

> 2024 | BENEFITS GUIDE

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Please refer to plan documents for details, including important coverage exclusions and limitations. If there are any discrepancies between this benefits summary and plan documents, the plan documents will govern.

WELCOME TO YOUR BENEFITS!

At Wilson Sonsini, you are a vital part of our success as a firm, and the work you do makes a difference. We are pleased to offer you a robust benefits program that focuses on overall wellness in all areas of life.

Our benefits program has valuable tools and resources for your physical and financial health as well as the support you need to handle your day-to-day responsibilities. Because everyone's needs are different, we give you options, so you can choose the plans you need at a price you can afford.

Take a look at the benefits described in this guide to make the most of your benefits package. If you have any questions, reach out to Human Resources or to the individual carriers.



ELIGIBILITY AND ENROLLMENT

Employee Eligibility

You are eligible to enroll if you are a regular U.S. employee of Wilson Sonsini working a minimum of 20 hours per week.

If you are a new hire, you have 30 days from your date of hire to enroll in benefits. Benefits begin on date of hire.

Dependent Eligibility

Your eligible dependents also have access to many of the benefits we offer. Eligible dependents include:

- Legal spouse or same-sex or opposite-sex domestic partner.
- Children up to age 26, including natural children, stepchildren, legally adopted children, children for whom you are the legal guardian, and children for whom you are legally responsible to provide health coverage under a Qualified Medical Child Support Order (QMCSO).
- Disabled children over age 26 if unmarried, incapable of self-support, dependent on you for primary support, and the disability occurred before the age of 26.

You may be required to provide supporting documentation, such as a marriage certificate or birth certificate, to verify dependent eligibility.

Open Enrollment

Open enrollment is your annual opportunity to:

- Review and make changes to your benefits
- Add or drop covered dependents
- Purchase voluntary benefits coverage
- Change your LTD taxation election

After open enrollment ends, you will have to wait until the following year's open enrollment to make any changes, unless you have a qualifying event.

Online Enrollment in Workday

Please log into Workday to complete your Enrollment elections. Workday is available through the firm's intranet via single sign-on through OKTA.



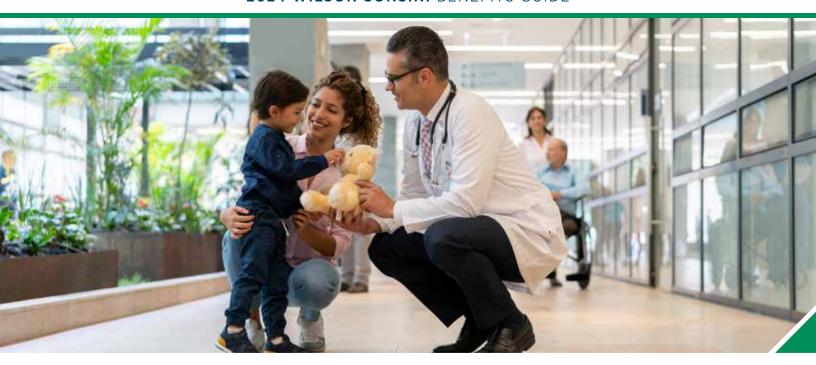
QUALIFYING EVENTS

If you experience a qualifying event, you can make mid-year changes to your benefit elections. Changes must be made within 30 days of the event date.

Examples include, but are not limited to, the following:

- Marriage, divorce, or legal separation
- Birth or adoption of a child
- Change in eligibility or employment status
- Loss of other health coverage

It is your responsibility to notify Human Resources within 30 days of the event to make changes to your coverage. You will need to provide documentation of the event, such as a marriage license, divorce decree, or birth certificate, and benefit changes must be consistent with the qualifying event.



MEDICAL

We value the health and well-being of you and your family. That's why we offer comprehensive medical coverage to provide all the benefits and resources you need to support your health throughout the year.

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 2024;
- 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., Seattle and Colorado, 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;
- 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.

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

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.

Getting regular checkups and exams can help you stay healthy and catch issues early before they become big problems. Your medical plan provides coverage for preventive care services and immunizations — at no cost to you. As long as you see a doctor or use a pharmacy or lab in the plan's network, you won't have to pay anything for preventive services and immunizations. Talk to your doctor about which screenings and immunizations are right for you.

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 is a covered benefit under our Cigna and Kaiser medical plans.



Prescription Drugs

Your medical plan includes coverage for prescription medication. Using in-network pharmacies will ensure you receive the highest level of benefits. Be sure to bring your ID card when filling a prescription. Keep in mind that there are certain preventive medications that are covered in full. Visit your prescription drug carrier's website for a list of covered medications.

If you use daily medication for a chronic condition, such as diabetes, high blood pressure, or high cholesterol, use the mail order program to save time and money. You will receive a 90-day supply of your medication at your home address or at your nearest in-network pharmacy.

