

WILSON
SONSINI



2021

Benefits
Enrollment
Guide

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Our Commitment to You

Wilson Sonsini is committed to providing a benefits program that is both comprehensive and competitive. Our benefits program offers health care, financial security, and work/life benefits to you and your family members.

Although the firm pays most of the cost of your benefits, you do pay a portion, too. Make sure you're not paying for benefits you don't need.

Take a little time to review this guide and become well versed in the benefits available to you. This guide provides a general overview of your benefit choices and enrollment information. It will help you make it quick and easy for you to understand your coverage options. Learn how to navigate through the choices to choose the ones that fit your life and budget.



Eligibility

Spend just a few minutes with this enrollment guide to understand the steps you need to take to get the right mix of benefits and coverage for you and your family.

Who is eligible?

In general, you're eligible for the benefits described in this enrollment guide if you're a regular US employee who works at least 20 hours per week. You may also elect coverage for your eligible dependents, including:

- Your legal spouse, or your same-sex or opposite-sex domestic partner;
- Your children*:
 - Up to their 26th birthday, regardless of student status or marital status; and
 - Unmarried children of any age who are dependent upon you for support when they are incapable of supporting themselves because of a disability or illness.

To learn more about eligibility, please refer to the WSGR Group Welfare Plan Summary Plan Description (SPD) available on the firm's intranet. Please call the HR Helpline at (650) 858-7062 or email humanresources@wsgr.com to request a hard copy.

*Includes natural, adopted, stepchild(ren), children of your same-sex or opposite-sex domestic partner, and other children you support financially.



When things change

The benefits you choose now will be effective through the end of 2021. You cannot make changes to your coverage during 2021 unless you have a qualifying life event, which includes:

- Marriage, legal separation, divorce, or termination of a domestic partnership;
- Birth, legal adoption of a child, or placement of a child with you for legal adoption;
- Death of your spouse or domestic partner or dependent child;
- Change in residence (only if your current coverage isn't available in the new location, or if you have new options that are available in your new location).

After a qualifying life event occurs, you have 30 days to make changes to your benefits in Workday. For more information about when you can make changes to your benefits, please refer to the WSGR Group Welfare Plan SPD.

Be sure to compare Wilson Sonsini's benefits with any other coverage options you may have – such as through your spouse's employer. You cannot change your coverage during 2021 unless you have a qualifying life event.



Medical Coverage

The firm offers one or two medical plan options, depending on where you live. These are:

- **High Deductible Health Plan (HDHP) with Health Savings Account (HSA).**

The Cigna Choice Fund HDHP/HSA works like a PPO, with a deductible, coinsurance, and the protection of an annual out-of-pocket maximum. If you enroll in this plan, a Health Savings Account (HSA) will be established for you which will allow you to set aside tax-free* dollars to pay your deductible and other out-of-pocket expenses. Key benefits of this plan are:

- Large, national network of contracted providers for in-network benefits, with the flexibility to go out-of-network when you need to;
- Affordable monthly contributions for employees at all income levels;
- A firm contribution to your HSA in 2021;
- The opportunity to add your own tax-free* dollars to your HSA, which you can use to pay for eligible healthcare expenses or save for the future.



- **Kaiser Health Maintenance Organization (HMO).** Offered in California, Washington, D.C., and Seattle, the Kaiser medical plan is not just health coverage — it's a partnership in health. You'll get a personal care team that centers around you – mind, body, and spirit. Benefits include:

- Convenient locations, with doctors, pharmacies, and labs under one roof;
- Simple copayments for most covered services, including prescriptions;
- No paperwork to fill out, no bills, and no medical deductibles;
- Online access to email your doctor's office, make appointments, and refill prescriptions; and
- Classes and wellness programs proven to help you reach your health goals.

*Under federal tax rules. Some states, including California, have different tax treatment.

Did you know?

The firm pays the majority of the cost of your medical insurance. Depending on your income level, the firm pays:

- 70%-90% of the actual cost of your coverage; and
- 50%-80% of the actual cost of your dependents' coverage.

Keep your life in balance with preventive care

Your health matters to you and to your family. Getting healthy and staying that way doesn't have to be complicated. You can reduce your risk of many health problems by taking care of the basics, like preventive tests and exams.

Wilson Sonsini medical plans cover in-network preventive care at 100% – no deductible required.

Telehealth

Telehealth is the delivery of health-related services and information via telecommunications technologies, including telephones, smartphones, and personal computers, for virtual “in-person” consultations. The COVID-19 pandemic has greatly accelerated the availability of telehealth visits and acceptance by patients. Both Cigna and Kaiser are offering telehealth visits for a range of medical care needs, including mental and behavioral health concerns. Please check your health plan's website or call customer service for details.

Weight Loss Surgery coverage

There are many health risks associated with high body mass index. For those who are struggling to achieve a healthy weight with diet and lifestyle changes alone, weight loss surgery will be a covered benefit under our medical Cigna plan effective 2021. It remains a covered benefit under Kaiser, as well.

