



RRD BENEFITS
HEALTH | WEALTH | LIFE

Support for your **best life.**

Highlights of Your 2022 Benefits

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Choose Your 2022 RRD Benefits

November 1 – 12, 2021

Your well-being is important. That's why RRD invests in benefits to support you and your family. Your benefits are a significant part of the total rewards you receive as an RRD employee. Used wisely, they can help you improve your health and save money.

During Annual Enrollment, you have the opportunity to review your RRD benefits and make sure you have the right coverage for you and your family. For 2022, we're excited to announce many positive changes to your benefits, including:

- **Two new medical options** — Copay Select and HSA Select — offered in certain geographic areas based on availability of network providers. (Copay Select was offered in limited areas in 2020 as Copay Value Select.)
- **Lower annual deductibles** and **very small premium increases** for ALL the national Medical Program options.
- **PrudentRx**, a new copay assistance program through CVS Caremark that can reduce your cost for certain specialty medications to \$0.
- **Lower premiums** for vision coverage.
- **Enhancements** to the optional critical illness and accident coverage offered by MetLife.

These are just a few of the changes for 2022, so be sure to review this Highlights Guide to learn more about what's new and changing.

This guide also includes an enrollment checklist with important steps you should take during Annual Enrollment ([page 6](#)). Please review it carefully, and then visit myRRDbenefits.com to access your **2022 Benefits Enrollment Guide** and more details about your benefits and how to find your 2022 costs.

Don't miss out on this once-a-year opportunity to review, enroll or change your benefit elections. And take this time to get to know your benefits better, so you can use them throughout the year to help you **live your best life**.

What's New & Changing for 2022

Here's an overview of changes to your RRD benefits effective January 1, 2022.

Two More Medical Options for Many Employees: Copay Select (formerly Copay Value Select) & HSA Select

After a pilot program last year in a few areas and in response to employee feedback, we are offering two more Blue Cross and Blue Shield of Illinois (BCBSIL) medical options in certain geographic areas: Copay Select (formerly called Copay Value Select) and HSA Select.

These are high-performance network plans, which means providers consistently deliver high-quality, cost-effective patient care. These options have lower out-of-pocket costs (premiums, deductibles and copays) compared to our other medical options, but they only cover care received in-network. It is very important to check to see if your providers and hospitals are in the High Performance Network (HPN) because **out-of-network care is NOT covered except for true emergencies.**

These medical options will be offered in areas where there is a substantial number of HPN network providers. If that includes the area where you live, you'll see these options listed when you log in to the enrollment website. You can check to see if your providers are in the Blue High Performance Network at bcbsil.com/go/rrdbluehpn.

Medical Program Costs

The premiums you pay for your RRD medical coverage will increase very modestly in 2022 — just \$2 per month for employee-only coverage and \$4 per month for family coverage. You can view your premiums on the enrollment website, which is accessible from myRRDbenefits.com.

Annual deductibles (the amount you pay out of your wallet for eligible health care costs before your medical option starts to pay) will once again decrease. You'll pay:

- **\$150 less** for employee-only coverage and **\$300 less** for family coverage for the HSA medical options, and
- **\$200 less** for employee-only coverage and **\$400 less** for family coverage for the Copay medical options.

Please refer to your **2022 Benefits Enrollment Guide** at myRRDbenefits.com to review and compare your medical options side-by-side.



BCBSIL Programs for Cost-Effective Health Care

To help you get the best care at the best price, BCBSIL will **require** you to do the following starting January 1, 2022:



Contact a health advocate

prior to receiving an MRI or CT scan, or you will be assessed a \$200 penalty. A health advocate will help you compare service locations and costs so you can make an informed decision about your care.



Use a “Blue Distinction Specialty Care” facility

for these five specialties: bariatric, cardiac, knee and hip replacement, spine and transplant surgeries. Blue Distinction facilities are recognized for delivering higher-quality care. If you choose not to use a Blue Distinction Care facility, you might pay higher coinsurance.



Receive prior authorization

for radiation therapy (proton treatment, radiation treatment, etc.).

For more details about these requirements, please contact your health advocate.

6 More Ways to Save Money on Your Health Care

1

Choose BCBSIL network providers. Visit bcbsil.com/rrd or call BCBSIL at **1-800-537-9765** to make sure your providers are in the network.