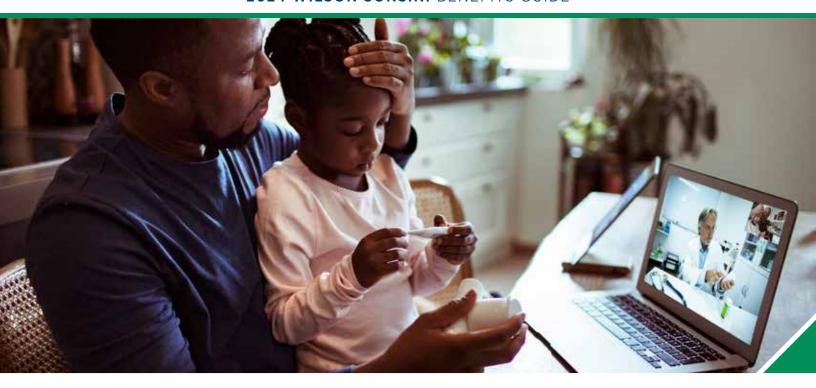
Cigna Personal Health Team

- Cigna's integrated Personal Health Team is a dedicated team
 of registered nurses, behavioral specialists, health, exercise
 specialists and nutritionists all supported by doctors and
 pharmacists who are there to support you in achieving your
 personal health goals.
- Your Personal Health Team coach is trained to help you get to the root cause of your individual health concerns. Your coach will help provide the expertise to ensure that you have the resources for your specific circumstances. The Personal Health Team is available to all associates and their covered adult dependents, up to age 26, enrolled in the Cigna HDHP Medical Plan.

You can access the program three ways:

- By calling 1-800-244-6224, enter your Cigna subscriber ID and say "Personal Health Team"
- By calling 877-459-6150; you will be asked for your Cigna subscriber ID
- Online at www.MyCigna.com





TELEMEDICINE

Telehealth is the delivery of health-related services and information via telecommunications technologies, including telephones, smartphones, and personal computers, for virtual "inperson" consultations. Both Cigna and Kaiser offer 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.

Telemedicine offers you:

24/7/365 convenience

No Emergency Room Waits

Quality Doctors

Remote Health Care Can Treat Many Common Health Issues

Through virtual care, doctors can diagnose many health issues like cold and flu symptoms, allergies, rash, skin problems and so much more! If medically necessary, a prescription will be sent to the pharmacy of your choice.

- Abdominal Pain/Cramps
- Cold and Flu Symptoms
- Respiratory infection
- Allergies
- Dizziness
- Sinusitis

- Animal/Insect Bites
- Eye Infection/Irritation
- Sore Throat
- Asthma
- Headaches/Migraines
- Sprains and Strains

- Backache
- Laryngitis
- Strep
- Blood Pressure Issues
- Poison Ivy/Oak
- Bronchitis

CIGNA CHOICE FUND HDHP AND HSA

	Cigna Choice Fund HDHP/HSA		
	In-Network	Out-of-Network	
Calendar Year Deductible			
Individual	\$1,600	\$4,800	
Individual-in-a-Family*	\$3,200	\$4,800	
Family	\$3,200	\$9,600	
Wilson Sonsini Contributio	n to HSA		
Employee Only	\$55 pei	r month	
Employee + Spouse/DP	\$110 pe	r month	
Employee + Child(ren)	\$110 pe	r month	
Family	\$110 pe	r month	
Calendar Year Out-of-Pock	et Maximum (Includes Deductible)		
Individual	\$4,800	\$9,600	
Individual-in-a-Family*	\$4,800	\$9,600	
Family	\$9,600 \$19,200		
	You Pay		
Services			
Doctor's Office Visit	10% after deductible	30% after deductible	
Specialist Visit	10% after deductible	30% after deductible	
Preventive Care	Plan pays 100%, no deductible 30% after deductible		
Emergency Room Care	10% after deductible	10% after deductible	
Outpatient Surgery	10% after deductible	30% after deductible	
Hospital Care	10% after deductible 30% after deductible		
Lifetime Maximum	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.	You pay 30% up to \$250 per script for a 30 day supply.	
	The amount you pay is capped at \$250 per script for 30 day supply.		

^{*}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.

HEALTH SAVINGS ACCOUNT (HSA)

When you enroll in the High Deductible Health Plan and meet the eligibility requirements, you may open a Health Savings Account (HSA) to help you pay for current out-of-pocket health care costs or save for future expenses – even into retirement.

What Is an HSA?

An HSA is a health care savings account that gives you a triple tax advantage.

- 1. You contribute pre-tax dollars.
- 2. You pay for eligible expenses tax-free.
- 3. Unused funds can be invested and grow interest tax-free.

What Are the Benefits of an HSA?

- Ownership: HSA funds roll over from year to year. You own the account and can take it with you if you leave the firm or retire.
- Reduced Costs: The tax-free HSA funds you use can help you meet your plan's annual deductible. You can also use your HSA funds to pay for the eligible health care expenses of your spouse and eligible dependents.
- Investment Options: Once your HSA hits a minimum balance, you can invest the money in a variety of mutual funds to grow tax-free interest that can be used for future health care costs.

How Much Can I Contribute?

During enrollment, you specify how much you want to contribute to your HSA on an annual basis, through payroll deduction, up to the annual IRS limits.

2024 HSA Contribution Limit		
Individual \$4,150		
Family	\$8,300	
Individual (age 55+) \$5,150		
Family (age 55+)	\$9,300	

How Do I Use My HSA?

Using your HSA is easy. Simply use your HSA debit card to pay for eligible health care expenses up to the amount available in your account. You can also arrange for payment online or reimburse yourself for eligible expenses you paid out-of-pocket.

Eligible expenses include medical, dental and vision deductibles, coinsurance and copays and prescription drugs costs.

If you use your funds for ineligible expenses, you will be subject to penalties and taxes. After age 65, you can use the funds for any purpose penalty-free.

Who Is Eligible for the HSA?

You are eligible to make or receive contributions to an HSA if you meet the requirements defined by the IRS below:

- You are covered under a High Deductible Health Plan and have no other health coverage (unless it is an HDHP).
- You or your covered spouse do not participate in a Health Care Flexible Spending Account.
- You are not enrolled in Medicare or Tricare.
- You are not claimed as a dependent on someone else's tax return.