Gender Reassessment coverage

Medically necessary treatment is covered by the Cigna and Kaiser plans which includes behavioral health services, hormone therapy, laboratory testing, and reassignment surgery. Cosmetic and not medically necessary procedures are not covered.



Comparing the medical plans

	Cigna Choice Fund HDHP/HSA		Kaiser HMO	
	In-Network	Out-of-Network	In-Network Only	
Annual Deductible - Individual - Individual-in-a-family* - Family	\$1,500 \$2,800 \$3,000	\$3,000 \$3,000 \$6,000	None	
Wilson Sonsini contribution to HSA - Employee Only - Employee + Spouse/DP - Employee + Child(ren) - Family	\$55 per month \$110 per month \$110 per month \$110 per month		n/a n/a n/a n/a	
Out-of-Pocket Maximum - Individual - Family	\$4,500 \$9,000	\$9,000 \$18,000	CA/SEA	DC
			\$1,500 \$3,000	\$2,250 \$4,500
Doctor's Office Visit	90% after deductible	70% after deductible	\$20	
Specialist Visit	90% after deductible	70% after deductible	\$20	
Preventive Care	Plan pays 100%, no deductible	70% after deductible	Plan pays 100%, no deductible	
Emergency Room Care	90% after deductible	70% after deductible	\$50 per visit	
Outpatient Surgery	90% after deductible	70% after deductible	CA/SEA: \$20 per procedure DC: \$50 per visit	
Hospital Care	90% after deductible	70% after deductible	\$250 per admission	
Lifetime Maximum	None	None	None	
Prescription Drugs	You pay 100% until you meet the plan deductible, and then you pay 10%. Preventive Formulary Only: You pay 0% for generics and 10% for brands, no deductible required. The amount you pay is capped at \$250 per script for 30 day supply.	Not covered	Generics: You pay \$10 Formulary Brands: You pay \$20	

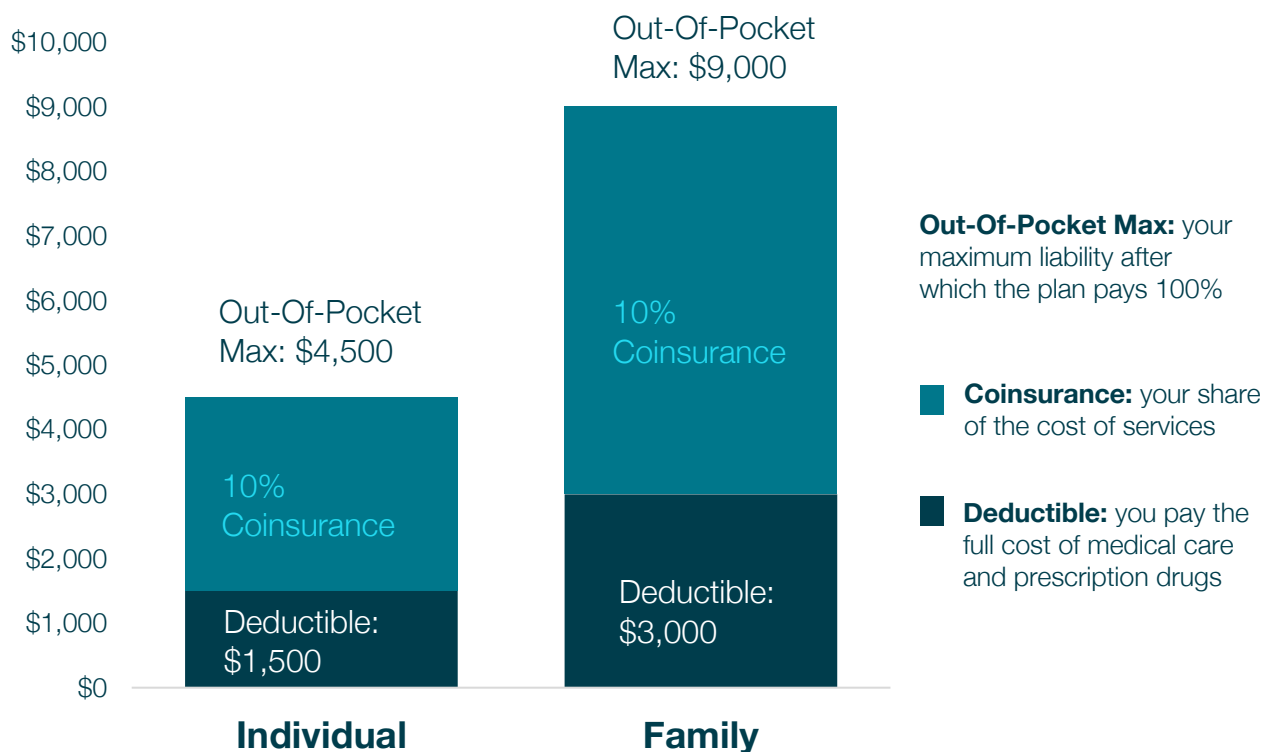
*Individual family members will satisfy the plan's deductible when either the individual-in-a-family deductible is met or when the overall family deductible is met.

