



# 2020

Employee Benefits Guide

**Your Benefits –  
You Drive!**

**KIDisc****very**<sup>™</sup>

# Taking the Driver Seat In your Health

Benefits are an integral part of the overall total compensation package. KLDDiscovery is pleased to offer you a comprehensive benefits package for 2020. We are committed to offering you quality and robust benefits that you value. We work diligently every year to provide you and your family best in class benefits with the nations top carriers at affordable costs. Please take time to review this summary.



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# Eligibility

## Who is Eligible

- Full-time employees working a minimum of 30 hours or more per week.
- Lawful spouses.
- Dependent children less than 26 years of age.
- Stepchildren who reside with you, the employee, and are primarily dependent upon you for support are also considered eligible dependents. Stepchildren are also subject to the age limitations. A child who has a physical or mental disability may be eligible for coverage at any age with proof of disability.



## Restrictions on Mid-Year Plan Changes

Under IRS regulations, after the plan year has started, employees may not change their benefit elections except under certain qualifying events deemed as exceptions (see list below). Election changes must be consistent with your status change. Please contact the Human Resources Department no later than 31 days after the event for detailed discussion of the event and related enrollment possibilities. You will be required to provide proof of change, such as a marriage certificate or record of birth. If you wish to have an FSA plan in 2020, you must make this election during open enrollment. You may also elect or change your FSA election due to a qualifying event.

## Qualifying Events

- Marriage, legal separation or divorce
- Birth or adoption of a child
- Change in employment status for you or your spouse
- Change in a dependent's benefits eligibility status (i.e. a dependent child exceeding the maximum age for coverage)
- A significant change in the cost or coverage of your spouse's benefits
- Change in the cost of dependent care (only for the Dependent Care Flexible Spending Account)

## Benefits Assistance Center

Learn more about your benefits and how to enroll on the Benefits Assistance Center.

Call 844-357-8430 or visit [www.BenefitsAssistanceCenter.com](http://www.BenefitsAssistanceCenter.com) to find:

- Detailed benefit plan information
- Videos about specific benefit plans offered by KLDISCOVERY
- Helpful educational videos about benefits terms and concepts
- Links to all Regulatory Notices including Summary Plan Descriptions (SPDs)
- Information about how to complete your health assessment and biometric screening
- Contact information for all benefit plan providers including website links and phone numbers
- Online chat button to speak with your Benefits Assistance Center Representative



**Steering  
Your Health  
in the Right  
Direction**

# Medical and Prescription Drug Benefits

KLDiscovery is committed to providing quality health coverage to you and your dependents. Health insurance and prescription drug coverage is offered through Cigna. Three Medical plan options are available in 2020, one PPO (Preferred Provider Option) and two High Deductible Health Plans (HDHP) with Health Savings Accounts (HSA):

- Open Access Plus PPO Plan
- Choice Fund Open Access Plus HSA 1400
- Choice Fund Open Access Plus HSA 2000

## Medical/Rx Bi-Weekly Employee Pretax Payroll Contributions

	Open Access Plus PPO	Choice Fund Open Access Plus HDHP HSA 1400	Choice Fund Open Access Plus HDHP HSA 2000
Employee	\$84.93	\$60.05	\$27.26
Employee + Spouse	\$187.90	\$136.52	\$68.16
Employee + Child(ren)	\$181.33	\$131.75	\$65.79
Family	\$305.12	\$225.22	\$120.12

# 2020 KLDISCOVERY Benefits Guide

## Comparing Your Cigna Health Plan Options

Medical	Open Access Plus PPO Plan		Choice Fund Open Access Plus HDHP HSA 1400		Choice Fund Open Access Plus HDHP HSA 2000	
	In-Network	Out-of-Network <sup>c</sup>	In-Network	Out-of-Network <sup>c</sup>	In-Network	Out-of-Network <sup>c</sup>
Lifetime Maximum	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Coinsurance (your plan pays)	90%	70%	80%	60%	80%	60%
Deductible						
Employee only	\$250	\$1,000	\$1,400	\$2,800	\$2,000	\$4,000
Family Coverage <sup>A,B</sup>	\$500	\$2,000	\$2,800	\$5,600	\$4,000	\$8,000
Out-of-pocket maximum						
Employee only	\$2,500	\$4,000	\$2,800	\$5,600	\$6,000	\$12,000
Family Coverage	\$5,000	\$8,000	\$5,600	\$11,200	\$12,000	\$24,000
Services	Plan Pays		Plan Pays		Plan Pays	
Preventive care	100%	70% AD	100%	60% AD	100%	60% AD
Immunizations	100%	70% AD	100%	60% AD	100%	60% AD
Office Visit						
Primary Care Physician	\$25 copay	70% AD	80% AD	60% AD	80% AD	60% AD
Specialist	\$50 copay	70% AD	80% AD	60% AD	80% AD	60% AD
Emergency room	\$200 copay (waived if admitted)		80% AD		80% AD	
Urgent care	\$75 copay	70% AD	80% AD	60% AD	80% AD	60% AD
Inpatient care	90% AD	70% AD	80% AD	60% AD	80% AD	60% AD
Outpatient care	90% AD	70% AD	80% AD	60% AD	80% AD	60% AD
Mental Health						
Inpatient	90% AD	70% AD	80% AD	60% AD	80% AD	60% AD
Outpatient (Physician's Office)	\$25 copay	70% AD	80% AD	60% AD	80% AD	60% AD
Substance Abuse Disorder						
Inpatient	90% AD	70% AD	80% AD	60% AD	80% AD	60% AD
Outpatient	\$25 copay	70% AD	80% AD	60% AD	80% AD	60% AD
Prescription Drugs	Retail (30-Day Supply)	Mail Order (90-Day Supply)	Retail (30-Day Supply)	Mail Order (90-Day Supply)	Retail (30-Day Supply)	Mail Order (90-Day Supply)
	You Pay	You Pay	You Pay	You Pay	You Pay	You Pay
Tier 1—Generics	\$10 copay	\$20 copay	\$10 copay AD	\$20 copay AD	\$10 copay AD	\$20 copay AD
Tier 2—Preferred	\$35 copay	\$70 copay	\$35 copay AD	\$70 copay AD	\$35 copay AD	\$70 copay AD
Tier 3—Nonpreferred	\$60 copay	\$120 copay	\$60 copay AD	\$120 copay AD	\$60 copay AD	\$120 copay AD

AD = After Deductible

This is not a complete list of covered services. Please see your Summary Plan Description (SPD) for the complete list. This chart is intended for comparison purposes only. If there are discrepancies, the plan document will govern.