HSA Customer Service (HSA Bank)

Phone: (844) 650-8930 Website: <u>www.mycigna.com</u>

Available via Cigna through the OKTA portal



Does the firm contribute to my Health Savings Account, too?

Yes! Wilson Sonsini deposits \$55/month in your HSA account for individual coverage and \$110/month for family coverage.

Keep in mind that the combined amount of the firm contributions and your contributions cannot exceed the IRS limit.

HOW DOES THE HSA WORK WITH THE HDHP?



You pay 100%

You pay the full cost of medical care until you reach the annual deductible.

Preventive care is covered at 100% at in-network providers!

You pay coinsurance

Once the deductible is met, you and the plan share the cost of services until you reach the out-of-pocket maximum.

You pay 0%

If you meet the out-of-pocket maximum, the plan pays 100% of your eligible, in-network expenses for the remainder of the year.

DUT-OF-POCKET MAX



You can use your **HSA dollars** to cover your deductible and coinsurance.

ANNUAL DEDUCTIBLE

HSA EXAMPLE

Maria saves for future health care expenses using a Health Savings Account

Maria enrolls herself in the HDHP with HSA. She chooses to use her HSA to pay for covered services as she works to meet the deductible.



HSA Contribution: \$4,150

• Maria elects to contribute \$3,490. The firm deposits an additional \$660 in her account.

Annual Deductible: \$1,600

Maria must meet the annual deductible before the plan begins to pay.

Eligible Medical and Prescription Expenses: \$1,650

 Maria uses \$1,650 of her HSA during the year to cover her health care costs including her \$1,600 deductible and an additional \$50 in coinsurance on some claims paid by her medical plan.

Leftover Funds: \$2,500

Maria has an account balance of \$2,500 to use for future health care expenses.

KAISER HEALTH MAINTENANCE ORGANIZATION (HMO)

An HMO requires you to receive care from in-network doctors and facilities. Selecting a primary care physician is recommended if you enroll in the HMO plan, but it is not required. You must receive all of your non-emergency care within the HMO network, or the plan will not pay benefits.

	Plan Name
	CA, CO, MAS, WA
Calendar Year Deductible	
Individual	\$0
Family	\$0
Annual Out-of-Pocket Maximum (includes deductibles)	
Individual	\$1,500
Family	\$3,000
Lifetime Maximum Benefit	Unlimited
Preventive Care	
Preventive Care Office Visit / Routine Exams	No charge
Well Baby Care / Well Women Care	No charge
Immunizations	No charge
Professional Care	
Office Visit	\$10 copay PCP / \$20 copay Specialist
Outpatient Diagnostic Imaging & Laboratory Services	\$10 copay
Facility Care	
Inpatient Care	\$100 per admission
Outpatient Surgery	\$100 copay
Emergency Care	
Outpatient Emergency Care	\$200 copay
Retail Prescription Drugs (up to 30-day supply)	
Generic	\$10 copay
Preferred Brand	\$20 copay
Non-Preferred Brand*	\$40 copay
Specialty*	20% up to \$250
Mail Order Prescription Drugs (CA: up to 100-day supply;	All Other Locations: 90-day supply)
Generic	\$20 copay
Preferred Brand	\$40 copay
Non-Preferred Brand*	\$80 copay

DENTAL

Your dental plan promotes and encourages preventive dental care and provides benefits for services that are essential to good oral health.



Cigna Premier Dental

With the DPPO plan, you are free to choose any dentist at the time you need care. Plan benefits are highest when you use an in-network dentist. If you use an out-of-network provider, the plan pays only "reasonable and customary" (R&C) charges. You will be responsible for the difference.

	Cigna Premier Dental		
	In-Network	Out-of-Network	
Calendar Year Deductible			
Individual	\$50	\$50	
Family	\$150	\$150	
Calendar Year Plan Maximum			
Per Individual	\$2,000 per person	\$2,000 per person	
	You Pay	You Pay	
Preventive Care			
Oral Exams, X-rays, Cleanings, Fluoride, Space Maintainers, Sealants	0%, no deductible	0%, no deductible	
Basic Services			
Oral Surgery, Fillings, Endodontic Treatment, Periodontic Treatment, Repairs of Dentures and Crowns	20% after deductible	20% after deductible	
Major Services			
Crowns, Jackets, Dentures, Bridge Implants	50% after deductible	50% after deductible	
Missing Tooth (eligible after 12 months of coverage)	50% after deductible	50% after deductible	
Orthodontia			
Covered	50% after deductible	50% after deductible	
Lifetime Orthodontia Plan Maximum (Per Individual)	\$2,000 lifetime maximum	\$2,000 lifetime maximum	
TMJ Services	50% after deductible (\$750 lifetime maximum)	Texas residents only: Same as in-network benefit.	

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

Cigna Dental

Phone: (888) 336-8258 Website: www.mycigna.com

VISION

Vision care is essential to your overall health. Getting regular eye exams helps your doctor detect a variety of medical conditions before they become big problems. **VSP**

Phone: (800) 877-7195 **Website: www.vsp.com**

- In addition to eye exams, your vision plan provides coverage standard lenses and frames and contact lenses.
- Use in-network services and supplies to receive the highest level of benefits.

