



2025 Benefits for Employees

Open Enrollment Guide

Explore Benefits Fit for the Journey Ahead

Open Enrollment: November 11–25, 2024

Welcome to Your Benefits Enrollment for 2025

NEW! Open Enrollment Benefits Site

Check out all the pages of this [benefits microsite](#) for everything you need to know about enrolling for your 2025 benefits. Access the site on your phone, tablet, or computer 24/7.

The strength and ingenuity you cultivate every day allows us to stand out and provide unique experiences with our clients. We strive to offer benefits that match that same mindset.

As a result, we are proud to present your 2025 benefits, which are comprehensive and designed to support you and your family while on your journey here at Goodwin.

Be sure to take your time exploring this Open Enrollment Guide featuring our offered benefits, updated plan details, and enhanced programs for the coming year.

Remember to enroll by November 25 for coverage that starts January 1, 2025.



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QUESTIONS ABOUT YOUR OPEN ENROLLMENT OPTIONS?

[Schedule an online consultation](#) with a member of the Goodwin Benefits team.

Your Enrollment Checklist

Open Enrollment is your once-a-year opportunity to make any necessary changes to your benefits coverage for you and your eligible dependents (spouse or domestic partner and dependent children up to age 26).

- 1. Think about your 2025 health coverage needs, and determine whether they are different from 2024,** for example, you start taking a new prescription, a new child is on the way, or your spouse becomes eligible for health coverage through their employer. Changes in your life may mean that a different health plan will better meet your needs in 2025.
- 2. Compare our medical plan options** to determine which BCBS medical plan best fits your needs for 2025. Check out our convenient [health plan comparison tool](#) to see the benefits and savings from an HSA-qualified plan versus a traditional health plan.
- 3. Flexible spending account elections must be made each year.** Review your out-of-pocket health care expenses and determine the contribution amount that may be appropriate for you.
- 4. Review 2025 plan changes and benefit enhancements.** You can read about the 2025 changes on page 4.
- 5. Thoroughly review the [new benefits microsite](#)** that highlights what you need to know to prepare for Open Enrollment.

Ready to Enroll?

Between November 11 and November 25, 2024, at midnight local time zone:

- Visit Workday, and select the Open Enrollment event in your inbox to enroll in or make changes to your medical, dental, and vision coverage, add or drop a dependent, and enroll in an HSA, FSA, supplementary insurance plan, or any voluntary benefits. Refer to the [Open Enrollment QRC](#) for enrollment instructions.
- Confirm that your personal details (address and phone number) and beneficiary information are up to date, or make updates, if necessary.
- Review your elections to confirm they are correct before submitting.