More about the Cigna Choice Fund HDHP/HSA

The Cigna Choice Fund combines a tax-qualified high deductible health plan (HDHP) with a tax-advantaged health savings account (HSA) that is established through Cigna. There are two important parts to this plan:

1. A medical plan that covers eligible medical and prescription drug expenses; and
2. A Health Savings Account (HSA) that allows you to reimburse yourself for expenses like health plan deductibles and coinsurance with tax-advantaged savings. In 2021, Wilson Sonsini will put money into your account, and you have the option to contribute pre-tax money as well.

Here's how these two parts work together:



Preventive: Annual checkups, immunizations, cancer screenings, and preventive drugs are covered at 100% and not subject to the deductible.

How Wilson Sonsini will contribute to your HSA in 2021

If you elect the Cigna Choice Fund HDHP as your medical plan and have an open HSA, Wilson Sonsini will make a contribution to your account in 2021. The amount depends on your coverage category:

Coverage Category	2021 IRS Contribution Limit	Amount Wilson Sonsini Contributes to Your HSA	Your Maximum Contribution
Employee Only	\$3,600	\$55 per month (\$660 for 12 months)	\$2,940
Employee + Spouse/Domestic Partner	\$7,200	\$110 per month (\$1,320 for 12 months)	\$5,880
Employee + Child(ren)	\$7,200	\$110 per month (\$1,320 for 12 months)	\$5,880
Family	\$7,200	\$110 per month (\$1,320 for 12 months)	\$5,880

* If an individual reaches ages 55 by the end of the calendar year, he or she can contribute an additional \$1,000.

You must be an eligible participant with HDHP coverage effective as of the first calendar day of the month in order to qualify for that month's contribution. For example, if your HDHP coverage is effective on September 19, you will qualify for employer contributions for the months of October through December.

You can't contribute to or receive employer contributions to an HSA once you become enrolled in Medicare. However, you can spend the money, tax-free, for healthcare at any age.

To make the maximum contribution in a calendar year, you must:

- Meet all requirements to be eligible for HSA contributions on January 1; and
- Remain qualified through December 1.

If you are enrolled in the HDHP for part of the year, please refer to IRS Publication 969 and consult your tax advisor for the applicable maximum allowable contribution based on the length of your continued HSA eligibility.

The triple tax advantage

When you deposit money into an HSA, you won't have to pay income tax* on:

1. Deposits you make to your HSA;
2. Money you take out of your HSA to pay for qualified health expenses; and
3. Interest earned from the HSA.

That's why it's called a "triple tax advantage."

You will pay income tax and an early distribution penalty of 20% for spending your HSA savings on anything other than healthcare before you reach age 65. Please consult your tax professional for details.

At the end of the year, the bank will report your HSA contributions and withdrawals to the IRS. Please remember to obtain the year-end tax statements on the banking portal that is linked to www.myCigna.com, so that you report these amounts when you file your tax return.

*There are currently three states that require you to pay state income tax on the HSA: Alabama, California, and New Jersey.

An example: Say “hello” to Joe.

- Married, two children.
- Enrolls in the Cigna Choice Fund HDHP/HSA (family coverage) on March 25th and completes an HSA application through Cigna.
- Joe will receive a \$990 HSA contribution from Wilson Sonsini in 2021 (\$110 x 9 months) from April - December.
- Joe, his wife, and the kids all get an in-network annual checkup. His wife also gets a mammogram. Preventive care is covered at 100%. Joe pays \$0.
- Joe decides to put \$300 per month pre-tax into his HSA.
- For the year, Joe’s total HSA contributions = \$990 from Wilson Sonsini + \$2,700 (\$300 x 9 months) from Joe = \$3,690.

Joe’s expected out-of-pocket expenses during the year:	
Expected 2021 HSA balance (Wilson Sonsini’s contribution plus Joe’s contribution)	\$3,690
Routine preventive care visits Joe, his wife, children	\$1,800
Cigna Plan pays 100%	(\$1,800)
Joe pays out-of-pocket	\$0
Joe’s HSA balance after preventive care	\$3,690
Expected Medical and Rx Expenses	Full Cigna Discounted Price:
1 Urgent Care visit	\$380
1 Specialist visit	\$600
4 generic prescriptions and 1 brand name prescriptions	\$1,120
Total Medical and Rx Expenses	\$2,100
Bottom line...Joe has not satisfied the annual family deductible, so he pays for these healthcare expenses tax-free from his HSA.	(\$2,100)
Joe’s HSA Balance after paying above expenses	\$1,590

In this example, Joe still has a balance of \$1,590 in his HSA. If he doesn’t use it this year, it will carry over to next year and will be available for future healthcare expenses.