2

Know where to go for the right care at the right time. That includes using virtual visits for non-emergency conditions and using the emergency room only for true emergencies.

3

Compare your costs for health care by using BCBSIL's Provider Finder tool or a health advocate. These resources can help you find providers based on location, price, patient reviews and more.

4

Use BCBSIL's Health Advocacy Solutions to help you and your covered family members with all your health care matters, including help to find high-quality, cost-effective providers.

5

Earn a cash reward through Member Rewards when you use BCBSIL's Provider Finder tool or call a health advocate and seek certain medical procedures and services at a rewarded location.

6

Quit Tobacco. You can avoid the tobacco surcharge on your annual medical premium (\$500 per adult and \$250 per child) and get help to quit tobacco when you participate in the UBreathe Tobacco Cessation program. It's free to you and your eligible family members.

You can learn more and find additional ways to save at myRRDbenefits.com.

PrudentRx Copay Program for Specialty Medications — \$0 Copay!

If you enroll in Copay Value, Copay Advantage or Copay Select for 2022, you'll be automatically enrolled in PrudentRx as part of your prescription drug coverage through CVS Caremark. Through this **FREE** program, you'll pay \$0 for covered specialty medications filled at CVS Specialty.

The PrudentRx Copay Program currently targets specialty medications in the following therapy classes: hepatitis C, autoimmune, oncology and multiple sclerosis. If you currently take medication included in PrudentRx's exclusive specialty drug list, you'll receive a welcome letter and phone call from PrudentRx.

To opt out of the Program, you must call **1-800-578-4403**. If you disenroll, you'll be responsible for paying 30% coinsurance for any eligible specialty medications you take. **If you are required to pay this 30% coinsurance for a specialty medication that is considered a "non-essential health benefit," you'll be required to continue paying this amount even if you've otherwise met the Plan's out-of-pocket maximum.**

How to Save on Your Prescription Medications

Prescription medications can be expensive, but your RRD benefits can help you save money. RRD offers **Rx Savings Solutions** — a **FREE**, online tool available to you and your dependents enrolled in an RRD national medical option. Once you register, Rx Savings Solutions looks at your medications and, if possible, finds lower-cost options. Visit myRRDbenefits.com to learn more and get started.

Vision & Dental Program Costs

For the second year in a row, you'll pay less for your vision coverage. Your dental plan premiums won't change unless you enroll in the Dental HMO (DHMO), which has an enhanced network and 2% rate increase for 2022. Your **2022 Benefits Enrollment Guide** at myRRDbenefits.com has details about your vision and dental plan options. You can view 2022 premiums on the enrollment website.

Contribution Limit Increase for Health Savings Account

You are eligible for a Health Savings Account (HSA) if you enroll in the HSA Value, HSA Advantage or HSA Select medical option. Contributing to an HSA lets you save and pay for eligible health care costs tax-free. The IRS contribution limits for 2022 are:

- \$3,650 for employee only coverage (\$50 more than 2021)
- \$7,300 for family coverage (\$100 more than 2021)
- \$1,000 catch-up contribution if you are or will be age 55 or older in 2022 and not enrolled in Medicare

How to Use Your HSA to Save Money

If you're enrolled in an HSA-eligible medical option, contribute as much as you can (up to the IRS limit) to help pay for eligible expenses. The money in your HSA is always yours to use — now and in the future. Review the **Guide to Your Health Savings Account** at myRRDbenefits.com to learn more about using an HSA.

Flexible Spending Account Contributions

You save money when you use Flexible Spending Accounts (FSAs) to pay for eligible out-of-pocket health and dependent day care expenses with before-tax dollars. For 2022, you may contribute \$200 – \$2,750 to a Health Care FSA and \$200 – \$5,000 to a Dependent Day Care FSA.

Action Required to Participate in an FSA

To begin or continue participating in the FSA program in 2022, you must enroll during Annual Enrollment. Current elections don't carry over.

Take Care of Yourself!

Good health is everything. Make sure you are using your RRD benefits to support your health and well-being so you can live your best life.

Find help for the demands of everyday life

SupportLinc, our Employee Assistance Program (EAP), is completely confidential and available at no cost to you and your immediate family members. They can help you with professional counseling services, referrals to expert resources for legal and financial assistance, and support for issues such as dependent care, auto repair, home improvement and more.

Take advantage of LifeSpeak

Support your mental, physical and financial health. You and your family have **FREE** access to expert information and advice on issues that affect your life.