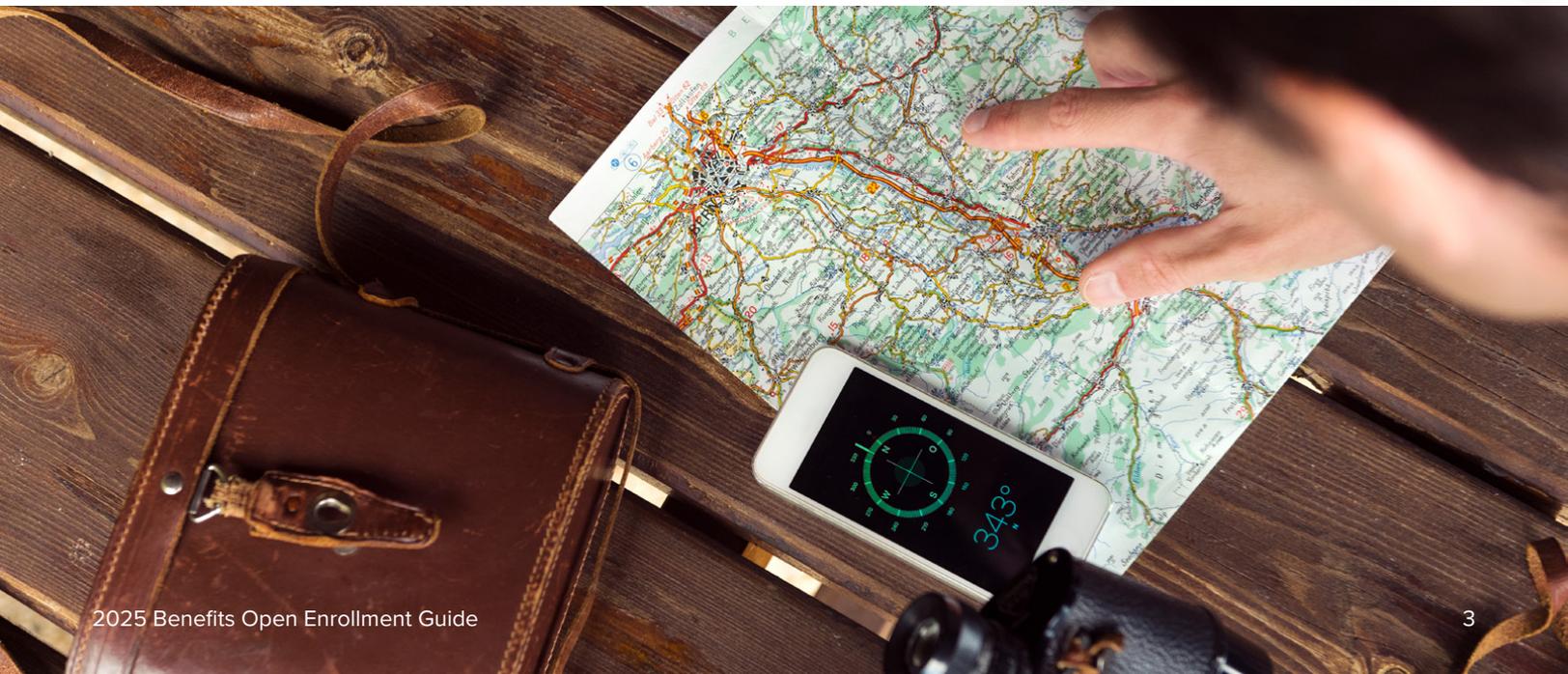
Now Is the Time to Act

If you don't enroll by November 25, 2024, your current medical, dental, vision, HSA election, and voluntary benefits, including voluntary life and AD&D, voluntary disability, critical illness, accident, hospital, and legal insurance, will carry over into 2025.

WHY ENROLL?

You must complete the enrollment process if you want to:

- Add or drop a dependent.
- Enroll in a flexible spending account (FSA) in 2025. Current FSA elections do not carry over into next year.
- Increase your HSA contribution to maximize the IRS limit for 2025.
- Enroll in or make changes in any of the voluntary benefits, including critical illness, accident, hospital indemnity, term life, or legal insurance.



What's New for 2025?

Around-the-Clock Access to Benefits Information

Visit the [benefits microsite](#) for everything you need to know about enrolling for your 2025 benefits. Access the site on your phone, tablet, or computer 24/7.

Prescription Drug Cost-Share Assistance Program

If you're enrolled in the BCBS PPO plan for 2025, you can take advantage of a new prescription program, available through PillarRx.

When you fill an eligible prescription, as determined by BCBS, a manufacturer's coupon will be automatically applied at checkout, and you'll pay \$0 to \$35, depending on the medication.

Enrollment is automatic if you're already using drug coupons. If you're not using coupons for an eligible medication beginning on January 1, 2025, or you or your dependent start taking an eligible medication during the plan year, PillarRx will call you to discuss the program and help you enroll. If you decide to opt out, you'll be responsible for paying 30% of the full retail cost of eligible medications.

View the [list of eligible medications](#) or log in to [bluecrossma.org](#), select **Cost-Share Assistance** under **My Medications**, then **Eligible Medications**.

You can also call PillarRx Care at 636-614-3128 (TTY: 711), Monday through Friday, 8 a.m. to 7 p.m. ET.

