



# RELX Benefits at-a-glance

Welcome to a brief overview of the RELX Inc. U.S. benefits offerings, highlighting health and well-being and retirement programs available to eligible employees and their eligible dependents.



# Health Benefits Overview

RELX offers a multi-carrier benefits program that will allow you to align your health plan choices with your personal needs and your budget. All US benefits-eligible employees can choose from several medical plans of varying coverage levels and costs. RELX health and insurance benefits are administered by Alight Solutions.

RELX employees share in the cost of health benefits through a bi-weekly contribution from their paycheck.

**NOTE:** This contribution is based on your base salary plus target incentive or commission (if applicable), where you live and who you choose to cover.

To help you decide which of the following RELX medical, dental and vision benefits is right for you and your family (if applicable) or to enroll, log in at [RELXbenefitscenter.com](https://relxbenefitscenter.com) or call 1-877-734-1938, Option 1.

## Eligibility: Immediate, but you must enroll within 30 days of your hire date

- Full- & part-time employees working 20 hrs/week or more are eligible
- Same- & opposite-sex partners are eligible
- You are required to provide documentation verifying eligibility if you choose to cover a spouse, domestic partner and/or child(ren)
- Benefits begin on your hire date and will be subject to catch-up premium payments once you enroll
- **\$65 per-paycheck Working Spouse/Domestic Partner Surcharge** applies if your spouse/domestic partner is eligible for subsidized coverage from their employer

## Medical Coverage Levels

### Bronze Plus

*High deductible with lower per paycheck deduction*

- In- and out-of-network coverage with cost savings in-network; **comes with a tax-advantaged HSA**
- **In-network deductibles: \$2,450 Single / \$4,900 true family deductible before coinsurance begins**
- **Coinsurance: After the deductible is met, the plan covers 75% of the cost and you'll pay 25% for in-network care**
- **Annual Out of Pocket Maximums: \$3,900 Single / \$7,800 true family out of pocket maximum**
- Prescriptions and medical costs are both subject to a combined deductible
- Free in-network preventive care (some restrictions apply)

### Silver

*High deductible with lower deductible than Bronze Plus options*

- In- and out-of-network coverage with cost savings in-network; **comes with a tax-advantaged HSA**
- Pay more in payroll contributions and less out of pocket when receiving care than Bronze Plus
- **In-network deductibles: \$1,500 Single / \$3,000 true family deductible before coinsurance begins**
- **Coinsurance: After the deductible is met, the plan covers 75% of the cost and you'll pay 25% for in-network care**
- **Annual Out of Pocket Maximums: \$3,800 Single / \$7,600 true family**
- Prescriptions and medical costs are both subject to a combined deductible
- Free in-network preventive care (some restrictions apply)

### Gold

*Preferred provider organization (PPO) with low deductible*

- In- and out-of-network coverage with cost savings in-network
  - Pay less out of pocket when receiving care and more in payroll contributions
  - **In-network deductibles: \$800 Single / \$1,600 traditional family deductible before coinsurance begins**
  - **Coinsurance: After the deductible is met, the plan covers 75% of the cost and you'll pay 25% for in-network care**
  - **Annual Out of Pocket Maximums: \$3,600 Single / \$7,200 family (traditional)**
  - Prescription copays are not subject to the deductible, medical copays apply after satisfying a small deductible
  - Free in-network preventive care (some restrictions apply)
- NOTE:** This option is **not** HSA-eligible, but is eligible for a Healthcare Flexible Spending Account (HC FSA)

### Platinum

*Preferred provider organization (PPO) with no deductible*

- In-network coverage; limited out-of-network coverage (check with carrier)
  - Pay less out of pocket when receiving care and more in payroll contributions
  - **In-network deductibles: None**
  - **Annual Out of Pocket Maximums: \$1,600 Single / \$3,200 family (traditional)**
  - Free in-network preventive care (some restrictions apply)
- NOTE:** This option is **not** HSA-eligible, but is eligible for a Healthcare Flexible Spending Account (HC FSA)