Get your preventive care

It's 100% covered by your RRD medical option when you see an in-network provider. An annual preventive care visit includes age- and gender-based screenings that can help you manage risk factors and detect any health issues early — before they become more expensive and difficult to treat.

Get support for a chronic health condition

These confidential and no-cost programs are included in your benefits:

- Livongo for Diabetes
- Livongo for Hypertension
- Hinge Health for chronic back, knee or hip pain
- BCBSIL Blue Care Advisors

Learn more about all these benefits and other resources available to support you at myRRDbenefits.com.

MetLife Critical Illness & Accident Insurance Enhancements

Supplemental health care benefits from MetLife can augment your existing health care coverage and provide cash benefits directly to you for certain illnesses or injuries. For 2022, RRD has negotiated several enhancements to MetLife Accident Insurance and Critical Illness Insurance — with no changes to current rates.

MetLife Accident Insurance

Coverage will expand to 24 hours (compared to only off-the-job coverage). You'll also receive a higher cash benefit for certain accidents (puncture wounds and occupational HIV/hepatitis, for example), as well as payouts for care at home or a skilled nursing facility, and an increase in benefits if an injury is sports-related.

MetLife Critical Illness Insurance

MetLife has added coverage for more conditions, including benign brain tumor; coma; paralysis of two or more limbs; ALS; multiple sclerosis; muscular dystrophy; advanced Parkinson's disease; childhood cerebral palsy, cystic fibrosis and type 1 diabetes; and more.

To learn more, visit metlife.com/mybenefits or call **1-800-GETMET8 (1-800-438-6388)**.

Choosing Voluntary Benefits

During Annual Enrollment, you can elect voluntary benefits, including **Allstate Identity Protection; MetLife Accident, Critical Illness and Hospital Indemnity Insurance; and MetLife Legal Plans**. These benefits are entirely optional and not sponsored by RRD. You may pay for them through payroll deductions on an after-tax basis.

If you are currently enrolled in any of these plans, your coverage will carry over to 2022. Your **2022 Benefits Enrollment Guide** has the details.

Your Enrollment Checklist

Annual Enrollment for your 2022 benefits starts **Monday, November 1**, and ends **Friday, November 12, 2021**. Here's what you need to do:

Read your enrollment materials and review your options.



Visit myRRDbenefits.com to access the **2022 Benefits Enrollment Guide** and learn about your 2022 options and the decisions you need to make. For more details on Medical Program options, you can also review the full Summary of Benefits and Coverage (SBCs), as well as the Summary Plan Descriptions (SPDs) and any Summaries of Material Modifications (SMMs). To request paper copies, call **1-877-RRD-4BEN (1-877-773-4236)**.

Get help to make informed decisions about your benefits.



On the enrollment website (accessible from myRRDbenefits.com), use the “Ask Emma” virtual assistant to view your costs, compare your options, and help you choose the benefits that are right for you and your situation. Emma will guide you through the enrollment process by asking you a few simple questions, and she'll suggest options based on your responses and individual needs.

Make your 2022 benefit elections November 1 – 12, 2021.

Go to myRRDbenefits.com to access the link to the enrollment website. Instructions on how to log in are listed on the enrollment website home page.



- The enrollment website will be available 24 hours a day, 7 days a week during the enrollment period. You may go back to the enrollment website to make changes as often as necessary before the deadline.
- If you don't have online access, you can enroll by phone starting November 1 at **1-877-RRD-4BEN (1-877-773-4236)**, Monday – Friday, 7 a.m. – 7 p.m. CT.
- **Don't wait until the last minute!** Phone enrollment ends November 12, 2021, at 6:59 p.m. CT. You could experience long wait times if you try to enroll by phone during the last four days of Annual Enrollment.



Review/update your dependents on the enrollment website.

Certify your tobacco status on the enrollment website.



Your current tobacco status will carry over, so update it if it has changed. Tobacco users will pay an annual medical premium surcharge of \$500 per adult and \$250 per child.*

Review/update your beneficiary designations.

Protect your family and your money by making sure your beneficiary information is up to date for your:



- Life insurance and supplemental health care coverage on the **enrollment website**
- RRD 401(k) Savings Plan via secure sign-on to Empower Retirement from the **enrollment website**
- HSA at **HealthEquity.com**

Confirm your elections.