	Standard Vision Plan	Premier Vision Plan
	You Pay	You Pay
Wellvision		
Copay (Exam & Glasses)	\$25 copay	\$25 copay
Exam every calendar year	0%	0%
Lenses every calendar year	Plan Pays	Plan Pays
Single vision	100%	100%
Bifocal	100%	100%
Trifocal	100%	100%
Polycarbonate lens	Covered in full for children	Covered in full for children
New UV protection	Not covered	100%
Anti-reflective coating	Not covered	Not covered
Elective contacts, every calendar year (in lieu of lenses and frame)	\$130 maximum benefit	\$200 maximum benefit
Frames		
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
Primary Medical Eye Care SM		
For members with diabetes: Retinal Screening and additional exams and services For all members: Treatment and diagnoses of eye conditions, including pink eye, vision loss, and cataracts	\$20 copay per exam	\$20 copay per exam
LightCare [™]		
\$150 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts	\$20 copay	\$20 copay
Computer VisionCare Plan sM - Provides computer viewing content on screens	eyewear specially designed	to optimize vision when
Comprehensive eye exam	100%	100%
Corrective lenses with a minimum prescription of 0.50 diopters and a prescription difference of 0.50 diopters from everyday prescription	Single 100%Lined bifocal 100%Lined trifocal 100%	Single 100%Lined bifocal 100%Lined trifocal 100%
Frame allowance	up to \$90	up to \$90
	·	·

FLEXIBLE SPENDING ACCOUNTS

Flexible Spending Accounts (FSAs) allow you to set aside pre-tax funds to pay for health care and dependent care expenses. Since these contributions are not subject to federal, state or payroll tax withholding, you keep more of your paycheck.

Each year you wish to participate in the FSAs, you must elect the amount you want to contribute.

- Your contributions will be deducted from your paychecks in equal installments throughout the year.
- You cannot change your contribution amount during the year unless you have a qualifying event.
- Estimate your contribution amounts carefully, as unused funds in excess of the IRS maximum limit (\$640 projected in 2024)* carry over will be forfeited after the end of the closing date.
- Keep in mind that you cannot transfer your balance from one FSA to another.

Health Care FSA

The Health Care FSA can be used to pay out-of-pocket medical, dental, vision and prescription drug expenses.



- Annual Contribution Limit: Projected at \$3,200 in 2024 (\$120 minimum)*
- Eligible Expenses: Copays, coinsurance, deductibles, prescription expenses (For a full list, visit www.irs.gov Publication 502)
- Funds Available: Full amount is available at the beginning of the plan year
- Payment or Reimbursement Options: FSA Debit Card, Direct Deposit, Check
- Deadline for Services: December 31, 2024 for 2024 Plan Year
- Deadline to Submit Claims for Reimbursement: March 31, 2025 for 2024.
- Plan Year Carryover: You are permitted to roll over \$640 (projected in 2024)* of unused funds to the next plan year. Any amounts in excess of \$640 (projected in 2024)* at the end of the plan year will be forfeited.

Dependent Care FSA

The Dependent Care FSA can be used to pay **eligible day care expenses** for your children under age 13 or a dependent adult to allow you or your spouse to work or attend school full time.



- Annual Contribution Limit: \$5,000 (\$2,500 if married and filing separate tax returns) (\$240 minimum)
- Eligible Expenses: Day care, after-school care, babysitting (work-related), nanny (For a full list, visit <u>www.irs.gov</u> Publication 503)
- Funds Available: You may only use up to the amount of funds you have in your account
- Payment or Reimbursement Options: Direct Deposit or Check
- Deadline for Services: December 31, 2024 for 2024 Plan Year
- Deadline to Submit Claims for Reimbursement: March 31, 2025 for 2024 Plan Year
- Plan Year Carryover: There is no carryover permitted in the Dependent Care FSA. Please estimate your expenses carefully.

Commuter Benefits

Commuter Benefits allow you to set aside pre-tax dollars to pay for **expenses related to commuting to and from work**. You can save 40% or more on your monthly commuting costs.



- Monthly Contribution Limit:
 - Parking: \$315 (projected in 2024)*
 - Vanpool or Transit pass: \$315 (projected in 2024)*
- Eligible Expenses: Transit passes, tokens, fare card, vouchers, parking passes and other mass transit, vanpooling, and work-related parking costs
- Funds Available: You may only use up to the amount of funds you have in your account

^{*} pending 2024 IRS guidance

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 2024, 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 up to the maximum IRS limit (\$3,200 projected in 2024) per year. Contributions are deducted from your paycheck on a pretax 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.
	Eligible expenses include:	Eligible expenses include:
What expenses are	 Medical, dental, prescription, and vision plan copays, deductibles, and coinsurance. 	 Medical, dental, prescription, and vision plan copays, deductibles, and coinsurance.
covered?	 Other eligible expenses described in IRS Publication 502, provided they are not reimbursed by your health plan. 	 Other eligible expenses described in IRS Publication 502, provided they are not reimbursed by your health plan.
Whose eligible	Your own expenses	 Your own expenses
expenses are	Expenses of your spouse	Expenses of your spouse
covered?	 Expenses of individuals you claim as dependents on your federal tax return 	 Expenses of individuals you claim as dependents on your federal tax return
Does my account balance carry over?	You are permitted to roll over unused funds up to the maximum IRS limit (\$640 projected in 2024) to the next plan year. Any amounts in excess of the maximum IRS limit (\$640 projected in 2024) at the end of the plan year will be forfeited.	Yes. Your HSA savings can be carried forward from year to year.
Who approves my claims?	Inspira Financial (the new brand name of PayFlex beginning in early 2024) 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 ASSISTANCE

Juggling all the responsibilities in life can feel overwhelming. It's important to have tools and resources to help you in every situation.