Redesigned MyBlue app

The enhanced app offers:

- Detailed claims information that will make it easier to find and understand your claims
- A new section, Find Care, that allows you to more easily search for in-network providers and access telehealth
- Tracking for deductibles and out-of-pocket maximums, benefit descriptions, and fitness and weight-loss reimbursement submissions
- A digital ID card that makes it easier to access and share card information, including the option to add it to your digital wallet

Download the app now ([Google Play](#) | [App Store](#)).

Blue Cross Blue Shield Mind and Body Reimbursement Program

BCBS members are eligible to receive a \$300 reimbursement per family per calendar year, for holistic health treatments, such as massage therapy, tai chi, etc. To receive reimbursement, you'll need to complete the [applicable form](#) and mail it to BCBS by March 31 for expenses incurred in the previous year (for example, expenses incurred in 2025 must be submitted by March 31, 2026, for reimbursement).

SAVE EVEN MORE

You may also save up to 30% when you use alternative health practitioners in the BCBS network who are accredited in their field and meet specific requirements for education, training, and facilities. To search for a network practitioner, go to [bluecrossma.org](#).

Remember that BCBS members are also eligible to receive reimbursement up to \$150 per family per year for eligible fitness expenses and up to \$150 per family per year for eligible weight-loss expenses. The [reimbursement fact sheet](#) provides details on how you can take advantage of the reimbursement programs.

For more information: Sign in to MyBlue at [bluecrossma.com/myblue](#), or call the Member Services number located on your ID card.

Virtual Physical Therapy Through Hinge Health

If you're enrolled in a BCBS plan for 2025, you and your covered dependents, age 18 and older, will have access to free virtual physical therapy through Hinge Health. Therapy is provided for back, joint, and muscle care, as well as personalized pelvic health support.

Accessing Hinge Health Care

Once you complete your application via the Hinge Health app ([Google Play](#) | [App Store](#)), you can receive treatment whenever you need it. You'll have access to an exercise-based physical therapy program with dedicated one-on-one support to keep you moving and help with:

- Reducing pain or improving mobility
- Recovering from an injury
- Preparing for and recovering from surgery
- Staying healthy and pain free

For pelvic health support, you'll work with a specialized care team, including a pelvic floor physical therapist, a women's health coach, and, if needed, a urogynecologist. They'll develop a personalized exercise plan for you, making any necessary changes over the course of your treatment.

2025 Premiums

For 2025, we are pleased to share that we have limited our premium increase to 3.8% for those enrolled in the Blue Cross Blue Shield plans and 10.16% for those enrolled with Kaiser. Delta Dental premiums will increase 4.6%, while VSP rates will remain unchanged. For more about paying for coverage, see page 15. Visit the iNet to view the [2025 premium rates](#).

Voluntary Benefits Enhancements

Through our partnership with Voya, we will continue to offer our suite of critical illness, accident insurance, and hospital indemnity plans. While these programs will not replace your medical insurance coverage, they can help manage your out-of-pocket expenses if you get diagnosed with a serious health condition, are injured in an accident or experience an unplanned hospital stay. In 2025, the list of conditions and benefits our voluntary plans cover will be expanded and offered to you at lower costs.

- **Hospital Indemnity** – Enhancements include an increased hospital admission benefit and an increased number of covered admissions, with the addition of newborn coverage. Mental health substance abuse facilities are also now eligible for reimbursement.
- **Critical Illness** – In addition to stroke, cancer, and type 1 diabetes, covered illnesses now include Parkinson's, multiple sclerosis, and ALS.
- **Accident Insurance** – Covers hospital care when you've been injured in an accident, and now includes a more comprehensive list of care services and richer benefits paid to you for those services.

Review the voluntary benefits section for details and links to plan summaries on page 13.

HSA Contributions

If you're currently contributing to an HSA and want to keep your current contribution amount for 2025, you do not need to take action. Your 2024 contribution election will automatically carry over to next year. If you want to contribute the increased allowable IRS HSA contribution amount for 2025, you will need to make a new election.