Your account: Debit card, Checkbook, and Online bill pay

There are three convenient ways you can access the money in your HSA:

1. The Cigna Choice Fund debit card draws money directly from your HSA. You can use your debit card to pay for eligible services at your pharmacy or other locations where you purchase health-related items or services.
2. Your checkbook works just like your personal checkbook — with the exception that it draws from your HSA. Use your checks to pay for your doctor's services or to reimburse yourself for expenses you've paid out of your own pocket.
3. Online bill pay lets you pay eligible medical expenses directly from your HSA. You can monitor, manage, and schedule payments online, anytime. Payments can be scheduled on a one-time or repeating basis.

Auto Pay

You have the option of having Cigna automatically pay your medical expenses directly from your HSA.

Your doctor or other healthcare professional will submit claims directly to Cigna. When you link your health care claim data to your HSA bank account and enable auto pay, the bank will use money from your HSA to pay your doctor for the portion of the expense not covered by the medical plan (e.g., your deductible or coinsurance amount).

Choose to add or remove auto pay anytime by changing your election on www.myCigna.com.



Voluntary Benefits

Critical Illness insurance

Critical illness insurance can help you pay for out-of-pocket expenses related to a critical illness, regardless of any other insurance you have. This lump-sum benefit is not the same as health insurance; it is a way to pay for additional medical expenses, as well as certain living expenses, if you are diagnosed with a covered illness. You can elect \$10,000/\$20,000/\$30,000 coverage for yourself, \$5,000/\$10,000/\$15,000 for your spouse/domestic partner, and \$5,000/\$10,000 for your children.

Coverage Category*	Payment Percentages
Heart Attack	100%
Stroke	100%
Cancer	100%
End-Stage Renal Disease	100%
Health Screening Benefit	\$50

* Please see the plan document for a full list of covered illnesses

Accident insurance

This benefit will help offset out-of-pocket costs related to an accident or injury. It can be used for copayments and coinsurance, or to cover lost time from work. Accident insurance is designed to supplement — not replace — your health plan.

Coverage Category*	Benefit
Physician Office Visit	\$100
Hospital Admission	\$1,400
Emergency Care Treatment	\$300
Ambulance (Ground)	\$400

* Please see the plan document for a full list of covered accidents.

Hospital Care insurance

This plan can help you pay for your hospital stay, including ICU days and observation. You will be paid a lump sum for your hospital admission and an additional amount for any day(s) spent in the hospital.

Coverage Category*	Benefit
Hospital Admission	\$1,000
Hospital Stay	\$100 per day
Hospital Intensive Care Unit	\$200 per day

* Please see the plan document for a full list of covered care.

Health Advocacy Program

Need help navigating your way through the complex healthcare system? HealthAdvocate is here to help you and your family members do just that. All regular employees of the firm, as well as your spouse/domestic partner, dependent children, domestic partner's children, parents, step-parents, and mothers and fathers-in-law are eligible to use the HealthAdvocate service.

Enrollment assistance

Choosing a health plan can be confusing and time-consuming—especially if your benefits are changing. HealthAdvocate can help you through the process by checking physician networks for you, explaining your share of plan costs, making sure your prescription drugs are covered in the plans you're considering, and factoring in your dependents in all plan choices.

Core advocacy

The Core Advocacy service is organized around a team of highly trained Personal Health Advocates (PHAs) — typically registered nurses, supported by medical directors and benefits and claims specialists. When you call the toll-free number for help with a clinical or insurance-related issue, your assigned PHA conducts any required research, handles the paperwork, and interacts with insurance plans and providers to help resolve the problem.

Some of the services include:

- Helping you understand tests, treatments, and medications recommended by your doctor;
- Facilitating the transfer of medical records, X-rays, and lab results prior to a scheduled appointment with a new doctor;
- Coordinating care for complicated medical issues;

Cleveland Clinic - MyConsult® Second Opinion Program

If you or a family member is facing a difficult medical diagnosis, you can get a review of your medical records and a written second opinion from one of the country's leading medical centers without having to travel to their facility. A dedicated Personal Health Advocate will guide you through the process. The service is available to eligible employees and family members at no cost.

Medical bill saver

This program puts highly skilled negotiators to work on your behalf to get you discounts on medical or dental bills. The service is available for out-of-network medical and dental bills over \$400 that are not covered by insurance.

Nurse line

Available 24/7, the HealthAdvocate Nurse Line offers you unlimited access to highly trained registered nurses for advice and information.

Medical decision support

This interactive, self-directed tool guides you through key health decisions. The tool combines authoritative medical information with practical, personal assessments that can help you identify appropriate care that may be less risky, less complicated, or less costly.

Dental Coverage

The Cigna Premier Dental PPO plan provides coverage that meets your dental care needs.

The plan allows you to use in- or out-of-network providers. It also covers preventive, diagnostic, and basic restorative care, as well as major restorative care, orthodontia, and TMJ services – up to a maximum of \$2,000 per covered person per year.