Employee Assistance Program (EAP)

The 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.

Experienced representatives can help you in every area of life:

- Financial problems
- Emotional/psychological issues
- Marital or family conflicts
- Child care and elder care concerns
- Stress, anxiety, depression, grief, and other emotional issues
- Alcohol and drug abuse
- Legal questions or concerns
- Personal and life improvement

HealthAdvocate

Phone: (866) 799-2728

Website: www.healthadvocate.com/wsgr

Organization name: WSGR

Additional EAP Services

You don't have to handle anything alone. Should you need it, the EAP also provides short-term counseling in person and on the phone. In addition, you have access to video-based counseling. The services are a convenient, confidential way to access a mental health counselor using your computer, laptop, tablet, or smartphone. 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. You can also access:

- Legal resources, including a consultation with a legal professional
- Financial resources, including a consultation with a financial partner
- Work/life resources
- Health risk assessments and tools
- Online will preparation

Don't hesitate to reach out to EAP with any questions or concerns.

RETIREMENT PLAN

Saving for your future is a vital part of your financial planning. Through participating in the 401(k) plan, you can build a strong financial foundation for your retirement income. It's never too early — or too late – to get started on building a bright future.

The 401(k) plan makes it easy for you to save money on a tax-deferred basis. When you enroll in the plan, a personal account will be established in your name.

- 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.

Your Contributions

You may contribute up to 75% of your eligible salary on a pre-tax basis and/or Roth after-tax basis, up to the annual IRS limit (for 2024, \$23,000).

- If you are age 50 or older, you are eligible to contribute an additional catch-up contribution up to the IRS limit (\$7,500) to accelerate your progress toward your retirement goals.
- Your contributions are made through convenient payroll deductions.
- You may change or stop your contributions at any time.

Automatic Enrollment

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

Investing in the Plan

You have access to a variety of investment options to choose from. Investments can be changed at any time. To learn more about your investment options, use the Schwab website or participate in Morningstar investment advice that is available through the plan.

Beneficiary Designation

The 401(k) plan requires you to name at least one beneficiary. You will need to provide the name and Social Security number for each beneficiary. Make sure you keep their information updated on the Schwab website.

Pre-Tax or Roth After-Tax?

When setting up your 401(k), it's important to understand the tax implications.

Pre-tax contributions allow you to reduce your current taxable income, but you will pay taxes on your contributions and earnings when you withdraw funds in retirement.

Roth contributions are made with after-tax dollars. While there is no tax benefit to you now, any earnings on those contributions are tax-free when you take a qualifying distribution in the future.

Speak with your tax advisor to help you decide which option is best for you.

Schwab-Participant Services

Phone: (800) 724-7526

Website: https://workplace.schwab.com

LIFE AND AD&D INSURANCE

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

As an important part of your financial planning, you are automatically provided with basic life insurance to protect you and your family in the event of death.

- Coverage is provided at no cost to you.
- For basic life insurance, you are covered in an amount equal to one times your annual base pay.
- Benefits are paid to the beneficiary you designate.
 Please keep your beneficiary information up to date.

Things to Keep in Mind

Life and AD&D insurance provides many benefits, but there are a few points to keep in mind:

- Imputed Income: The value of your companyprovided life insurance premiums over \$50,000 is considered taxable. Contact your tax professional for more information.
- Age Reduction: Benefit amounts reduce as you age.
- Conversion: If you leave the company, you can convert your policy to an individual policy and continue your coverage.

AD&D insurance

In addition to basic 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 firmpaid AD&D 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.

Voluntary Life Insurance

You may purchase voluntary life insurance for yourself and your dependents for additional financial protection.

- You must purchase coverage for yourself in order to purchase coverage for your spouse and your children.
- Your cost is based on the amount you elect and your age, and it is paid through after-tax payroll deduction.
- You can designate (and periodically update) your group life insurance beneficiaries on the online benefits portal in Workday.

Coverage	Available benefit
Employee	• 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, up to a maximum of \$500,000. Your monthly cost depends on the amount of insurance you purchase and your age.
Spouse or Domestic Partner	• 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 voluntary coverage. Your monthly cost depends on the amount of insurance you purchase and your spouse's or domestic partner's age.
Dependent Child(ren)	 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.

Guaranteed Issue

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

DISABILITY INSURANCE

An unexpected injury or illness can create a financial burden. Disability insurance replaces a portion of your income when you are unable to work.

Important: Disability benefits are reduced by other income you receive, such as Social Security, state disability benefits, pension benefits, and Workers' Compensation.

Short-Term Disability (STD)

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 are eligible to receive up to 12 weeks of short-term disability pay continuation.

Coverage	STD Benefit
Weekly Benefit	100% of weekly earnings
Weekly Benefit Maximum	No Maximum
Elimination Period	7 days
Benefit Duration	12 weeks

Long-Term Disability (LTD)

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 \$21,000 per month. Wilson Sonsini pays the full cost of your long-term disability insurance coverage.

Coverage	LTD Benefit
Monthly Benefit	60% of monthly earnings
Monthly Benefit Maximum	\$21,000 per month
Elimination Period	90 days
Benefits Duration	To Social Security Normal Retirement Age

Helpful Disability Insurance Terms

Qualifying Disability: A sickness or injury that causes you to be unable to perform any other work for which you are or could be qualified by education, training, or experience

Benefit Duration: Maximum amount of time you may receive proceeds for a continuous disability

Elimination or Waiting Period: The time you must wait before you are eligible to receive benefit payments

Reliance Matrix

Phone: (800) 351-7500

Website: https://www.reliancematrix.com/

Additional Information

To learn more, please see the schedule of benefits for a full list of benefits and costs.



