TRIFOCAL	100% after copay*	\$100 allowance		
LENTICULAR	100% after copay*	\$125 allowance		
CONTACTS (IN LIEU OF LENSES AND FRAMES)				
ELECTIVE	\$200 allowance	\$105 allowance	12 months (in lieu of frames)	
MEDICALLY NECESSARY	Covered in full	\$210 allowance		
FRAMES				
RETAIL FRAME EQUIVALENT	\$200 allowance, 20% off balance	\$70 allowance	24 months	
VSP LIGHTCARE	\$200 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts			
*After Material Copay				

*After Material Copay

INCOME PROTECTION

Short Term Disability (STD)

The firm provides a short term disability plan to all benefit eligible team members. Please contact Human Resources for plan specifics and coordinating a leave.

Long Term Disability (LTD)

If you have been continually disabled for more than 90 days, LTD insurance replaces 60% of your income up to a monthly maximum of \$18,200.

As long as you are disabled and are limited from performing duties or your regular occupation, your benefits will be paid until you reach the normal Social Security retirement age.

You have the option of:

- » Electing to NOT pay taxes on the Firm's paid LTD premium, resulting in a taxable benefit, or
- » Electing to pay taxes on the Firm's paid LTD premiums, resulting in a tax-free benefit.

LIFE AND AD&D INSURANCE

Life Insurance

All eligible team members receive a life and accidental death & dismemberment benefit equal to 2x annual earnings with a maximum benefit of \$600,000. Should your death be due to an accident, the benefit amount doubles.

Voluntary Life Insurance

Team members may choose to purchase additional life insurance for themselves, a spouse and/or child(ren). Team members may purchase coverage in increments of \$10,000 up to the lesser of \$700,000 or ten times salary. The first time you are eligible, you may elect up to \$250,000 without providing medical information. Any amounts over \$250,000 will require medical underwriting.

Spouse coverage is available in increments of \$5,000 up to \$500,000 and is guaranteed for amounts up to \$50,000 (eligibility requirements apply). For dependent children, the coverage amount of \$10,000 may be purchased.

During open enrollment, you may elect to increase your current Voluntary Life benefit by \$40,000, without Evidence of Insurability, up to the \$250,000 guarantee issue amount. You may also increase your existing spousal life benefit by \$20,000, without Evidence of Insurability, up to the \$50,000 guarantee issue amount.

NOTE: Individuals previously declined coverage remain declined.

Voluntary AD&D Insurance

This benefit is made available to team members and their families. Team members may purchase AD&D coverage from \$50,000 up to \$500,000. A spouse may receive up to 50% of the team member's amount. Each of your dependent children will receive benefits equal to 10% of the team member's amount, or 15% if there is no eligible spouse, not to exceed \$25,000 for each child.



ADDITIONAL BENEFITS

Supplemental Benefits: As a convenience, the Firm makes the following supplemental voluntary insurance plans available to you.

AFLAC: Three plan options

Bright Horizons Back-Up Care: Bright Horizons provides back-up child care and adult/elder care for all benefits-eligible team members. All eligible team members are entitled to 10 days per calendar year of care services. For more information, please call Bright Horizons at 877.242.2737.

CareLinx: CareLinx is the largest care giving provider for in-home non-medical care. Contact CareLinx directly for assistance at 800.494.3106.

Employee Assistance Program: Locke Lord provides an EAP for you and your family that offers guidance and support for a wide range of personal and work-related issues. Your program includes up to three face-to-face assessment and counseling sessions per issue. This program is available to all Locke Lord personnel.

The EAP is completely confidential and available 24 hours a day, seven days a week by phone, online, live chat, email, and text. For additional information, call 888-293-6948 or visit: healthadvocate.com/standard3.

Work/Life Resources: Work/Life Resources are included with the EAP. Get help with referrals for important needs like education, adoption, travel, daily living and care for your pet, child or elderly loved one.

Teladoc Medical Experts: Teladoc Medical Experts are focused primarily on those with complex diagnoses or symptoms to optimize the quality of care and minimize the patient's burden. Contact Teladoc Medical Experts at 800.TELADOC.

401(k) Plan: Locke Lord offers a 401(k) Plan with the option to make traditional pre-tax contributions and/ or post-tax Roth contributions to the Plan. Beginning approximately 45 days after your date of hire, 3% of your pay will be automatically deducted and contributed to the Retirement Plan, unless you elect a different percentage or elect to not contribute at all.

Profit Share: The firm may make an additional profit sharing contribution based upon your earnings starting on January 1 or July 1 after you complete one year of service.

TIME OFF BENEFITS

Team members who work 30 hours or more are eligible for PTO, which is accrued on a monthly basis. PTO Benefits are available after 90 days of employment.

NUMBER OF YEARS EMPLOYED	DAYS ACCRUED
0-4 YEARS	20 days
5-9 YEARS	25 days
10+ YEARS	30 days

Holidays: Locke Lord observes 11 holidays throughout the year. For a complete listing of holidays, please refer to the US Holiday Schedule on the LNET.

Child Leave: The Firm recognizes that its team members, both male and female, may need to take time away from work to give birth to, adopt and/or care for a new child, including children joining their family through adoption. Some or all of the eligible team member's New Child Leave may be paid, depending on available Paid Time Off (PTO), eligibility for Short Term Disability leave (STD) and/ or Firm-provided parental leave. For additional details and eligibility, please refer to The Firm policy.

ADDITIONAL INFORMATION AND QUESTIONS

- » Enrollment in your Health and Welfare Benefits is done in Workday, the Firm's HRIS system Lockelord.okta.com
- » Benefit plan information can be found on the benefits site https://wdfyl.lockelord.com
- » Questions can be directed to the HR Hotline at 401.455.7670 or HRHotline@lockelord.com



IMPORTANT CONTACTS



MEDICAL & PHARMACY

Blue Cross Blue Shield of Illinois 888.979.4516 bcbsil.com Base PPO Policy #: 765431 HDHP Policy #: 765433

TELEMEDICINE

MDLive 888.676.4204 mdlive.com/bcbsil

DENTAL

Delta Dental 800.521.2651 deltadentalins.com Policy #: 17572

VISION

VSP 800.877.7195 vsp.com Policy #: 30010688

HEALTH SAVINGS

ACCOUNT

HSA Bank 800.357.6246 hsabank.com

FLEXIBLE SPENDING ACCOUNTS

PayFlex 844.729.3539 payflex.com

LIFE AND AD&D

The Standard 800.628.8600 standard.com Policy #: 760822

DISABILITY

The Standard 800.378.2395 standard.com Policy #: 760822 and 760823

401(K)

Charles Schwab 800-724-7526 workplace.schwab.com

TELADOC MEDICAL EXPERTS

800.TELADOC teladoc.com/medicalexperts

EMPLOYEE ASSISTANCE PROGRAM

Health Advocate 888.293.6948 healthadvocate.com/standard3

BACK-UP CHILD & ADULT CARE

Bright Horizons 877.242.2737 backup.brighthorizons.com

LOCKE LORD HUMAN RESOURCES

HR Hotline 401.455.7670 HRHotline@lockelord.com