	Cigna Premier Dental	
	In-Network	Out-of-Network
Deductible - Individual - Family	\$50 \$150	\$50 \$150
Calendar Year Maximum	\$2,000 per person	\$2,000 per person
Preventive and Diagnostic Care	100%, no deductible	100%, no deductible
Basic Restorative Care	80% after deductible	80% after deductible
Major Restorative Care	50% after deductible	50% after deductible
Orthodontia	50% after deductible (\$2,000 lifetime maximum)	50% after deductible (\$2,000 lifetime maximum)
TMJ Services	50% after deductible (\$750 lifetime maximum)	Texas residents only: Same as in-network benefit.
Missing Tooth Provision	50%	50%

To find an in-network dental provider, use the provider directory on www.cigna.com.

Vision Coverage

The firm provides two vision plan options through Vision Service Plan (VSP). Both plans provide in-network and out-of-network benefits. No claim forms are required when using in-network providers.

	Standard Vision Plan	Premier Vision Plan
Copay (Exam & Glasses)	\$25 per person	\$25 per person
Exam every calendar year	100%	100%
Lenses every calendar year <ul style="list-style-type: none"> - Single vision - Bifocal - Trifocal - Polycarbonate lens - Anti-reflective coating 	100% 100% 100% 100% Covered in full for children Not covered	100% 100% 100% 100% 100% Covered in full for children Covered in full
Elective contacts, every calendar year (in lieu of lenses and frame)	\$130 maximum benefit	\$200 maximum benefit
Frames	Every 24 months 100% up to \$210, \$115 at Costco	Every 12 months 100% up to \$220, \$120 at Costco
Second pair of glasses or contacts	Not provided	Second pair of glasses or contacts with the same copay and allowances as the first pair

The easiest way to use the plan is to call a VSP provider to make an appointment. Identify yourself as a VSP member. The VSP provider will obtain authorization from VSP for services and materials.

If you decide to use a non-VSP provider, VSP will reimburse you for services at the out-of-network level. Please refer to the Summary Plan Description for details. To be reimbursed, you must submit a VSP claim form along with your itemized receipts to VSP.

Laser care vision discounts are also available. For information go to www.vsp.com.

Did you know?

Many out-of-pocket dental and vision expenses are eligible for tax-free reimbursement from your HSA. If you are not eligible for an HSA, you may enroll in a Health Care Flexible Spending Account. Keep reading to learn about FSAs.



Flexible Spending Accounts (FSAs)

Flexible Spending Accounts allow you to set aside money from your paycheck on a pre-tax basis and use the funds to reimburse yourself for qualified expenses tax-free. When you contribute to an FSA, the money is not taxed when it comes out of your paycheck or when you get it back as a reimbursement.

There are two types of FSAs:

1. Health Care FSA. Use pre-tax dollars to pay for eligible health expenses, including:

- Medical, dental, and vision copays and coinsurance;
- Prescription drugs;
- Healthcare products, such as cough drops and bandages; and
- Glasses, contacts, and LASIK surgery.

Eligibility for the Health Care FSA is limited to employees who are not eligible for a Health Savings Account, such as those who enroll in Kaiser HMO or waive medical coverage.

2. Dependent Care FSA. Use pre-tax dollars to pay for eligible dependent care services that allow you and your spouse to go to work, such as day care for children through age twelve.

How FSAs work

Eligible employees may elect to set aside a certain amount of money in the Health Care and/or Dependent Care FSA, based on the guidelines below:

	Minimum Contribution	Maximum Contribution
Health Care FSA	\$120	\$2,750
Dependent Care FSA	\$240	\$5,000*

*If you're married and your spouse uses a similar account, your combined limit for the Dependent Care FSA is \$5,000 annually. If you file taxes separately, each of you is limited to a maximum of \$2,500 annually.

Your annual election will be deducted from your paycheck in installments throughout 2021. Your election will remain in effect all year, unless you have a qualifying life event that warrants an FSA change.

You'll use the money in your FSA to pay yourself back for eligible expenses incurred during the plan year. Any leftover amounts remaining in your account after the claim-filing deadline are forfeited and cannot be carried forward, so plan carefully.

Go to www.payflex.com to see a listing of eligible and ineligible FSA expenses.

Use it by December 31, or lose it!

You must use the money in your FSA for eligible expenses incurred through December 31, 2021, and you must submit your claims by March 31, 2022. Leftover money cannot be rolled over to the next plan year. Take some time to determine how much you spent on out-of-pocket healthcare or dependent care expenses over the last year. That will help you carefully estimate your out-of-pocket expenses for 2021.

PayFlex debit card

When you enroll in the Health Care FSA, PayFlex will send you a debit card that can be used to pay for eligible expenses. This card provides a convenient option for paying your providers who accept MasterCard. You still **MUST** keep all of your receipts for your records, and be prepared to submit them to PayFlex if requested. Using the debit card is optional.

Direct deposit

Claim reimbursements can be direct-deposited into your bank account by completing the PayFlex Reimbursement Form at www.payflex.com. However, keep in mind that when you choose to use the debit card to pay your providers, there are no reimbursements required.