Health Savings Account (HSA)	Healthcare Flexible Spending Account (HC FSA)
<b>Enrolled in Bronze Plus or Silver coverage levels only</b>	<b>Enrolled in Gold or Platinum coverage levels</b>
Contribute pre-tax dollars to a bank account to help pay for healthcare expenses now or in the future, even after retirement	Contribute pre-tax dollars to help pay for eligible out-of-pocket healthcare expenses for you and your dependents.
Debit card and online bill pay available	Debit card and online bill pay available
Unused funds will roll over from year-to-year and the money in the account is portable	Unused funds will be forfeited each year; be sure to budget and track your expenses
You and your covered spouse/domestic partner can earn HSA incentive funds by completing annual well-being activities	Eligible expenses: <a href="https://www.irs.gov/publications/p502">irs.gov/publications/p502</a>
For IRS qualified medical/prescription drug use expenses. Visit: <a href="https://www.irs.gov">irs.gov</a>	

Administered by Optum Bank - [optumbank.com](https://optumbank.com) or 1-800-791-9361

## Dental Coverage Levels

Bronze	Silver	Gold	Platinum <sup>1</sup>
A basic Dental Preferred Provider Organization (DPPO) plan option that covers in- and out-of-network care. You'll receive a discounted rate with in-network providers, but it <b>does not cover major services</b> or orthodontic expenses	A buy-up to the basic DPPO option that covers in- and out-of-network care. You'll receive a discounted rate with in-network providers, including coverage for major services and, for children up to age 19, orthodontic expenses	An enhanced DPPO option that covers in- and out-of-network care. You'll receive a discounted rate with in-network providers, including coverage for major services and orthodontic expenses for children and adults	A Dental Health Maintenance Organization ( <b>DHMO</b> ) option that covers in-network care only, including orthodontic expenses for children and adults. A DHMO has a <b>limited network</b> and is not available in some areas
<b>Annual Maximum:</b> \$1,000/person	<b>Annual Maximum:</b> \$1,500/person	<b>Annual Maximum:</b> \$2,500/person	<b>Annual Maximum:</b> N/A
<b>Annual Deductible (ind/family):</b> \$100/\$300	<b>Annual Deductible (ind/family):</b> \$100/\$300	<b>Annual Deductible (ind/family):</b> \$50/\$150	<b>Annual Deductible (ind/family):</b> N/A
<b>Orthodontia Lifetime Maximum:</b> Not covered	<b>Orthodontia Lifetime Maximum:</b> \$1,500/child	<b>Orthodontia Lifetime Maximum:</b> \$2,000/person	<b>Orthodontia Lifetime Maximum:</b> Varies by insurance carrier

### What's Covered: In-Network Dental Benefits

Preventive Care			
Covered 100%, no deductible	Covered 100%, no deductible	Covered 100%, no deductible	Varies by insurance carrier
Minor Restorative Care (e.g., root canal treatment, gum disease treatment and oral surgery)			
You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible	Varies by insurance carrier
Major Restorative Care (e.g., implants, dentures)			
<b>Not covered</b>	You pay 40% after deductible	You pay 20% after deductible	Varies by insurance carrier
Orthodontia			
<b>Not covered</b>	You pay 50%, no deductible; children up to age 19 only	You pay 50%, no deductible; for children and adults	Varies by insurance carrier

<sup>1</sup> Not available in some areas. Only the coverage levels for which you are eligible will show as options when you enroll online.

<sup>2</sup> If you switch insurance carriers, any orthodontic expenses you've already incurred under your current carrier will count toward your new carrier's orthodontia lifetime maximum

**NOTE:** The charts within this brochure may not take into account how each coverage level covers any state-mandated benefits, its plan administration capabilities or the approval from the state Department of Insurance of the benefits offered by the plan. If you have questions about a specific benefit, contact the insurance carrier for additional information.

# Vision Coverage Levels

Bronze	Silver	Gold
Exam-only option that provides in-network discounts for certain materials	A PPO option that covers in- and out-of-network care	An enhanced PPO option that covers in- and out-of-network care
What Does it Cost? In-Network Vision Benefits		
Routine Vision Exam (once per plan year)		
Covered 100%	You pay \$20	You pay \$10
Frames or Contacts		
Discount may apply	\$100 allowance	\$200 allowance
Lenses (once per plan year; includes single vision, bifocal, trifocal, lenticular, standard progressive)		
Discount may apply	You pay \$20	You pay \$10

**NOTE:** The RELX Benefits Center will give a more detailed look at these and additional coverages—and does account for some carrier adjustments to standardized plan benefits. To see summaries when you enroll online, check the boxes next to the options you want to review and click Compare. In order to get the most comprehensive information about any specific coverage, you will need to call the carrier directly.