Plan Limits

Health Savings Account

The annual contribution limit for health savings accounts (HSAs) is increasing for 2025, and the new limits are as follows:

- **Individual:** \$4,300
- **Two-person and Family:** \$8,550
- **Additional catch-up amount for ages 55+:** \$1,000
- For employees, the Goodwin HSA contribution amount will remain the same for 2025.

Refer to page 9 for more details on enrolling in an HSA.

Health Care Flexible Spending Account (Employees Only)

The 2025 annual contribution limit for a health care flexible spending account (FSA) is \$3,300 with a \$660 rollover maximum. Refer to page 11 for more details on enrolling in an FSA.

Pretax Commuter Benefits (DC and NY Employees Only)

In 2025, the monthly pretax contribution limit is increasing from \$315 to \$325 for transit accounts.

Unum LTC Plan

Going forward, the sole administrator for our Long-Term Care benefits will be Trustmark; Unum will no longer be an option for new LTC policies. Employees currently enrolled in Unum LTC coverage will have the option to keep their Unum policy.

If you're not currently enrolled in the Unum LTC plan and would like to participate in the Trustmark LTC plan, see page 13 for more details on how to enroll.



Eligibility

Whom You Can Cover

In addition to yourself, you may enroll eligible dependents in health benefits through the firm. Eligible dependents include:

- Your legal spouse or qualified domestic partner
- Your biological, adopted, or foster children under age 26, regardless of dependency or marital status
- Your children aged 26 or older who are fully dependent on you for support due to a mental or physical disability and who are indicated as such on your federal tax return

Midyear Changes

It is important to note that you cannot make changes to your benefits after Open Enrollment ends and during the year unless you experience a qualifying life event.

Examples of qualifying life events include:

- Marriage, divorce, or legal separation
- The birth, adoption, placement for adoption, or change in custody of your child
- A dependent child whom you cover reaches age 26
- The death of a dependent
- A change in employment status
- Your spouse or domestic partner gains or loses eligibility for health coverage through their employer
- You receive a court order to provide health care coverage to a dependent child via a qualified medical child support order

Your Medical Plan Choices

Goodwin offers three medical plan options to choose from. Employees may elect to enroll in the preferred provider organization (PPO) plan or the high-deductible health plan (HDHP) through Blue Cross Blue Shield of Massachusetts (BCBS). Additionally, employees in California may opt to enroll in the Kaiser Permanente HMO.

BCBS Options

Both BCBS plans provide you with valuable, affordable coverage and have the following common features:

- **Coverage for you and your eligible dependents for the same care and services, including no-cost preventive care.**
- **Access to the Blue Care national network** of physicians, hospitals, and specialists. Visit bluecrossma.org, and select **Find Care** to find in-network care near you.
- **Coverage for out-of-network services is available**, but you'll pay more; for example, the deductibles are higher for out-of-network care.
- **Prescription drug coverage is included**; CVS Caremark administers the retail pharmacy network for prescription drug benefits and also offers convenient delivery of prescription refills through its mail-order program.
- **Telehealth services with Well Connection** for medical or behavioral health visits using your smartphone, tablet, or computer. Download the MyBlue app on the [App Store](#) or [Google Play](#), or visit bluecrossma.org/telehealth to learn more.



Here Are Ways The Plans Differ

THE BCBS BLUE CARE ELECT PREFERRED PPO

- **Higher premium costs** but a lower annual deductible and a lower out-of-pocket maximum
- **Fixed copays for many services** without having to meet a deductible first; for example, \$25 copay for office visits and \$40 for specialist visits
- **No deductible to meet before the plan covers prescription drugs**
- **You can elect to participate in a health care flexible spending account (FSA)** to put aside tax-free dollars for out-of-pocket health care expenses. See page 11 for details about the FSA.