<sup>A</sup> Open Access Plus: After each eligible family member meets his or her individual deductible, covered expenses for that family member will be paid based on the coinsurance level specified. Or, after the family deductible has been met, covered expenses for each eligible family member will be paid based on the coinsurance level specified by the plan.

<sup>B</sup> Choice Fund Open Access Plus HSA 1350 and Choice Fund Open Access Plus HDHP HSA 2000 Plans: All eligible family members contribute towards the family plan deductible. Once the family deductible has been met, the plan will pay each eligible family member's covered expenses based on the coinsurance level specified by the plan.

<sup>C</sup> Out-of-network reimbursement is based on the lesser of 1) the provider's nominal charge for a similar service of supply or 2) 200% of a fee schedule developed by Cigna. **5**

# Healthcare Resources

## Cigna Telehealth Connection

Virtual Visits are available through Cigna Telehealth Connection. Cigna provides access to two telehealth services as part of your medical plan - Amwell and MDLive. Cigna Telehealth Connection lets you get the care you need - including most prescriptions - for a wide range of minor conditions. Now you can connect with a board-certified doctor via video chat or phone, without leaving your home or office.

Register for one or both today so you'll be ready to use a telehealth service when and where you need it.

### Amwell

AmwellforCigna.com  
855-667-9722

### MDLive

MDLIVEforCigna.com  
888-726-3171

## Cigna One Guide<sup>SM</sup> Service

### How Cigna One Guide can assist during the enrollment process:

Choose a plan with confidence with help from the Cigna One Guide service. Call a Cigna One Guide representative during the enrollment process to get personalized, useful guidance.

Your personal guide will help you:

- Easily understand the basics of health coverage.
- Identify the types of health plans available to you that best meet the needs of you and your family.
- Check if your doctors are in-network to help you avoid unnecessary costs.
- Get answers on any other questions you may have about the plans or provider networks available to you.

### How Cigna One Guide can help after you are enrolled:

After enrollment, the support continues for Cigna customers. Cigna's One Guide service provides personal assistance to help you:

- Resolve health care issues.
- Find the right hospitals and other health care providers in your plan's network.
- Get cost estimates.
- Understand your bills.
- Navigate the health care system.

## myCigna Mobile App

### Now with 1-touch access

The myCigna Mobile App makes it easy to check if a doctor is in your plan's network, so you can avoid out-of-network costs. And myCigna has fingerprint access, so you're always just 1 touch away from your:

- Provider directory
- Coverage details
- Deductible expenses
- Account balances
- Claims information, and more



## Need Health Advice in a Hurry?

With a virtual visit through Cigna Telehealth Connection, you can receive medical advice from board-certified doctors on a wide range of minor conditions:

- ❖ Sore throat
- ❖ Headache
- ❖ Stomachache
- ❖ Fever
- ❖ Cold and flu
- ❖ Allergies
- ❖ Rash
- ❖ Acne
- ❖ UTIs
- ❖ And more



## Contact Cigna One Guide

Access the Cigna One Guide support tool by downloading the myCigna App or calling 800.244.6224 to speak with a One Guide representative today.



## Download the myCigna App





Don't miss out on company paid wellness incentive up to \$1,000!

## MotivateMe Incentive Program

You can earn employer-sponsored rewards for participating in healthy actions through Cigna's MotivateMe program.

### Health Assessment

The first health action you can complete to earn rewards is the health assessment. Log into myCigna.com to complete the health assessment questionnaire. You can also complete the health assessment via the Cigna mobile app. There is no cost for you to complete the health assessment and the information you provide will not be shared with your employer.

### Biometric Screening

The second action you can complete to earn rewards is a biometric screening. We encourage you to complete this screening at your Doctor's office during your annual physical. You may complete a biometric screening at a Quest Diagnostic Center or a LabCorp location with a doctor's referral.

### Incentives

#### If you are enrolled in a high deductible health plan:

Activity	Dollar Amount Earned for Activity Completion	Incentive
Health Assessment Completion	\$250 for employee-only coverage \$500 for employee + one or more coverage	Health Savings Account (HSA) contribution by KLDISCOVERY
Biometric Screening Completion	\$250 for employee-only coverage \$500 for employee + one or more coverage	Health Savings Account (HSA) contribution by KLDISCOVERY

#### If you are enrolled in the PPO plan:

Activity	Dollar Amount Earned for Activity Completion	Incentive
Health Assessment Completion	\$200 for employee-only coverage \$400 for employee + one or more coverage	Gift cards can be selected and redeemed at myCigna.com
Biometric Screening Completion	\$200 for employee-only coverage \$400 for employee + one or more coverage	Gift cards can be selected and redeemed at myCigna.com

### Deadline

To earn incentives in 2020, the deadline to complete the health assessment and biometric screening activities is November 30, 2020.



## Health Savings Account (HSA)

A health savings account (HSA) is a personal healthcare bank account you can use to pay out-of-pocket medical expenses with pre-tax dollars. An HSA is offered to all employees alongside the High Deductible Health Plan, which helps protect you from large healthcare expenses.

You own and administer your HSA. You determine how much you will contribute to your account, when to use your money to pay for qualified medical expenses, and when to reimburse yourself. Remember, this is a bank account; you must have money in the account before you can spend it.