## HEALTH INSURANCE CARRIER INFORMATION

For comprehensive lists of all the available medical, dental and vision carriers and their contact information visit [RELXbenefitscenter.com](https://relxbenefitscenter.com) and click on **Benefits Contacts & Carriers**

## HEALTH & INSURANCE QUESTIONS

Call 1-877-734-1938, Option 1 or visit [RELXbenefitscenter.com](https://relxbenefitscenter.com)

# Voluntary & Protection Benefits

To help you decide which of the following RELX voluntary and protection benefits are right for you and your family (if applicable) and to enroll, log in at [RELXbenefitscenter.com](https://relxbenefitscenter.com) or call 1-877-734-1938 Option 1.

Supplemental Hospitalization Insurance (via UnitedHealthcare)	Critical Illness Coverage (via UnitedHealthcare)
<p><b>Eligibility:</b> All benefits-eligible employees; covered spouse/partner and/or eligible child(ren)</p> <ul style="list-style-type: none"> <li>-- Not a replacement for medical insurance</li> <li>-- Benefits are paid directly to you</li> <li>-- Check policy details about pre-existing conditions and how they could impact your coverage</li> </ul>	<p><b>Eligibility:</b> All benefits-eligible employees; covered spouse/partner and/or eligible child(ren)</p> <ul style="list-style-type: none"> <li>-- Not a replacement for medical insurance</li> <li>-- The plan pays lump sum, tax-free benefits directly to you</li> <li>-- Coverage may be affected by a pre-existing condition</li> </ul>
Purchase additional limited coverage for hospitalization costs	Several coverage options available, ranging from \$5,000–\$30,000, with rates based on age
\$1,000 minimum per enrolled family member per year. Additional \$250-\$500 per day, after the first day, depending on time spent in ICU	Employees with benefits pay under \$70,000: Base coverage of \$5,000 will automatically be provided by RELX to you and your medically-covered dependents at no cost to you

## DISABILITY INSURANCE (administered by Unum)

<b>Short-term</b>	<p>The plan will pay either 100% or 60% of your bi-weekly earnings or a combination thereof, for up to 25 weeks depending on length of service, after a one-week elimination period</p> <p>Employees with 61 days to 3 years of service receive 4 weeks at 100% pay and an additional 21 weeks at 60% pay Employees with more than 3 years of service receive 13 weeks at 100% pay and an additional 12 weeks at 60% pay</p>
<b>Long-term (Basic)</b>	<p>After 25 weeks of short-term disability, the plan will pay 50% of your benefits pay up to \$240,000</p> <p>Subject to approval by Unum, the plan's administrator</p>
<b>Long-term (Buy-up)</b>	Optional buy-up increases the long-term disability benefit to 60% of your benefits pay up to \$300,000

## SPENDING ACCOUNTS

<b>Dependent Day Care Flexible Spending Account (DC FSA)</b> via Optum	<p>Annual maximum covers expenses like day care and elder care for eligible dependents*</p> <p>IRS-approved tax savings on eligible expenses</p> <p>Use it or lose it: these funds do not roll over from year to year — budget and track wisely!</p>
<b>Commuter Spending Accounts (CSA)</b> via WageWorks	<p>Set aside pre-tax monthly for transportation expenses including mass transit passes and parking</p> <p>Convenient payroll deductions and transit passes mailed to your home</p>