THE BCBS BLUE CARE ELECT SAVER HDHP

- **Lower premium costs**, but a higher annual deductible and a higher out-of-pocket maximum
- **If you cover yourself and one or more dependents**, you must pay the entire family medical deductible before the plan begins paying benefits for medical care and prescription drugs.
- **The plan pays 90% for covered in-network services** once you meet the deductible.
- **This plan is paired with a health savings account (HSA)**, which allows you to save money tax-free for health care expenses now or to invest and grow tax-free for future health care expenses — even in retirement. See page 9 for details about the HSA.

BCBS Plans at a Glance

The following table highlights the two BCBS options and assumes you'll receive in-network services. Review plan summaries for out-of-network benefits and details about the [Blue Care Elect Preferred PPO](#) and the [Blue Care Elect Saver HDHP](#).

A key factor in deciding which Medical plan to choose is the monthly premiums. You'll find the [2025 premium rates](#) on the iNet, which you can review to ensure that you enroll in the best plan for you and your budget.

	BCBS Blue Care Elect Preferred PPO	BCBS Blue Care Elect Saver HDHP
Annual Deductible		
Individual	\$1,000	\$2,000
Family	\$2,000	\$4,000
Annual Out-of-Pocket Maximum		
Individual	\$3,500	\$5,000
Family	\$7,000	\$10,000
Medical Services		
Preventive care visits	\$0	
Non-preventive office visits	\$25 copay No deductible	10% coinsurance after deductible
Specialist visit	\$40 copay No deductible	10% coinsurance after deductible
Emergency room	\$150 per visit after deductible (waived if admitted)	\$100 per visit after deductible (waived if admitted)
Inpatient hospitalization	\$500 per admission after deductible	10% coinsurance after deductible
Outpatient hospitalization	\$500 per admission after deductible	10% coinsurance after deductible
MRI/CT/PET/nuclear cardiac imaging tests	10% coinsurance after deductible	10% coinsurance after deductible
Prescription Drug Copay (30-Day Supply)		
Tier I	\$10 (no deductible)	\$10 (after deductible)
Tier II	\$35 (no deductible)	\$35 (after deductible)
Tier III	\$60 (no deductible)	\$60 (after deductible)
Mail-Order Drug Copay (90-Day Supply)		
Tier I	\$20 (no deductible)	\$20 (after deductible)
Tier II	\$70 (no deductible)	\$70 (after deductible)
Tier III	\$120 (no deductible)	\$120 (after deductible)

USING NETWORK PROVIDERS SAVES YOU MONEY

To find doctors and facilities in the BCBS Blue Care network, visit bluecrossma.org or download the MyBlue app.

Kaiser Permanente Traditional HMO Plan

(for California Participants Only)

The Kaiser HMO plan is a health maintenance organization (HMO). It offers a managed approach to in-network health care, but with less flexibility than the BCBS plan options. Kaiser is only offered in California. Therefore, if you cover a dependent who lives in another state, you may want to consider a different option.

For the Kaiser HMO, you must designate a primary care physician (PCP). Your PCP manages all your care and refers any specialty care you may need. There are no deductibles for this plan, and there are no claim forms to file. A copay applies for most non-preventive office visits. **Out-of-network care is not covered (except in emergencies).**

Kaiser HMO coverage also features:

- Services covered through designated Kaiser facilities in California only
- Preventive care and telehealth services covered in full with no copay
- Primary care physician (PCP) and specialist office visits limited to a \$25 copay per visit
- Out-of-pocket maximums capped at \$1,500 for individuals and \$3,000 for families
- You may offset your out-of-pocket expenses using your health care FSA

For more information on this plan, please refer to the [Kaiser California benefits summary](#).

STAY WITHIN THE KAISER NETWORK

If you're eligible for the Kaiser network, you can find a network provider at [my.KP.org](https://my.kp.org).



Health Savings Account (HSA)

A health savings account (HSA) is a tax-advantaged savings account that lets you use pretax dollars to pay for eligible health care expenses and future health care needs. HealthEquity will continue to be our HSA administrator. Only those enrolled in the **BCBS Blue Care Elect Saver HDHP** are eligible to enroll in an HSA, and Goodwin makes contributions to your account.