HSAs offer you the following advantages:

- ▶ **Tax savings:** HSAs provide triple tax savings. Contributions are tax free, the account grows tax free, and spending is tax free (as long as it is on qualified medical costs).
- ▶ **Reduced out-of-pocket costs:** You can use the money in your HSA to pay for eligible medical expenses and prescriptions. The HSA funds you use can help you satisfy your plan's annual deductible.
- ▶ **A long-term investment that stays with you:** Unused account dollars are yours to keep even if you retire or leave the company. Additionally, you can invest your HSA funds, so your available healthcare dollars can grow over time.
- ▶ **The opportunity for long-term savings:** Save unused HSA funds from year to year—you can use this money to reduce future out-of-pocket health expenses. You can even save HSA dollars to use after you retire.



To be eligible to open and fund an HSA:

- You must be enrolled in a Cigna Choice Fund HSA plan.
- You cannot have any other health coverage, including your spouse's health plan, FSA or HRA.
- You cannot be enrolled in Medicare, Medicaid, TRICARE or TRICARE for Life.
- You cannot have received Veterans Administration (VA) benefits during the prior three calendar months.
- You cannot claim yourself as a dependent on someone else's tax return.

## How Do I Access/Make Contributions to My HSA?

Once your account has been opened, you can access it via [hsabank.com](https://hsabank.com). You'll set up your payroll contributions during Open Enrollment. You also can make contribution changes at any time during the year. Note that it may take between one and two payroll periods for an HSA change to be processed.

## IMPORTANT! How Much Can Be Deposited Into an HSA in 2020?

- Under age 55 (and not enrolled in Medicare):
  - Up to \$3,550 for individual coverage
  - Up to \$7,100 for family coverage
- Age 55 or older (and not enrolled in Medicare):
  - The maximum contribution increases by \$1,000 (considered a "catch-up" contribution).
  - Up to \$4,550 for individual coverage
  - Up to \$8,100 for family coverage

## Note the Following Important Information:

- As a participant in the company-sponsored medical plan, KLDISCOVERY will automatically take steps to establish your health savings account with HSA Bank. The HSA Bank account is only available to you if you are a participant in the KLDISCOVERY medical plan.
- Due to the US banking system's customer identification process (CIP) requirements, your account cannot be opened until the CIP is completed. If HSA Bank is unable to complete the CIP process, they will make two attempts to contact you by mail before closing the account.
- You will receive a welcome kit from HSA Bank along with a debit card by mail to your physical mailing address when the CIP is completed.
- No employer or employee contributions can be deposited until your account is fully opened through the HSA Bank CIP process.
- If your account is closed, it is your responsibility to contact HSA Bank to process a new banking application and to open another account. Once an account is closed, it cannot be reopened. HSA Bank can be contacted at (855) 731-5227.
- If you do not take the appropriate steps to open an account, any employer contributions that cannot be deposited due to failure to open an account will be forfeited.

## Take the Road to Tax Savings!

For more information, access the HSA Bank customer website guide posted on [hsabank.com](https://hsabank.com). You can contact them at 855-731-5227.



**Dental care is an important stop on your road to overall health!**

## Dental Benefits

KLDiscovery offers dental insurance through Delta Dental of Virginia. You may select the dentist of your choice. However, to get the full advantage of your Delta Dental coverage, you should choose a dentist who participates in the Delta Dental network(s) covered by your plan.

Delta Dental PPO and Delta Dental Premier dentists have agreed to accept Delta Dental's plan allowance, plus any required coinsurance and deductible (if applicable) as payment in full. In addition, Delta Dental PPO and Delta Dental Premier dentists will submit claims directly to Delta Dental and Delta Dental will issue the payment to the dentist.

Non-Participating dentists have not agreed to accept Delta Dental's plan allowance as full payment. After Delta Dental pays its portion of the bill, you are responsible for any required coinsurance and deductible (if applicable), as well as the difference between the non-participating dentist's charge and Delta Dental's payment. Payment will be made to you.

Please visit [DeltaDentalVA.com](http://DeltaDentalVA.com) to find a participating dentist in your area.

### **Healthy Smile, Healthy<sup>®</sup> You Program**

Your plan provides additional cleanings and/or application of topical fluoride to enrollees with specific health conditions such as pregnancy, diabetes, high-risk cardiac conditions or who are undergoing cancer treatment via chemotherapy and/or radiation. Enrollment in the Healthy Smile, Healthy You Program is simple. Visit [DeltaDentalVA.com](http://DeltaDentalVA.com) to print an enrollment form.