## LIFE & ACCIDENT INSURANCE (administered by UNUM)

<b>Basic Life</b>	<p>1x your benefits pay up to a maximum of \$750,000 paid by RELX</p> <p>Option to cap at \$50,000 to avoid paying imputed income tax</p>
<b>Supplemental Life</b>	<p>1x to 8x benefits pay up to a maximum of \$2,100,000</p> <p>Note: Certain coverage levels are subject to Evidence of Insurability</p>
<b>Dependent Life</b>	<p>Spouse or domestic partner (\$25,000/\$50,000/\$100,000)</p> <p>Eligible children (\$5,000/\$10,000)</p> <p>Note: Certain spousal coverage levels are subject to Evidence of Insurability.</p>
<b>Accidental Death &amp; Dismemberment</b>	1x your benefits pay up to a maximum of \$750,000 paid by RELX
<b>Supplemental AD&amp;D</b>	1x to 8x your benefits pay up to a maximum of \$1,000,000

\*The DC FSA cannot be used for healthcare expenses for your dependents. Please see the HC FSA on pg. 2 of this document for healthcare spending account options.

# Financial/More Benefits

## Retirement Benefit Options

**ELIGIBILITY:** Immediate, but you must enroll

### RELX 401(k) via Empower Retirement

The Company offers a 100% per pay period match contribution on the first 5% of pay you contribute

Contribute up to 75% of pay via payroll deduction; subject to IRS limits

Option of before-tax, after-tax or Roth after-tax contributions

100% vested in company matching contributions after three years of service with RELX

Variety of investment options including self-managed brokerage account and advisor service available

### Employee Stock Purchase Plan (EMSIP)

Opportunity to purchase company stock at current market prices via after-tax payroll deductions

No service requirement to participate; no broker's commission or fees on purchases

## Work + Life Benefit Options

### Adoption and Surrogacy Assistance

Eligibility: Full or part-time benefits eligible

100% reimbursement of certain expenses

Maximum of \$7,500 per adoption or surrogacy, subject to plan terms

### Tuition Reimbursement

Eligibility: Six months of continuous service

Management approval required prior to enrolling in class(es)

Course grade requirement: C or better AND receive college credit

Maximum reimbursement per calendar year: \$5,250 for full-time employees; \$1,000 for part-time employees

### Modern Family Benefits

Eligibility: full or part-time benefits-eligible employees with at least six months of service with RELX

Up to 14 weeks of paid time off to bond with a newborn or adopted child(ren) to be used within one year of birth

Up to 8 weeks paid time off per year for elder care, to care for a dependent with special needs or a chronically ill family member (as defined by FMLA)

Up to one week of paid time off per child for foster parents (maximum of two weeks per year)

Up to 10 days of backup child or elder care through Bright Horizons

## WELL-BEING + SUPPORT

### StayWell @ RELX Well-being Incentives

Earn funding toward your HSA or as an e-gift card upon completion of a health assessment, biometric screening and various wellness activities; medically-covered spouses/domestic partners can also earn incentive funding.

### Employee Assistance Program (EAP)

Confidential counseling services for Work/Life challenges including:

- Childcare
- Special needs childcare
- Eldercare
- Substance abuse
- Family management
- Stress, anxiety or depression
- Legal and financial stress

### Legal Plan

Provides you and your dependents cost-effective access to qualified attorneys, and a trusted resource for wills, traffic tickets, real estate matters, and more.

### InfoArmour

Proactive Identity Theft Protection services for RELX employees

## RESOURCES



**RELX Benefits Center**  
relxbenefitscenter.com  
@RELX\_benefits

**Empower**  
relx401kplans.com  
1-888-738-7359

**Optum**  
optumbank.com  
1-800-791-9361

**StayWell @ RELX**  
relx.staywell.com  
1-800-865-9051

For detailed information about any of the benefits listed or to enroll, visit [RELXbenefitscenter.com](https://relxbenefitscenter.com)



**NOTICE** It is important to understand that this guide is not a legal document. It is meant to provide a general description of some medical plans and other benefits that will be in effect for eligible RELX employees and their eligible dependents as of January 1, 2020. Not all benefit plans are described in this guide. Additionally, this guide does not take the place of the applicable documents, including insurance policies, contracts, official plan texts and Summary Plan Descriptions. Should any questions ever arise about eligibility or the nature and extent of your benefits, the formal language of the respective documents as construed and interpreted by the Company will govern. The Company reserves the right to modify, revoke, suspend, terminate, change, increase, or decrease benefit levels and contribution amounts at any time in the future.