Eligibility

To be eligible for an HSA, participants must meet the following criteria:

- You must be enrolled in a high-deductible health plan.
- You cannot be covered by another health plan, including Medicare.
- You cannot be claimed as a dependent on another individual's tax return.
- You cannot have access to dollars in a general purpose health care FSA, including a spouse's FSA.

If you're eligible, you can elect your HSA contribution for 2025 during Open Enrollment.

Five Advantages of an HSA

- 1. Goodwin will contribute to your HSA**, even if you don't. The firm contribution varies, depending on your coverage level for medical insurance.
- 2. You save on taxes three ways:**
 - **Your HSA contributions are made on a pretax basis**, before federal and state* taxes are calculated. Maximum contribution amounts are subject to annual IRS limits.
 - **Your HSA account can grow tax-free.**
 - **HSA dollars used to pay for qualified health care expenses are not subject to taxes.** (If you use the money in your HSA for non-eligible expenses, a tax penalty of 20% may apply.)
- 3. Your HSA belongs to you — always.** Your account balance is yours to keep and use even if you change health plans or leave Goodwin, and there's no use-it-or-lose-it rule like the one with FSAs. As a result, you can use the HSA to save for future health expenses, including those in retirement.
- 4. You can catch up on savings as you near retirement age.** If you are age 55 or older, you are eligible to make an additional catch-up contribution, up to annual IRS limits, and can save even more in your HSA.
- 5. Once your HSA balance reaches \$1,000, you can invest your money in a variety of investment options to help your savings grow.** You may select from a core group of passively managed Vanguard funds and choose from HealthEquity's AutoPilot, GPS, or Self-driven investment advisor solutions to manage your portfolio. More information about HSAs and HealthEquity HSA investments can be found on the [iNet](#).

Note: In some states including California and New Jersey, HSA contributions are subject to state tax.

HSA Contributions for 2025

When you enroll in an HSA, you choose your contribution amount, and you can change it throughout the year.

Goodwin also contributes to your HSA in January. This contribution, combined with any individual contributions you make, counts toward the overall annual IRS maximum, so be sure to plan your HSA contributions with the Goodwin contribution in mind, to avoid exceeding the annual IRS contribution limit. The HSA election you choose is made as a per-pay-period contribution to your account over the year.

Coverage Type	2025 Maximum Contribution Limit	2025 Goodwin Contribution	2025 Maximum Employee Contribution
Individual coverage	\$4,300	\$750	\$3,550
Two-person coverage	\$8,550	\$1,500	\$7,050
Family coverage	\$8,550	\$1,500	\$7,050
If you are 55+, you can make a catch-up contribution	Additional \$1,000		

Visit [HealthEquity](#) for details on using your HSA to pay eligible expenses and for investing your account for the future.

Using Your HSA to Cover Dependent Expenses

Important notes about tax-dependent children and domestic partners tax-dependent rule: Medical expenses can be paid through a parent's HSA for tax-dependent children up to age 19 or, if a full-time student, up to age 24. When a child is no longer a tax dependent but is on a parent's HDHP plan (up to age 26), out-of-pocket medical expenses cannot be paid from the parent's HSA. The adult child is required to set up their own HSA to pay for medical expenses.

Under IRS rules, individuals with a domestic partner may contribute up to the annual maximum for individual-plus-one or family coverage, but the domestic partner is only eligible to use the funds in the HSA tax-free if he or she is a qualified tax dependent under Internal Revenue Code Section 152.

Dental Coverage

Goodwin's dental plan is the PPO Plus Premier Plan provided through Delta Dental of Massachusetts. The plan provides nationwide coverage and gives you and your covered dependents access to two extensive networks (where three out of four dentists participate):

- **Delta Dental PPO:** Receive the greatest value, with more than 283,000 participating locations
- **Delta Dental Premier:** Receive the greatest flexibility, with the largest dental network in the country and more than 358,000 dentist locations

To find an in-network dentist near you, visit deltadentalma.com. This plan also allows you to visit a dentist outside the network, but you will pay more for care.