Comparing the Health Care FSA with the HSA

	Health Care FSA	Health Savings Account (HSA)
How it works	You set aside your own money to pay for eligible medical, prescription, dental, and vision expenses — and save on taxes.	You and Wilson Sonsini set aside money to pay for eligible medical, prescription, dental, and vision expenses — and save on taxes.
Who can enroll?	Benefits-eligible employees who enroll in Kaiser, waive medical benefits, or who are otherwise not eligible for a Health Savings Account.	Benefits-eligible employees who enroll in the Cigna Choice Fund HDHP medical plan and who are not covered by other medical insurance, including a spouse's medical plan or general purpose Health Care FSA, or Medicare.
Do I have to enroll separately?	Yes. If you want to participate in the Health Care FSA in 2021, you must enroll.	Yes. If you want to participate in the HSA, you must enroll in the Cigna Choice Fund HDHP medical plan.
Who contributes?	You. You decide how much to contribute to your Health Care FSA — from \$120 to \$2,750 per year. Contributions are deducted from your paycheck on a pre-tax basis.	You and Wilson Sonsini. You decide how much to contribute to your Health Savings Account, taking into account the firm's contribution. You are responsible for making sure your total annual contributions do not exceed the IRS limits applicable to your situation.
What expenses are covered?	Eligible expenses include: <ul style="list-style-type: none"> • Medical, dental, prescription, and vision plan copays, deductibles, and coinsurance. • Other eligible expenses described in IRS Publication 502, provided they are not reimbursed by your health plan. 	Eligible expenses include: <ul style="list-style-type: none"> • Medical, dental, prescription, and vision plan copays, deductibles, and coinsurance. • Other eligible expenses described in IRS Publication 502 provided they are not reimbursed by your health plan.
Whose eligible expenses are covered?	<ul style="list-style-type: none"> • Your own expenses • Expenses of your spouse • Expenses of individuals you claim as dependents on your federal tax return 	<ul style="list-style-type: none"> • Your own expenses • Expenses of your spouse • Expenses of individuals you claim as dependents on your federal tax return
Does my account balance carry over?	No. This is a “use it or lose it” benefit.	Yes. Your HSA savings can be carried forward from year to year.
Who approves my claims?	PayFlex is the third-party administrator that reviews your claims and provides reimbursements. Visit their website at www.payflex.com to check balances and submit claims.	You retain your own documentation of eligible expenses and report your contributions and distributions when you file your annual tax return. Year-end tax reports are provided on the banking portal at www.mycigna.com .

Life and Accidental Death & Dismemberment (AD&D) Insurance

Life Insurance

If you are a regular employee working 20 hours or more per week, you'll automatically receive firm-paid, guaranteed-issue basic life insurance coverage equal to one times your annual base pay.

If you'd like more life insurance protection, the following forms of optional coverage are available for purchase:

- **Optional Employee Life Insurance.** If you're eligible for basic life insurance, you may also purchase optional employee life insurance from 1 to 6 times your annual base pay to a maximum of \$500,000. Your monthly cost depends on the amount of insurance you purchase and your age.
- **Spouse or Domestic Partner Life Insurance.** You can purchase \$10,000, \$20,000, \$30,000, \$40,000, \$50,000, \$75,000, \$100,000, \$125,000, \$150,000, \$175,000 or \$200,000 of life insurance for your spouse or domestic partner. This coverage may not exceed 50% of the employee's approved amount of optional coverage. Your monthly cost depends on the amount of insurance you purchase and your spouse's or domestic partner's age.
- **Child Life Insurance.** You can purchase \$10,000 of coverage for your child(ren). To qualify, children must be under 26 years old. Your monthly cost is the same, regardless of the number of children covered.

Depending on when you enroll and how much coverage you elect, Evidence of Insurability (EOI) may be required.

AD&D insurance

In addition to life insurance, the firm protects your loved ones with additional insurance coverage that pays a benefit if you die or are dismembered in an accident. Wilson Sonsini automatically provides you with firm-paid coverage equal to one times your annual base pay.

Optional AD&D insurance

You have the option to purchase supplemental AD&D coverage to provide your family with additional financial security if you die or suffer a severe injury due to an accident.

You may purchase from 1 to 6 times your annual base pay up to a maximum of \$1,000,000. Your monthly cost is 1.5 cents per thousand dollars of coverage.

Evidence of insurability is not required when purchasing optional AD&D coverage.

Protect the ones you love

If your family depends on you and your income, you'll want to be sure they have enough savings if something happened to you. And don't forget to protect your loved ones by designating your beneficiaries — the people who will receive your life insurance benefit if you die. You can designate (and periodically update) your group life insurance beneficiaries on the online benefits portal in Workday.

Disability Insurance

Wilson Sonsini provides short-term and long-term disability income protection at no cost to you.