# 2020 KLDDiscovery Benefits Guide

## Comparing Your Delta Dental Plan Options

Dental	Basic Plan			Premium Plan		
	In-Network		Out-of-Network <sup>A</sup>	In-Network		Out-of-Network <sup>A</sup>
	PPO	Premier		PPO	Premier	
Calendar Year Deductible <i>(applies to Basic and Major Services)</i>						
Individual	\$50	\$50	\$50	\$50	\$50	\$50
Family	\$150	\$150	\$150	\$150	\$150	\$150
Calendar Year Maximum	\$1,000 per person	\$750 per person	\$750 per person	\$2,000 per person	\$2,000 per person	\$750 per person
Lifetime Orthodontic Max.	N/A	N/A	N/A	\$2,000 per person	\$2,000 per person	\$1,000 per person
<b>Covered Benefits</b>						
<b>Diagnostic and Preventive Services</b>	<b>100%</b>	<b>50%</b>	<b>50%</b>	<b>100%</b>	<b>100%</b>	<b>80%</b>
Oral exams and cleanings	Twice in a calendar year.			Twice in a calendar year.		
Fluoride applications	Twice in a calendar year for enrollees under the age of 19.			Twice in a calendar year for enrollees under the age of 19.		
Bitewing X-Rays	Two sets in a calendar year.			Two sets in a calendar year.		
Full-mouth/panelpise X-Rays	Once in a 5-year period.			Once in a 5-year period.		
Sealants	One application per tooth every 3 years for enrollees under the age of 16 on non-carious, non-restored 1st and 2nd permanent molars.			One application per tooth every 3 years for enrollees under the age of 16 on non-carious, non-restored 1st and 2nd permanent molars.		
Space maintainers	Once per quadrant per arch for enrollees under the age of 14.			Once per quadrant per arch for enrollees under the age of 14.		
<b>Basic Services</b>	<b>80%</b>	<b>50%</b>	<b>50%</b>	<b>90%</b>	<b>80%</b>	<b>80%</b>
Amalgam (silver) and composite (white) fillings	Once per surface in a 24-month period.			Once per surface in a 24-month period.		
Stainless steel crowns	Primary (baby) teeth for enrollees under the age of 14.			Primary (baby) teeth for enrollees under the age of 14.		
Simple extractions						
Endodontic services/ root canal therapy	Retreatment only after 24 months from initial root canal therapy treatment.			Retreatment only after 24 months from initial root canal therapy treatment.		
Periodontal cleanings	Twice in a calendar year.			Twice in a calendar year.		
Periodontic services	Once per quadrant in a 24-36 month period based on services rendered.			Once per quadrant in a 24-36 month period based on services rendered.		
Complex oral surgery	Surgical extractions and other surgical procedures.			Surgical extractions and other surgical procedures.		
<b>Other Basic Services</b>	<b>50%</b>	<b>50%</b>	<b>50%</b>	<b>60%</b>	<b>50%</b>	<b>50%</b>
Denture repair and recementation of crowns, bridges and dentures	Once in a 12-month period.			Once in a 12-month period.		
<b>Major Services</b>	<b>50%</b>	<b>50%</b>	<b>50%</b>	<b>60%</b>	<b>50%</b>	<b>50%</b>
Crowns	Once per tooth in a 60-month period for enrollees age 12 and older.			Once per tooth in a 60-month period for enrollees age 12 and older.		
Prostodontics, removable and fixed	Once in a 60-month period for enrollees age 16 and older.			Once in a 60-month period for enrollees age 16 and older.		
Implants	Once per site for enrollees age 16 and older.			Once per site for enrollees age 16 and older.		
<b>Orthodontic Services</b>	<b>Not Covered</b>			<b>50%</b>	<b>50%</b>	<b>50%</b>
Treatment for the proper alignment of teeth				For dependent children under the age of 19.		

This is not a complete list of covered services. Please see your Summary Plan Description (SPD) for the complete list. This chart is intended for comparison purposes only. If there are discrepancies, the plan document will govern.

<sup>A</sup>Out-of-network reimbursement is based on the 90th reasonable and customary percentile.

## Dental Bi-Weekly Employee Pretax Payroll Contributions

	Basic Plan	Premium Plan
Employee	\$5.68	\$14.91
Employee + Spouse	\$10.14	\$25.20
Employee + Child(ren)	\$10.45	\$27.08
Family	\$16.01	\$43.01



## Vision Benefits

Get access to the best in eye care and eyewear with VSP® Vision Care. Why enroll in VSP? As a member, you'll receive access to care from great eye doctors, quality eyewear, and the affordability you deserve, all at the lowest out-of-pocket costs.

- **Value and Savings.** You'll enjoy more value and the lowest out-of-pocket costs.
- **High Quality Vision Care.** You'll get the best care from a VSP network doctor, including a WellVision Exam®—the most comprehensive exam designed to detect eye and health conditions.
- **Choice of Providers.** The decision is yours to make—choose a VSP network doctor, a participating retail chain, or any out-of-network provider.
- **Great Eyewear.** It's easy to find the perfect frame at a price that fits your budget.

## Choice in Eyewear

From classic styles to the latest designer frames, you'll find hundreds of options. Choose from featured frame brands like bebe®, Calvin Klein, Cole Haan, Flexon®, Lacoste, Nike, Nine West, and more. Visit [vsp.com](http://vsp.com) to find a Premier Program location that carries these brands. Plus, save up to 40% on popular lens enhancements. Prefer to shop online? Check out all of the brands at [eyeconic.com](http://eyeconic.com)®, VSP's online eyewear store.

## Your VSP Vision Plan Benefits

Vision	Description	Copay	Frequency
<b>Your Coverage with a VSP provider (VSP Provider Network: VSP Choice)</b>			
WellVision Exam	➤ Focuses on your eyes and overall wellness	\$10	Every calendar year
<b>Prescription Glasses</b>		\$20	See frame and lenses
Frame	<ul style="list-style-type: none"> <li>➤ \$150 allowance for a wide selection of frames</li> <li>➤ \$170 allowance for featured frame brands</li> <li>➤ 20% savings on the amount over your allowance</li> <li>➤ \$80 Costco® frame allowance</li> </ul>	Included in Prescription Glasses	Every other calendar year
Lenses	<ul style="list-style-type: none"> <li>➤ Single vision, lined bifocal, and lined trifocal lenses</li> <li>➤ Polycarbonate lenses for dependent children</li> </ul>	Included in Prescription Glasses	Every calendar year
Lens Enhancements	<ul style="list-style-type: none"> <li>➤ Standard progressive lenses</li> <li>➤ Premium progressive lenses</li> <li>➤ Custom progressive lenses</li> <li>➤ Average savings of 20-25% on other lens enhancements</li> </ul>	\$55 \$95-\$105 \$150-\$175	Every calendar year
Contacts (instead of glasses)	<ul style="list-style-type: none"> <li>➤ \$150 allowance for contacts and contact lens exam (fitting and evaluation)</li> <li>➤ 15% savings on a contact lens exam (fitting and evaluation)</li> </ul>	\$0	Every calendar year
Diabetic Eyecare Plus Program	➤ Services related to diabetic eye disease, glaucoma and age-related macular degeneration (AMD). Retinal screening for eligible members with diabetes. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details.	\$20	As needed
<b>Extra Savings</b>			
Glasses & Sunglasses	<ul style="list-style-type: none"> <li>➤ Extra \$20 to spend on featured frame brands. Go to <a href="http://vsp.com/specialoffers">vsp.com/specialoffers</a> for details.</li> <li>➤ 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam.</li> </ul>		
Retinal Screening	➤ No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam		
Laser Vision Correction	➤ Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities		

### Your Coverage with Out-of-Network Providers

Get the most out of your benefits and greater savings with a VSP network doctor. Your coverage with out-of-network providers will be less or you'll receive a lower level of benefits. Visit [vsp.com](http://vsp.com) for plan details.