After enrolling, review your confirmation statement and verify your elections, covered dependents and per-pay-period costs are correct. Print and keep a copy for your records. If you need to make changes or corrections, you may do so until November 12, 2021, on the enrollment website or by calling the RRD Benefits Center at **1-877-RRD-4BEN (1-877-773-4236)**.

* You and/or each of your enrolled dependents who are tobacco users may avoid the premium surcharge by participating in the tobacco cessation program during the Plan year. So long as the individual participates in the program by December 31, 2022, you will be refunded the tobacco surcharge for that individual. If you are enrolled in the Optional Life plans, those premium rates will be adjusted prospectively to reflect the non-tobacco premium discount effective on the first of the month following participation in the program. Contact UBreathe at **1-888-882-5462** to participate in the program. (Alternate cessation recommendations by your physician will be accommodated.)



**Your benefit elections
will be in effect
Jan. 1 – Dec. 31, 2022.**

You cannot make changes during the year unless you experience a life event or qualified status change (e.g., marriage, divorce, birth of a child). For more information, read the Qualified Status Changes SPD at **myRRDbenefits.com**.

If You Don't Enroll by November 12, 2021

Annual Enrollment is your once-a-year opportunity to enroll or change your benefit elections for the coming year (unless you have a qualifying life event). **If you don't take action:**



Medical Coverage

- Your current election and coverage category (i.e., whom you cover) will carry over to 2022.
- Your 2021 Tobacco-free Pledge will also carry over to 2022.



Dental Coverage

Your current election and coverage category (i.e., whom you cover) will carry over to 2022.



Vision Coverage

Your current election and coverage category (i.e., whom you cover) will carry over to 2022.



Supplemental Health Care Coverage

Your current elections will carry over to 2022.



Waived Coverage

If you currently waive coverage, your coverage will continue to be waived.



HSA Contributions

- If you contributed to an HSA in 2021, your contribution amount will carry over to 2022.
- If you want to contribute up to the new 2022 maximums (\$3,650 for employee-only coverage or \$7,300 for family coverage) or make any contribution changes, you must elect the new amount.
- You may change your HSA contribution at any time during the year.



FSA Contributions

FSA contributions do **not** carry over. You must enroll during Annual Enrollment to participate in an FSA in 2022.



Optional Life and Accidental Death & Disability (AD&D) Coverage

Your current elections (with the exception of child life insurance elections) will carry over to 2022.



Voluntary Legal Coverage

If you are currently enrolled in MetLife Legal Plans, your election will carry over.

Important Notices & Disclosures

HIPAA Privacy Notice

As a participant in the Plan or the RR Donnelley Flexible Benefits Plan, you are entitled to receive the HIPAA Privacy Notice for the Plan. You may view a copy of the HIPAA Privacy Notice on myRRDbenefits.com, or you may request a copy from the HIPAA Privacy Official for the Plan by writing to:

R.R. Donnelley & Sons Company

c/o HIPAA Privacy Official
4101 Winfield Road
Warrenville, IL 60555

Changing Your Elections During the Year

If you do not enroll by the deadline, the only way you may be able to enroll or change an election during the calendar year is if you have a life event or qualifying change in status. Keep in mind, new dependents are not automatically covered by the Plan; you must enroll them for coverage. For dependents who are no longer eligible for coverage under the Plan, you are required to call the Benefits Center at **1-877-RRD-4BEN (1-877-773-4236)** or go online to rrd.bswift.com to remove them from coverage under the Plan.

You may change your elections during the year if you experience a qualifying life event in one of the categories described in your Qualified Status Changes (and the Participant Premium Program) SPD (soon to become part of the Administration Information Booklet), including a Special Enrollment Period (described below). Generally, such election changes must be made no later than 30 days from the date of the life event (except in the case of certain special enrollment events described below). You are responsible for making the changes through the RRD Benefits Center. You can make a new election or change an existing election in response to a qualifying life event only if the election is a result of and consistent with the life event. Not all qualifying life events apply to all Plan options. For a full list of qualifying life events, go to myRRDbenefits.com to view your SPD and any related SMM.