VOLUNTARY BENEFITS

Life is expensive. When you add in unexpected accidents and illnesses, the extra costs can feel overwhelming.

Voluntary benefits give you the cash to cover your bills when you need it most. Whether you spend it on medical care or living expenses, you'll appreciate the extra help so you can focus on your health.

If you have an accident or a serious illness, your out-of-pocket copays and deductibles can add up quickly even with medical insurance and cause a financial burden. To help you bridge the financial gap, you may purchase voluntary benefits plans to complement your existing medical coverage. Benefits are paid directly to you, and you decide how to use the funds. Premiums are conveniently deducted from your paycheck on a post-tax basis.

ACCIDENT INSURANCE

Expect the Unexpected. Make Sure You're Covered with Accident Insurance.

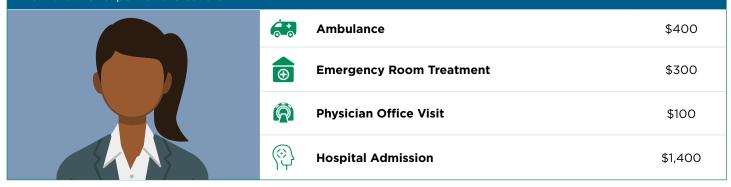
To help you cover your out-of-pocket expenses, the accident plan pays you a lump sum benefit depending on the covered accident you experience. Examples of covered accidents include fractures, dislocations, lacerations, burns, and some hospital care. Other advantages of accident insurance include the following:

- You receive cash benefits for expenses that may not be covered under your medical insurance, and you use the money as you see fit.
- There are no health questions to answer and no waiting period.
- You can insure your spouse and children.
- If you experience an accident and make a claim, your policy remains in force, subject to policy exclusions.

Accident Insurance Example - Recreational Sports Injury

Rosie purchases accident insurance for herself. While she is playing field hockey, she is hit in the head and knocked unconscious. Her team calls 911, and she goes to the hospital. The doctor orders an MRI and diagnoses her with a concussion. Here's a look at the lump sum Rosie will receive from her accident.

Since Rosie also misses a few days of work, her accident insurance benefit gives her the peace of mind she needs to know that her expenses are covered.



Additional Information

To learn more, please see the schedule of benefits on the intranet for a full list of covered accidents and coverage costs.

CRITICAL ILLNESS INSURANCE

Surprise Illnesses Also Bring Financial Burdens. Critical Illness Coverage Helps You Cover Your Bills When You Need It Most.

If you are diagnosed with a critical illness, you may need extra financial support to help offset the treatment costs and cover your day-to-day expenses, so you can focus on your health. The critical illness plan pays a lump sum benefit if you are diagnosed with a covered illness, and you can use the benefit as you see fit.

Advantages of Critical Illness Coverage

Consider the following advantages of critical illness coverage:

- You may elect coverage for yourself, your spouse, and/or your children.
- A set amount of money is paid directly to you, to be used however you choose, based on the amount you elect:
 - **Employee:** Choose coverage amounts from \$10,000 / \$20,000 / \$30,000
 - **Spouse:** Choose coverage amounts from \$5,000 / \$10,000 / \$15,000
 - Child (up to age 26): Choose coverage amounts from \$5,000 / \$10,000
- Receive a \$50 benefit for covered health screening tests like blood tests, stress tests, and colonoscopies.
- Some of the covered illnesses include heart attack, stroke, paralysis, coma, and cancer.
- There are no medical exams or health questionnaires to complete.
- The cost for this coverage depends on your age.



Critical Illness Example - Heart Attack

Manny decides to purchase \$10,000 of critical illness coverage. One Saturday morning in July, Manny was mowing the lawn and suffered a heart attack. Thanks to critical illness insurance, Manny receives \$10,000, which will help him cover his medical expenses and recovery needs while he is off from work. With the extra financial help, Manny can recover without any added stress.



Critical Illness Example - Stroke

Steven decides to purchase \$20,000 of critical illness coverage. One Thursday morning in January, Steven suffered a stroke. Thanks to critical illness insurance, Steven received \$20,000, which will help him cover some mortgage payments and the cost of flying his sister in to stay with him while he recuperates. With the extra financial help, Steven can focus on his recovery.

Additional Information

To learn more, please see the schedule of benefits on the intranet for a full list of covered illnesses and coverage costs.

HOSPITAL INDEMNITY PLAN

Hospital Visits Bring Extra Costs. Be Prepared with Hospital Indemnity.

Expenses from hospital visits can pile up quickly. While medical insurance typically pays the majority of the cost for hospital care, deductibles, copays, and non-covered medical services may be expensive.

- The hospital indemnity plan pays the following benefits:
 - Hospital admission benefit
 - Daily hospital confinement benefit
 - Intensive care unit confinement benefits
- Benefits are paid regardless of what is covered by medical insurance, and payments would be made directly to you to spend as you see fit.
- There are no medical exams or health questionnaires to complete.
- You may purchase this plan for yourself, your spouse, and/or your dependent children.