Exam	up to \$45	Lined Bifocal Lenses	up to \$50	Progressive Lenses	up to \$50
Frame	up to \$70	Lined Trifocal Lenses	up to \$65	Contacts	up to \$105
Single Vision Lenses	up to \$30				

Coverage with a participating retail chain may be different. Once your benefit is effective, visit [vsp.com](http://vsp.com) for details. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business.

This is not a complete list of covered services. Please see your Summary Plan Description (SPD) for the complete list. This chart is intended for comparison purposes only. If there are discrepancies, the plan document will govern.

## Vision Bi-Weekly Employee Pretax Payroll Contributions

	Vision Plan
Employee	\$1.50
Employee + Spouse	\$4.22
Employee + Child(ren)	\$4.54
Family	\$8.41

# Life and Disability Insurance

## Life/AD&D and Disability

KLDiscovery provides the following benefits through Lincoln Financial, at no cost to employees working 30 hours or more a week:

- **Basic Life/Accidental Death & Dismemberment:** Coverage is equal to 1x salary rounded up to the next \$1,000. This amount may not exceed \$250,000.
- **Short-Term Disability:** If you become disabled (as defined in the plan) and remain disabled through the elimination period, the plan pays 60% of weekly earnings to a maximum of \$2,000 per week. Benefits begin on the 8th day after an accident, illness, or birth of a child and end when you are no longer disabled or up to a maximum of 26 weeks, whichever comes first.
- **Long-Term Disability:** For a disability that extends longer than short-term disability, the long-term disability plan pays 60% of your monthly salary to a maximum of \$15,000 per month. The benefit continues until the end of your disability or until your social security normal retirement age. KLDiscovery pays the entire cost of the coverage and includes the cost in your gross income (i.e. W-2) so that the benefits when paid are not taxable.

## Optional Life and AD&D Insurance

You have the opportunity to purchase supplemental Life and AD&D insurance for you and your dependents.

Benefit Plan	Description	Amount You May Purchase
Employee Optional Life and AD&D	Life insurance for the employee that is in addition to the company-provided Basic Life Insurance	Increments of \$10,000 not to exceed the lesser of 6x your base annual salary or \$1,000,000.
Dependent Spouse Optional Life and AD&D	Life insurance for an employee's spouse	Increments of \$5,000 to a maximum of \$300,000. The amount of Dependent Life and AD&D insurance coverage cannot be greater than 100% of the Employee Benefit.
Dependent Child(ren) Optional Life and AD&D	Life insurance for an employee's or spouse's child(ren)	Increments of \$2,000 to a maximum of \$20,000 for children at least age 14 days but under age 26.

### Optional Pretax Monthly Life Rates (spouse age band is based off of the employee age)

Age	Rate	Age	Rate
Employee Rate/\$1,000		Spouse Rate/\$1,000	
Age 34 and under	\$0.050	Age 34 and under	\$0.050
35-39	\$0.060	35-39	\$0.060
40-44	\$0.080	40-44	\$0.080
45-49	\$0.130	45-49	\$0.130
50-54	\$0.210	50-54	\$0.210
55-59	\$0.360	55-59	\$0.360
60-64	\$0.570	60-64	\$0.570
65-69	\$0.670	65-69	\$0.670
70+	\$2.060	70+	\$2.060
Child(ren) Life			
Per \$1,000		\$0.100	

### Optional Pretax AD&D Rates

Employee	\$0.023/\$1,000
Spouse & Child	\$0.034/\$1,000

To calculate monthly premium- \$ amount of requested additional insurance/\$1,000) x Rate (found on the above table) = Monthly Premium. Optional AD&D rate needs to be added to the applicable Optional Life Rates to determine your cost.

## Critical Illness Insurance

Critical illness insurance through MetLife helps cover the extra expenses associated with a serious illness by providing you and your family with a lump-sum payment upon diagnosis that may be spent as you see fit. The total benefit amount available to you is 3 times the Initial Benefit Amount, in the event that you suffer more than one covered condition.

Eligible Individual	Initial Benefit
Employee	You can choose to elect a benefit of \$10,000, \$20,000 or \$30,000
Spouse	100% of the employee's Initial Benefit
Dependent Child(ren)	100% of the employee's Initial Benefit

Critical Illness provides you with a lump-sum payment upon diagnosis of the following conditions: full benefit cancer, partial benefit cancer, heart attack, stroke, kidney failure, coronary artery bypass graft, Alzheimers disease, major organ transplant and 22 other listed conditions (see your MetLife outline of coverage for full details).

This is an optional plan (100% employee paid). Premiums will be conveniently paid through post-tax payroll deduction.

Monthly Premium for \$1,000 of Coverage				
Attained Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse + Children
<25	\$0.18	\$0.16	\$0.24	\$0.40
25-29	\$0.19	\$0.23	\$0.25	\$0.42
30-34	\$0.29	\$0.36	\$0.35	\$0.65
35-39	\$0.40	\$0.54	\$0.46	\$0.94
40-44	\$0.72	\$0.95	\$0.78	\$1.67
45-49	\$1.21	\$1.61	\$1.27	\$2.82
50-54	\$1.82	\$2.62	\$1.88	\$4.44
55-59	\$2.70	\$4.13	\$2.76	\$6.83
60-64	\$3.92	\$6.44	\$3.98	\$10.36
65-69	\$5.74	\$9.58	\$5.80	\$15.32
70+	\$8.48	\$13.49	\$8.54	\$21.97



## Hospital Indemnity Insurance

Hospital indemnity insurance through MetLife provides you with payments when you are admitted and when you are confined to a hospital, due to an accident or illness. Payments are made directly to you to use as you see fit.