- **Short-Term Disability.** If you become sick or injured away from work, and can't work because of the illness or injury, the firm is looking out for you. When you are on an approved medical leave of absence that lasts more than one week, you'll receive up to 12 weeks of short-term disability pay continuation to supplement accrued Paid Time Off (PTO) or sick time. Please refer to the firm's leave of absence policy for details.
- **Long-Term Disability.** Not all illnesses or injuries will be healed within a short period of time. If an illness or injury prevents you from working for more than 90 days, you may apply for long-term disability benefits that replace 60% of your monthly base salary, up to \$20,000 per month. Wilson Sonsini pays the full cost of your long-term disability insurance coverage.

12 weeks	90 days → Retirement
Short- Term Disability	Long-Term Disability
Salary Replacement	60% up to \$20,000 per month

Long-term disability insurance tax option

Boost your benefit! You may elect to have the value of firm-paid, monthly premiums included in your taxable gross income. Paying tax when premiums are paid allows you to receive non-taxable benefits in the event of a future disability claim, increasing the income protection power of your long-term disability coverage.



401(k) retirement savings

The firm offers a retirement savings plan designed to help you build a successful and secure financial future. The plan offers a number of advantages:

- **It can help you reduce your taxes.** If you make pre-tax contributions, your taxable income will be lower, and your current year taxes will be reduced. Alternatively, if you choose to make after-tax Roth 401(k) contributions, you can receive tax-free distributions from the plan when you retire.
- **It makes saving easy.** Because contributions are automatically deducted from your paycheck, the transactions are seamless to you. Additionally, there are online tools and resources to help you determine the best investment mix for you and your retirement goals.
- **It makes sense in the long run.** Using the plan to save for retirement will allow your investment earnings to compound and potentially grow faster, without taxes taking a bite each year.

Automatic enrollment

New hires are automatically enrolled for a 3% pre-tax salary deferral contribution. If you want to opt out, you must take action within 30 days from your hire date. You can change your contribution percent—up or down—at any time.



Wellbeing

Employee Assistance Program (EAP)

The Employee Assistance Program (EAP) can assist you and your family members to resolve personal problems and issues through confidential counseling and work/life referral services. The EAP is available 24 hours a day, seven days a week, 365 days a year through HealthAdvocate's toll-free phone line. Call (866) 799-2728 for assistance.

Video-based counseling

HealthAdvocate offers video-based counseling through our Employee Assistance Program. The service is a convenient, confidential way to access a mental health counselor using your computer, laptop, tablet, or smartphone. All you need is a webcam, microphone, and high-speed internet connection. Counselors are available 24/7 to speak with you regarding a variety of issues, including stress, depression, substance abuse, relationship and parenting issues, and work/life balance concerns.

Livongo for Diabetes

Livongo combines advanced technology and coaching to support people living with diabetes. You get a connected meter that automatically uploads blood glucose readings to a secure online account; support with diabetes questions, nutrition, and lifestyle changes; and a supply of test strips and lancets shipped home each month. Employees and family members enrolled in a Wilson Sonsini medical plan may join the Livongo program at no cost.

HealthWealth Reimbursement program

You can submit eligible expenses such as a gym membership, fitness classes, and nutritional counseling for reimbursement up to a \$50 per month. WageWorks administers the program and submitting your expenses only takes a few minutes! Please see the Intranet for a full list of eligible expenses.



Parenting and Caregiving

Maven Support for Parents

Sign up to access a Maven program that's tailored to support you at every stage of your family-building journey – whether you're planning for a future family, pregnant, parenting a newborn, or raising small children. You'll have a dedicated concierge to guide you, curated online resources, an amazing app, and video visits with practitioners in the areas of nutrition, physical therapy, emotional health, fertility, egg-freezing, pregnancy, postpartum, adoption, pediatrics, and general health. Maven is offered free of charge to all benefits-eligible men and women employees of Wilson Sonsini. Each subscription comes with access for the employee's parenting partner.

Childcare and adult care program

Sometimes balancing work and family can be challenging. Our backup care program is designed to help ease this burden. Bright Horizons provides three different forms of backup care to meet your family's needs:

- **Center-Based Care.** Access to a network of fun and engaging Bright Horizons backup childcare centers for children age 6 months to 12 years.
- **In-Home Backup Care.** A credentialed care provider comes to your home. Works great for mildly ill children who can't go to a center, for families with multiple children, or when picking up/dropping off your child is not practical.
- **Adult/Elder Care.** A credentialed elder care specialist provides in-home assistance with light homemaking and personal care services (e.g., preparing simple meals, assistance with dressing/bathing).

Enrollment and registration is online at clients.brighthorizons.com/wsgr (login name is WSGR; password is Benefits4You). It is important to register your dependents in advance, before you experience a backup care need. Once they're registered, you'll be able to make a care request at any time by calling the 24/7 Bright Horizons call center at (877) 242-2737.



Bright Horizons Enhanced Family Benefits

Bright Horizons and their partners offer support to families that can help with finding a babysitter, educational caregiver, or nanny; supplementing children's education with virtual test prep and tutoring; and arranging for adult/eldercare.