Hospital Indemnity Example - Child Tonsillectomy

Julia's son needs a tonsillectomy, which requires a brief hospital stay. Because she has hospital indemnity insurance, she receives a payment to help subsidize her time away from work to care of her son and all the extra popsicles and ice cream he will need. Here's a look at the lump sum Julia will receive:



⊕	Hospital Admission	\$1,000
U -U	Daily Confinement - 2 days	\$200
Total:		\$1,200

Additional Information

To learn more, please see the schedule of benefits on the intranet for a full list of covered services and coverage costs.

ALLSTATE IDENTITY THEFT PROTECTION

Comprehensive identity and privacy protection

With Allstate Identity Protection Pro+ Cyber, you can detect threats to your identity and finances, take control of your data and privacy, get breach intelligence and fraud insights, and stay ahead of the latest security threats. This is total protection for your digital life.

Advanced financial protection and \$2M expense coverage

Identity protection is a critical part of an employee's well-being, and helps secure a brighter financial future. Allstate covers many fraud-related expenses, including stolen funds, lost wages, and legal fees. Allstate will even reimburse funds stolen from 401(k)s, HSAs, unemployment benefits, and tax refunds.

Expert remediation and 24/7 support

Allstate makes it easy for you to get the assistance you need, whether it's providing helpful resources or expert guidance. Should fraud occur, Allstate's specialists fully restore compromised identities, helping you save time, money, and stress.

Cost of the Program

The Allstate program will be \$9.50 per individual per month and \$18.50 per family per month.

Enrollment

You can sign up for the coverage at any time at https://www.myaip.com/wsgr.

Additional Resources

Allstate's Customer Service Number: (800) 789-2720 or visit the employee website at www.MyAIP.com.

NATIONWIDE PET INSURANCE

Pet insurance provides a financial safety net for unexpected veterinary expenses. With pet insurance, you can focus on giving your pet(s) the best care possible, instead of focusing on the cost of treatment.

All pets are welcome (dogs, cats, birds, rabbits, ferrets, reptiles, and exotic pets).

- No age limits One price, regardless of pet's age, breed, or past health history
- Visit any vet, anywhere, anytime
- Enroll online or by phone
- \$250 annual deductible
- \$7,500 annual maximum; no lifetime maximum
- Exclusive to employees, not available to the general public
- Multi-pet discounts are available

To learn more about Nationwide Pet Insurance and its offerings, visit **PetsVoluntaryBenefits.com** or call (877) 738-7874. Coverage is effective 14 days after application approval and payment is received. You will be direct billed by Nationwide.

TRANSITIONS MEDICARE EDUCATION

Are you or someone in your family eligible for Medicare or approaching Medicare eligibility? Wilson Sonsini has partnered with Transitions to assist you with:

- Medicare education and coordination
- Social security planning
- Life stage planning
- Caregiver support
- Review of your benefit options, including COBRA

Service is provided at no cost to you. Contact Transitions to speak with a consultant at 1-800-936-1405 or visit their website at www.transitionsrbg.com.

WELL-BEING AND OTHER BENEFITS

WELL-BEING

Reproductive Care Access HRA

Wilson Sonsini is committed to providing benefit access for essential reproductive healthcare. The Reproductive Care Access HRA is available to employees and their dependents who are covered by any employer-sponsored group medical plan, even if it's not a Wilson Sonsini plan. The HRA reimburses patient travel, companion travel, a portion of lodging expenses, and other medically necessary expenses to the extent these are not covered by the individual's group medical plan. Reimbursements are subject to deductible for those enrolled in a tax-qualified high-deductible plan. To access this benefit, employees should sign up with Maven. Maven provides a range of support and navigation services across a wide spectrum of health and reproductive needs, in addition to administering reimbursement claims for this HRA. Please refer to the Reproductive Care Access HRA Summary Plan Description on the firm's intranet for additional details.

Maven for Menopause

Maven's Menopause and Ongoing Care program fills gaps in care by identifying symptoms of menopause, providing virtual access to providers who specialize in menopausal care, and guiding members to clinically sound education on a variety of topics related to this health journey.

Headspace Care (formerly Ginger)

Headspace Care provides the right level of emotional support at the right time — including coaching via text-based chat — right from the privacy of your smartphone. Headspace Care coaches are available 24x7. You can also access up to 12 video-based appointments per year with a therapist or psychiatrist. The benefit is available to employees and dependents age 13 and older. To sign up, download the Headspace Care Emotional Support app, tap "Get Started" and register using your Wilson Sonsini email address and your legal name. Once you are registered, you can use the app to send a link for your dependents to sign up independently using their own devices.

HealthWealth Reimbursement Program

This program reimburses you for health and wellness expenses, including gym memberships, sports equipment, fitness classes, and nutritional counseling, up to \$50 per month. Program details are posted on the intranet. To make a claim, please access the Thrivepass website through single sign-on from the firm's network.

Espresa Culture and Engagement Platform

The Espresa platform promotes the firm's core values and provides unique opportunities for employee engagement. You can participate in firm-wide challenges, and there are various wellness classes offered throughout the year that cover topics such as financial well-being, family-friendly cooking classes, and fitness. You can also send recognition to your peers through the FirmFive program on Espresa.

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 60-day window from date of hire to purchase guaranteed-issue coverage. 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.

PARENTING AND CAREGIVING

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 <u>clients.</u> <u>brighthorizons.com/wsgr</u> (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.

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 (login name is WSGR; password is Benefits4You).

Career/Life Coaching

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 especially recommend Talking Talent as a resource to employees who are planning to go on or return from parental leave.

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.

Flexible Families with Maven Wallet

The Flexible Families with Maven Wallet program provides you with access to reimbursements for eligible adoption, elective egg freezing, and/or surrogacy expenses.