Benefit Type	Low Plan: MetLife Pays You	High Plan: MetLife Pays You
<b>Hospital Coverage (Accident)</b>		
<b>Admission</b> (must occur within 180 days after the accident)	\$500 per accident (non-ICU) \$1,000 per accident (ICU)	\$1,000 per accident (non-ICU) \$2,000 per accident (ICU)
<b>Confinement</b> (must occur within 180 days after the accident)	\$100 a day (non-ICU) for up to 31 days \$200 a day (ICU) for up to 31 days	\$200 a day (non-ICU) for up to 31 days \$400 a day (ICU) for up to 31 days
<b>Inpatient Rehab</b> (stay must occur immediately following hospital confinement and occur within 365 days of accident)	\$100 a day, up to 15 days per accident and 30 days per calendar year	\$200 a day, up to 15 days per accident and 30 days per calendar year
<b>Hospital Coverage (Sickness)</b>		
<b>Admission</b> (Payable 1x per calendar year)	\$500 (non-ICU) \$1,000 (ICU)	\$1,000 (non-ICU) \$2,000 (ICU)
<b>Confinement</b> (Paid per sickness)	\$100 a day (non-ICU) for up to 31 days \$200 a day (ICU) for up to 31 days	\$200 a day (non-ICU) for up to 31 days \$400 a day (ICU) for up to 31 days

Insurance Rates		
Coverage Options	Post-Tax Bi-Weekly Cost to You	
	Low Plan	High Plan
Employee	\$4.20	\$8.39
Employee & Spouse	\$10.45	\$20.89
Employee & Child(ren)	\$7.24	\$14.46
Employee & Family	\$13.82	\$27.63



## Commuter Benefits

The PlanSource® Commuter Program is a benefit that allows you to use pre-tax dollars for public transit—including train, subway, bus, ferry and eligible vanpool—and parking as part of your daily commute to work.

### How it works

- Order what you need for your monthly commute. Up to a **maximum of \$270 per month for transit** and **\$270 per month for parking** can be deducted from your paycheck on a pre-tax basis to be used towards your order for qualified expenses. Orders over these amounts will be deducted after taxes.
- You can be reimbursed for eligible commuting expenses you pay out-of-pocket or use the preloaded PlanSource® Commuter Card to pay for parking or transit expenses.



## Flexible Spending Accounts

The primary advantage to enrolling in an IRS approved Flexible Spending plan is to reduce your taxable income. The secondary advantage is to help offset your eligible out-of-pocket expenses.

The plan offered by KLDDiscovery allows you to set aside pre-tax dollars for health and dependent care expenses that you would otherwise pay for with post-tax dollars. Flexible Spending Accounts (FSA) are exempt from federal taxes, Social Security taxes (FICA), and in most cases state income taxes.

### Healthcare Flexible Spending Plan

A Flexible Spending Account, or FSA, lets you set aside pre-tax money from your paychecks to spend on out-of-pocket healthcare expenses (i.e. co-pays, deductibles, over-the-counter items, etc.) that your insurance plans do not cover in full or are ineligible under the plans. Money that goes into an FSA is pre-tax, so you can save as much as 30% of each dollar you put into your FSA, as long as you spend the money on qualified health costs for you, your spouse or eligible dependents. Whether or not you are enrolled in the medical insurance plan through your employer, you are eligible for the FSA. If you are enrolled in a high-deductible HSA plan, you are not eligible to participate in this general-purpose FSA plan.

### Limited-Purpose Flexible Spending Plan

A Limited-Purpose Health Flexible Spending Account (referred to as a limited-purpose FSA) is much like a typical, general purpose health FSA. However, under a limited-purpose FSA, eligible expenses are limited to qualifying dental and vision expenses for you, your spouse, and your eligible dependents. Limited-Purpose FSA Plans are designed for employees that are also contributing to a Health Savings Account (HSA) and are not eligible for a general purpose health FSA plan. By participating in this plan you are able to save money on expenses you are already paying for like dental checkups, vision exams, eyeglasses, and much more.

### Dependent Care Flexible Spending Account

A dependent care flexible spending account (FSA) allows you to be reimbursed on a pre-tax basis for childcare for qualified dependents that is necessary to allow you or your spouse to work or attend school full-time.

The maximum amount you can set aside in a dependent care FSA is \$5,000 per year per family, or \$2,500 if married and filing separately. Funds in your dependent care FSA are available to you only as they are deducted from your paycheck. Remember to use all of your contributions each plan year because no contribution amount may be carried over to subsequent plan years. In other words, you use it or lose it.

Eligible dependent care expenses include the care of children under age 13 and the care for dependents of any age who are physically or mentally incapable of self-care (includes day care for elderly dependents but not nursing home confinements).

Examples of eligible expenses are day care, after-school care, and elder care. You decide how much to contribute for the calendar year (annual maximum is \$5,000) to be deducted incrementally from your paycheck. These contributions to your dependent care FSA are made before any taxes (payroll or income) are taken from your earnings, which reduces your taxable income for the year.

### Use It or Lose It!

Remember to use all of your contributions each plan year because no contribution amounts can be carried over to subsequent plan years.

#### ANNUAL MAXIMUMS

Healthcare FSA: \$2,750  
Dependent Care FSA: \$5,000

# LegalShield/IDShield

With LegalShield, our members can talk to a lawyer on any personal legal matter, no matter how trivial or traumatic, all without worrying about high hourly costs.