Special Enrollment Period for Group Health Coverage

Important Note: As a result of the COVID-19 pandemic, certain plan deadlines have been extended or suspended. If your special enrollment event occurs during the COVID-19 "Outbreak Period," then your time limit to request special enrollment will not start to run until after the end of the Outbreak Period. The Outbreak Period began on March 1, 2021, and ends 60 days following the end of the declared National Emergency due to COVID-19 (or other date specified by the Internal Revenue Service and Department of Labor). You will have until the earlier of the following to request special enrollment: (i) one year from the date you would be normally required to act (i.e., one year and 30 days or one year and 60 days from your special enrollment event, depending on the event), or (ii) 90 or 120 days after the end of the declared COVID-19 National Emergency, depending on the event (i.e., the usual 30-day or 60-day period will begin to run 60 days after the end of the declared National Emergency). See the COVID-19 Deadline Extension SMM at myRRDbenefits.com (under FORMS & DOCS) for more information.

If you decline Medical Program coverage for yourself or your dependents because you/your dependents have other coverage and you/your dependents later lose that other coverage (or if the employer stops contributing toward your or your dependent's other coverage), you may qualify for special enrollment in health coverage under the Plan. Your loss of other health coverage qualifies for special enrollment treatment only if both of the following apply:

- You/your dependents were covered under another group health care plan or health insurance coverage at the time you were offered coverage under the RR Donnelley Group Benefits Plan.
- You/your dependents lost the other coverage because you/they exhausted your/their right to COBRA continuation coverage, you/they were no longer eligible under that plan or an employer's contributions for coverage terminated.

You must enroll within 30 days after your/your dependents' other coverage ends (or after the employer stops contributing toward the other coverage)

You may also be able to enroll if you/your dependents lose eligibility for coverage under Medicaid or a state Children's Health Insurance Plan (CHIP) and enroll within 60 days of losing Medicaid or CHIP. Also, you may be able to enroll if you/your dependents become eligible for premium assistance from Medicaid or CHIP toward the cost of the group health plan, and enroll within 60 days of eligibility for state premium assistance.

If you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents for coverage under the Plan. Generally, you must enroll within 30 days after such event. (Note: If you are adding a newborn child, a newly adopted child, or a child newly placed with you for adoption, you have up to 60 days to report such event to the Benefits Center under the Plan's more generous policy.) To request special enrollment or if you have questions regarding special enrollment rights, please contact the Benefits Center at **1-877-RRD-4BEN (1-877-773-4236)**.

Right to Choose a Primary Care Provider

Depending on where you live, you might be eligible for a Regional HMO Medical Program option in addition to the national Medical Program options. If you are eligible, you will receive additional information about the Regional HMO for which you are eligible, including contact information.

The Regional HMOs generally require the designation of a primary care provider (but the national Medical Program options do not). You have the right to designate any primary care provider who participates in the Regional HMO network and is available to accept you or your family members. For information on how to select a primary care provider and a list of participating primary care providers, contact the Regional HMO directly at the number or website included in your enrollment materials. For children, you may designate a pediatrician as the primary care provider.

You do not need prior authorization from the Regional HMO or from any other person (including a primary care provider) to obtain access to obstetrical or gynecological care from a health care professional in the network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact the Regional HMO directly at the number or website provided in the enrollment materials.

Women's Health & Cancer Rights Act

Important information about benefits that may be available to women who have had or are going to have a mastectomy: If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prosthesis; and
- Treatment of physical complications of the mastectomy, including lymphedema.

Such coverage is subject to all Plan provisions, limitations and requirements, including any annual deductible and coinsurance limitations, outlined in your SPD and any related SMMs. If you would like more information, visit **myRRDbenefits.com** or call the Benefits Center at **1-877-RRD-4BEN (1-877-773-4236)**.



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About This Guide:

This guide describes the coverage RRD will offer for 2022 to the majority of benefits-eligible employees under the RR Donnelley Group Benefits Plan (the "Plan"). Your benefits eligibility will determine the coverage that is offered to you, your spouse, domestic partner and/or your dependent child(ren). More details on benefits eligibility are available in the Summary Plan Descriptions (SPDs) and Summaries of Material Modifications (SMMs) online at myRRDbenefits.com.

Important:

The descriptions provided in this guide are based on official Plan documents. Every effort has been made to ensure the accuracy of this material. In the unlikely event there is a discrepancy between this document, the SPDs, SMMs, any other materials summarizing the RR Donnelley Group Benefit Plan and the official Plan documents, the official Plan documents will control. RRD reserves the right to amend or terminate the Plan or Programs at any time for any reason.