Over the course of your career at Wilson Sonsini, you may access up to a lifetime maximum of \$20,000 in reimbursements for eligible egg freezing, adoption, and surrogacy expenses. Refer to the Maven Program Overview on the firm's intranet for more information. If you have any questions, please contact support@mavenclinic.com.



IMPORTANT TERMS TO KNOW

As you review the information in this benefits guide, you might come across a word that is unfamiliar. Take a look at these terms to better understand your benefits.

Beneficiary: A person you designate to receive your financial benefits (e.g. life insurance, 401(k), HSA) in the event of your death.

Calendar-Year Maximum: Total amount paid each year by your insurance company for each family member enrolled in the plan.

Claim: A request for payment that you or your health care provider submits to your health insurer after receiving a service or item.

Coinsurance: The percentage you pay for certain covered health care services under your health plan. This is typically the amount paid after a deductible is met and can vary based on the plan design.

Copay: The flat fee you pay toward the cost of covered medical services.

Deductible: The amount you are responsible for paying for covered health care services before the plan pays benefits. Under some plans, the deductible is waived for certain services.

Evidence of Insurability (EOI): The process in which you provide required health documentation in order to receive certain levels of coverage.

Formulary: A list of preferred drugs chosen by a panel of doctors and pharmacists. Both brand and generic medications are included on the formulary.

Guaranteed Issue: The amount of coverage pre-approved by the insurance carrier regardless of health status.

Network: A designated list of health care providers (doctors, dentists, etc.) with whom the health insurance provider has negotiated special rates. These contracted fees are usually lower than the provider's normal fees for services.



Out-of-Pocket Maximum: The highest amount paid for covered services during a benefit period. Both the deductible and the coinsurance apply towards meeting the out-of-pocket maximum, but copayments may not apply.

Pre-Existing Condition: A health problem you had before the date that new health coverage starts.

Preauthorization: A decision by your health plan that a health care service, treatment plan, prescription drug, or durable medical equipment is medically necessary. Preauthorization may be required for certain services before you receive them.

Premium: The amount you pay for a health plan in exchange for coverage.

Preventive Care: Routine health care that includes screenings, checkups, and patient counseling to prevent illnesses, disease, or other health problems.

Reasonable and Customary: The amount of money a health plan determines is the normal or acceptable range of charges for a specific health-related service or procedure.

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 the firm's network via single sign-on through OKTA. Follow the instructions in your Workday inbox to complete your enrollment and designate your group life insurance beneficiaries.

WILSON SONSINI BENEFITS DEPARTMENT CONTACTS

How to reach us by	
Email	humanresources@wsgr.com
Phone	(650) 858-7062
Online	Create a case through Workday Help
Benefits Information	www.wilsonsonsinibenefits.com



IMPORTANT CONTACTS

Coverage	Carrier/Vendor	Group ID #	Phone	Website
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		www.kaiserpermanente.org
	Kaiser DC/Mid-Atlantic	22195	(800) 777-7902	www.kaiserpermanente.org
	Kaiser Seattle	1479400	(888) 901-4636	www.kaiserpermanente.org
	Kaiser Colorado	15471	(800) 464-4000	www.kaiserpermanente.org
	HMSA Hawaii	032699001	(800) 813-2000	www.hmsa.com
	Vision Service Plan	00105149	(800) 877-7195	www.vsp.com
Critical Illness/Accident/ Hospital Care Insurance	Cigna	CI 111125 AI 111174 HC 110926	(800) 754-3297	www.Cigna.com
Health Savings Account	HSA Customer Service (bank)		(844) 650-8930	www.mycigna.com
Flexible Spending Accounts	Inspira Financial (new brand name of PayFlex beginning in early 2024)		(800) 284-4885	www.payflex.com
Group Life and AD&D Insurance	Reliance Matrix		(800) 351-7500	https://www.reliancematrix.com/
Leave Requests and Disability Claims	Reliance Matrix		(800) 351-7500	https://www.reliancematrix.com/
Long-Term Care	Unum	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				clients.brighthorizons.com/
College Coach	Bright Horizons Backup Care		(877) 242-2737	<u>wsgr</u>
	College Coach		(888) 527-3550	Login: WSGR; Password: Benefits4You
Parental Support	Maven			www.mavenclinic.com/join/ wsgrfamily
Career Coaching	Talking Talent			contact@talking-talent.com
Digital Mental Health and Well-Being Platform	Headspace Care			caresupport@headspace.com
Commuter Benefits	Thrivepass		(866) 855-2844	https://www.thrivepass.com/
Employee Assistance Program	HealthAdvocate		(866) 799-2728	www.healthadvocate.com/wsgr Organization name: WSGR
Identity Theft	Allstate		(800) 789-2720	https://www.myaip.com/wsgr
Pet Insurance	Nationwide		(877) 738-7874	https://benefits. petinsurance.com/ wilsonsonsinigoodrichrosati
COBRA	OneSource Virtual		(866) 634-9784	WSGRCOBRA@ onesourcevirtual.com
Medicare Education	Transitions Benefit Group		(800) 936-1406	www.transitionsrbg.com



Benefits highlighted in this guide are governed by Wilson Sonsini plan contracts and policies, applicable state and federal law, and company policy. If there is a conflict between the wording of this guide and the group policies and contracts, the policies, contracts, and applicable laws govern. Wilson Sonsini reserves the right to alter, amend, or terminate any of the benefits described in this guide at any time.