## The LegalShield Membership includes:

- Personal Legal advice on unlimited issues
- Letters/ calls made on your behalf
- Contracts & documents reviewed (up to 10 pages)
- Residential Loan Document Assistance
- Lawyers prepare your Will, your Living Will and your Health Care Power of Attorney
- Moving Traffic Violations (available 15 days after enrollment)
- IRS Audit Assistance
- Trial Defense (if named defendant/respondent in a covered civil action suit)
- Uncontested Divorce, Separation, Adoption and/or Name Change Representation
- 25% Preferred Member Discount (Bankruptcy, Criminal Charges, DUI, Other Matters, etc.)

LegalShield legal plans cover the member; member's spouse; never married dependent children under 21 living at home; dependent children under age 18 for whom the member is legal guardian; never married, dependent children up to age 23 if a full-time college student; and physically or mentally disabled dependent children.

## The IDShield Membership includes:

- **Privacy Monitoring** Monitoring your name, SSN, date of birth, email address (up to 10), phone numbers (up to 10), driver license & passport numbers, and medical ID numbers (up to 10) provides you with comprehensive identity protection service that leaves nothing to chance.
- **Security Monitoring** SSN, credit cards (up to 10), and bank account (up to 10) monitoring, sex offender search, financial activity alerts and quarterly credit score tracking keep you secure from every angle. With the family plan, Minor Identity Protection is included and provides monitoring for up to 8 children under the age of 18.
- **Consultation** Your identity protection plan includes 24/7/365 live support for covered emergencies, unlimited counseling, identity alerts, data breach notifications and lost wallet protection.
- **Full Service Restoration** Complete identity recovery services by Kroll Licensed Private Investigators and our \$5 million service guarantee ensure that if your identity is stolen, it will be restored to its pre-theft status.

IDShield Plans are available for Groups at individual or family plan rates. A family rate covers the member, member's spouse and up to 8 dependents up to the age of 26\*.

\*Dependents that are over 18, under 26, and either live at home or are a full time student, and have never been married will receive unlimited consultation and complete restoration by Kroll licensed private investigators. Monitoring is not available for dependents in this category.

Payroll Post-Tax Deduction: Bi-Weekly	Family	Individual
LegalShield	\$7.27	\$7.27
IDShield	\$7.36	\$3.90
Combined	\$13.25	\$11.17



# Vacation

KLDDiscovery is committed to providing employees with opportunities to take time off from work for rest, relaxation, rejuvenation or to spend time with their families.

Both regular full-time and part-time employees scheduled to work 20 or more hours per week are eligible to earn paid vacation. Eligible employees will accrue vacation time on a per pay period basis, determined by their length of service. Employees will accrue at the next tier level on the first full pay period following their anniversary date, per the schedule below.

Years of Service	Full-Time Employee Accrual Per Pay Period	Maximum Balance
New Hire < 3 years	4.61 hours	120 hours
3 years < 6 years	6.15 hours	160 hours
6+ years	7.69 hours	200 hours

Employees are eligible to carryover up to 40 vacation hours from one calendar year to the following calendar year, unless otherwise required by law. See the KLDDiscovery leave policy and/or your State Addendum for full policy details.

KLDDiscovery also provides bereavement leave, jury leave, and paid annual holidays to all full-time and regular part-time employees.



## 2020 Holidays

KLDDiscovery will observe the following holidays in the U.S.:

January 1*:	New Year's Day
Third Monday of January:	Martin Luther King Day
Third Monday of February:	President's Day
Last Monday in May:	Memorial Day
July 4*:	Independence Day
First Monday in September:	Labor Day
Fourth Thursday in November:	Thanksgiving Day
Fourth Friday in November:	Friday after Thanksgiving
December 25*:	Christmas
Floating Holiday**:	Upon request

\* If this holiday falls on a Saturday, the preceding Friday will be a holiday. If it falls on a Sunday, the following Monday will be a holiday.

\*\* The floating holiday allows employees to have an additional day to celebrate the holiday/observance of their choice. Floating Holiday must be scheduled in advance and approved by your manager

# Sick Hours

Both regular full-time and part-time employees scheduled to work 20 or more hours per week are eligible for paid Sick Time. Employees will be eligible to receive Sick Time at the beginning of each calendar year, on January 1.

Sick Time may be used for illness or injury of the employee and for employee health and dental care provider appointments when it is not possible to schedule appointments during non-working hours. Sick Time used for health care provider appointments, which are not medically urgent, must be scheduled in advance and approved by the supervisor.

## Sick Time for New Hires/Rehires

For employees hired after January 1 of each year, employees will be eligible to receive a prorated amount of Sick Time for the remainder of the calendar year, based on hire date as follows.

Month of Hire	*Sick Hours for employees scheduled to work 40 hours per week
January, February	40
March, April	32
May, June, July	24
August, September	16
October, November, December	8

*\* For regular part-time employees, Sick Time is prorated based on the number of scheduled work hours per week.*

# Parental Leave

Parental Leave provides parents additional flexibility to bond with their new child, adjust to their new family situation and balance their professional obligations.

Regular full-time and regular part-time employees, both male and female, scheduled to work 30 or more hours per week are eligible for five 100% paid days (40 hours) of Parental Leave.

# Community Service Time Off

We encourage our employees to become involved in their communities, lending their voluntary support to programs that positively impact the quality of life within these communities.

Regular full-time employees scheduled to work 40 hours a week and regular part-time employees scheduled to work 20 or more hours per week are eligible for one day (up to \*8 hours) per calendar year for Community Service Time Off.

*\*New employees hired July through December will be granted one-half day (4 hours) of paid community service time in their first calendar year of employment.*

# Vacation Donation Program

The purpose of the Vacation Donation Program is to provide KLDDiscovery team members the opportunity to donate and/or receive vacation donations from fellow KLDDiscovery employees to provide income replacement during qualifying times of need. Donated vacation time will be allocated for communal use and awarded on a first-come, first-serve basis.

## 401(k)

KLDDiscovery Regular employees are eligible to participate in the company's Fidelity 401(k) plan on the first of the month following date of hire. Employees have the option of contributing through payroll to a pre-tax 401(k), a post-tax Roth 401(k), or both.