College Coach®

Bright Horizons offers education planning guidance to parents of college-bound high school students. You can get access to College Coach experts, online webinars with live Q&A, and customized college lists. You can also get assistance with college essay review, loan evaluation, and financing strategy. To learn more, you can contact Bright Horizons at (888) 527-3550 or register at <https://clients.brighthorizons.com/wsgr>. The passcode for first-time users is Benefits4You.

Career/Life Coaching for Working Parents

One-on-one coaching is available from Talking Talent, an award-winning gender diversity consultancy and leadership development firm that has worked with over 150 successful organizations, including many Am Law 100 firms, to build inclusive cultures and support working parents' careers. Attorneys and staff can take advantage of up to four hours of one-on-one, confidential coaching. Your coach can help you with taking care of yourself, resilience, negotiating flexibility, communicating needs, and more. We also recommend Talking Talent as a resource to employees who are planning to go on or return from parental leave.



Other Benefits

Long Term Care insurance

Long-term care insurance provides a monthly benefit if you are unable to perform, without substantial assistance from another individual, at least two activities of daily living such as bathing, dressing, toileting, transferring, continence, and eating, or if you require substantial supervision by another individual to protect you from threats to health and safety due to severe cognitive impairment.

You may choose a monthly benefit from \$3,000 to \$8,000, and select a contract that includes provisions for in-home care, 5% simple inflation protection, neither, or both. You can also choose a benefit duration of 3 years, 6 years, or unlimited.

New hires will have a one-time opportunity to purchase guaranteed-issue coverage during the special enrollment period (in the month of March) next following their date of hire. Other employees and family members may apply at any time, but Evidence of Insurability (EOI) and carrier approval will be required.

Tuition reimbursement program

The tuition reimbursement program fosters continuous learning. The program is designed to enable staff employees to stay current in their area of expertise and to prepare for future job growth. This program is administered by the Wilson Sonsini Professional Development department. Please see their intranet page for details.

WageWorks pre-tax commuter program

WageWorks is an online service that allows you to pay for expenses related to parking or mass transit with pre-tax dollars deducted from your paycheck each month. You can have WageWorks pay your provider directly or you can submit receipts for reimbursement.

Log on to www.wageworks.com by the 10th of each month to make your election for the following month.

The WageWorks website is available through a single-sign on from the firm's network.



Complete Your Enrollment!

Before you begin, make sure you have the names, birth dates, and Social Security numbers of any eligible family members you want to enroll, plus any individuals you want to list as beneficiaries. Once you have this information, it's time for you to enroll. It's easy and shouldn't take much time.

Please access Workday from inside the firm's network. Follow the instructions to complete your enrollment and designate your group life insurance beneficiaries.

Workday is available through the firm's intranet via single sign-on through OKTA.

Wilson Sonsini benefits department contacts

How to reach us by...	
Email	humanresources@wsgr.com
Phone	(650) 858-7062
Online Benefits	Workday



Benefit Provider Contacts

Plan, Provider, and Group ID #	Phone	Website or Online Access
Health Plans		
· Cigna Medical (including HSA), 3210280	(800) 244-6224	www.mycigna.com
· Cigna Dental, 3210280	(888) 336-8258	www.mycigna.com
· Kaiser Northern California, 34939	(800) 464-4000	www.kaiserpermanente.org
· Kaiser Southern California, 231444		
· Kaiser DC/Mid-Atlantic, 22195	(800) 777-7902	www.kaiserpermanente.org
· Kaiser Seattle, 1479400	(800) 813-2000	https://wa.kaiserpermanente.org
· Vision Service Plan	(800) 877-7195	www.vsp.com
Cigna Critical Illness/Accident/Hospital Care Insurance	(800) 754-3297	
Health Savings Account		
· HSA Customer Service (bank)	(844) 650-8930	www.mycigna.com
Flexible Spending Accounts		
· PayFlex	(800) 284-4885	www.payflex.com
Group Life and AD&D Insurance		
· Cigna, FLX967132/OK968641	(800) 732-1603	
Leave Requests and Disability Claims		
· Cigna Leave Solutions	(800) 362-4462	
Long Term Care		
· UnumProvident, 535308	(800) 227-4165	
Wilson Sonsini 401(k) and Profit Sharing Plan		
· Schwab-Participant Services	(800) 724-7526	https://workplace.schwab.com
Backup Care and College Coach		
· Bright Horizons Backup Care	(877) 242-2737	clients.brighthorizons.com/wsg
· College Coach	(888) 527-3550	Login: WSGR; Password: Benefits4You
Maven		
· Parental Support		www.mavenclinic.com/join/wsgfamily
Talking Talent		
· Career Coaching for Working Parents		contact@talking-talent.com
Livongo		
· Diabetes Management Support		http://join.livongo.com/WSGR/begin
Commuter Benefits		
· WageWorks	(877) 924-3967	www.wageworks.com
Employee Assistance Program		
· HealthAdvocate	(866) 799-2728	www.healthadvocate.com/wsg Organization name: WSGR
COBRA		
· OneSource Virtual	(866) 634-9784	WSGRCOBRA@onesourcevirtual.com

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