Our 401(k) recordkeeper, Fidelity, provides a range of educational resources and tools to participants, including Web Workshops, Investment Centers, Portfolio Review, and an Automatic Increase Program at [www.fidelity.com](http://www.fidelity.com).

Plan participants that reach age 50 before the calendar year is over are eligible to make catch up contributions on a pre-tax basis up to the IRS limit.

## Business Travel Accident & Medical

Travel Accident Insurance covers all full-time employees traveling on behalf of the company – whether you're crossing the street to get coffee with a business partner, purchasing office supplies at a nearby store, or traveling overseas to meet a new client. This policy provides a benefit amount of two times your annual salary subject to a maximum of \$1,000,000 for accidental death & dismemberment. A benefit of \$50,000 and \$25,000 is extended to your spouse and dependent children, respectively, that are approved for travel with you. This benefit also covers emergency medical transportation, repatriation, and medical expenses while traveling abroad.

## Tuition Reimbursement

KLDDiscovery provides financial assistance to employees seeking a degree at an accredited higher learning institution which would be beneficial to both the employee and the Company. Eligibility will be granted on a case by case basis after six months of employment in good standing.

## Company Discounts

KLDDiscovery employees are eligible for corporate discounts at several large retailers. AT&T, Verizon, and Dell each provide our employees with discounts or member exclusive deals on service plans or electronics/accessories when you register with a company discount code or with your KLDDiscovery email address. Review the Employee Discounts on the Benefits Assistance Center.

## Employee Referrals

KLDDiscovery is ready to grow! If you know someone who would fit our culture and is ready to join a top global eDiscovery leader, encourage them to apply online and to put your name down as the referring source. Employees who refer a full-time candidate are eligible to earn a referral bonus. See a member of your Human Resources team for details.

# Adoption Assistance

To help employees who choose to adopt, KLDDiscovery offers an adoption assistance benefit to reimburse a portion of the expenses incurred. KLDDiscovery will reimburse allowable adoption expenses up to a maximum of \$2500 per child once the adoption is final, for adopted children 18 years of age or younger.

# Employee Assistance Program

KLDDiscovery is pleased to offer access to the valuable and confidential Cigna Employee Assistance Program (EAP) at no cost to you or your family members.

## Take advantage of a wide range of services offered at no cost to you:

- **5 Face-to-face counseling sessions:** with a counselor in your area, as well as video-based sessions.
- **Legal assistance:** 30-minute consultation with an attorney, face-to-face or by phone.\*
- **Financial:** 30-minute telephone consultation with a qualified specialist on topics such as debt counseling or planning for retirement.
- **Parenting:** Resources and referrals for childcare providers, before and after school programs, camps, adoption organizations, child development, prenatal care and more.
- **Eldercare:** Resources and referrals for home health agencies, assisted living facilities, social and recreational programs and long-distance caregiving.
- **Pet care:** Resources and referrals for pet sitting, obedience training, veterinarians and pet stores.
- **Identity theft:** 60-minute consultation with a fraud resolution specialist.

\*Employment-related legal issues are not covered

Some work/life services offered under the Cigna Employee Assistance Program may be provided by a Cigna contracted third-party vendor.

## EAP Web Services

EAP personal advocates will work with you and your household family members to help you resolve issues you may be facing, connect you with the right mental health professionals, direct you to a variety of helpful resources in your community and more.

Call [800.244.6224](tel:800.244.6224) or log in to [myCigna.com](https://myCigna.com) and go to the EAP link under the Review My Coverage tab.

## Required Notices

The Company is required to make available to you certain regulatory notices regarding employee benefits plans. These notices include:

- CHIP Notice
- EEOC Wellness Program Notice
- HIPAA Special Enrollment Notice
- HIPAA Privacy Notice
- Medicare Part D Notice
- Summary Annual Reports (SARs)
- Summary of Benefits and Coverage for Each Medical Plan
- Summary Plan Descriptions (SPDs)
- Women's Health and Cancer Rights Notice

You may view and print these notices by logging into [www.BenefitsAssistanceCenter.com](http://www.BenefitsAssistanceCenter.com) and going to Regulatory Notices tab. You may request that a paper copy of a notice be mailed to you at no cost by contacting the Benefits Assistance Center at 1-844-357-8430. Phone representatives are available Monday through Friday, 8:00 am to 11:00 pm ET.



# Contacts



## Medical and Rx Plan

Cigna Member Services	800.244.6224
Website	www.mycigna.com

## Dental Plan

Delta Dental	800.237.6060
Website	www.deltadentalva.com

## Vision

VSP	800.877.7195
Website	www.vsp.com

## Life and Disability Insurance

Leave, Disability & Life Telephonic Claim Intake	888.408.7300
STD and LTD Claim Inquiries	800.291.0112
FMLA and Leave Inquiries	866.630.9320
Life Claim Inquiries	877.787.2129
Website	www.MyLincolnPortal.com Company Code: KLDDiscovery

## Critical Illness and Hospital Indemnity

MetLife	800.GET.MET8
Website	www.metlife.com/mybenefits

## Commuter Benefits

PlanSource	844.357.8430
Website	www.plansource.healthcareportal.com

## Flexible Spending Accounts

PlanSource	888.266.1732 Option 2
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## Legal Plan and Identity Theft

IDShield	800.654.7757
Website	www.legalshield.com/info/KLDDiscovery

## 401(k)

Fidelity	800.343.3548
Website	www.fidelity.com

## Employee Assistance Program

EAP	800.244.6224
Website	myCigna.com

## Business Travel Accident and Medical

Chubb Travel Assistance	800.243.6124 (inside the USA) 202.659.7803 (outside USA, call collect)
Website	ACETravelAssistance.com Group ID: aceah Activation Code: security

## Employee Benefits

Benefits Assistance Center	1.844.357.8430
Website	www.BenefitsAssistanceCenter.com

*The descriptions of the benefits are not guarantees of current or future employment or benefits. If there is any conflict between this guide and the official plan documents, the official documents will govern.*