Dental Plan Features

The table below highlights your dental in-network benefits. For plan details and out-of-network benefits, view the [Delta Dental summary](#).

Plan Feature	Coverage Amount
Preventive and diagnostic services	No cost; plan covers 100% (no deductible)
Annual deductible	Services that are not preventive and diagnostic are subject to annual deductible and coinsurance
Annual out-of-pocket maximum*	\$2,000 per person (per calendar year)
Orthodontia	
Coinsurance	50%
Lifetime maximum	\$2,000

* The dental plan offers a \$600 rollover maximum, meaning up to \$600 of your unused annual out-of-pocket maximum can be carried over from one plan year to the next.

Vision Coverage

Vision coverage for you and your covered dependents is provided through VSP. You have access to in-network or out-of-network doctors, but it is more beneficial to utilize in-network doctors for low or no out-of-pocket costs. Out-of-pocket costs will be higher if you visit a provider who does not participate in the VSP network.

USING YOUR BENEFIT IS EASY

Create an account on vsp.com to view your in-network coverage, find the VSP network doctor who's right for you, and discover additional savings.

VSP Vision Plan Features

The table below highlights your VSP in-network benefits. For out-of-network benefits, view this [VSP summary](#).

Plan Provisions	VSP Choice Provider Network
WellVision Exam	\$15 copay (one per calendar year)
Prescription eyeglasses (frames and lenses)	\$0 copay (up to frame allowance maximum); every other calendar year for frames, and every calendar year for lenses
Contact lenses instead of glasses	Up to \$60 copay (up to \$200 allowance for contacts) includes lens exam; every calendar year

Flexible Spending Accounts (FSAs)

FSAs allow you to set aside money from your paycheck on a pretax basis to pay for qualified health care and/or dependent care costs. HealthEquity is the firm's FSA administrator. The types of FSAs available to you are the following:

- **General purpose health care FSA** – If you are enrolled in the BCBS PPO Plan, you may participate in this account and use pretax dollars to pay for eligible medical, vision, and dental expenses.
- **Limited purpose health care FSA** – If you are enrolled in the BCBS Blue Care Elect Saver HDHP, you can participate in this account and use tax-free dollars for eligible dental and/or vision expenses. Participation in this FSA also allows you to contribute to an HSA and maximize those pretax funds for medical expenses or investing for the future.
- **Dependent care FSA** – This account allows you to use pretax dollars to be reimbursed for eligible child care for dependents under age 13 or adult day care for a disabled spouse or an adult dependent whom you claim. The care provided must be necessary in order for you to work. *If you are married, your spouse must either work, attend school full-time, be looking for work, or be disabled.*

Please note that, due to IRS nondiscrimination testing rules, highly compensated employees are ineligible to participate in the dependent care flexible spending account.

Enrollment note: If you are currently enrolled in FSA(s) for 2024, you must reenroll and elect 2025 FSA contribution amount(s). FSA elections **do not** automatically carry over.

FSAs Are Non-Refundable

When you determine your 2025 FSA election amounts, it is important to remember the IRS use-it-or-lose-it rule that states FSA funds remaining at the end of the plan periods are forfeited. The IRS has placed the following restrictions for FSAs:

- **HC FSA carryover:** Eligible 2025 unused health care FSA funds, up to a maximum of \$660, will carry over into a 2026 general purpose or limited purpose health care FSA.
- **DC FSA grace period:** You have until April 15, 2026, to submit your eligible 2025 dependent care FSA expenses incurred between January 1, 2025, and March 15, 2026. Any funds left in your account after April 15, 2026, will be forfeited. Health care FSA funds cannot be used for eligible dependent care FSA expenses or vice versa.
- **Irrevocable election:** The amount you elect for the 2025 plan year is irrevocable. You will only be permitted to change your election if you experience a qualifying life event (e.g., birth or adoption of a child).
- **HSA coordination:** If you are currently enrolled in the 2024 general purpose FSA and you enroll in the BCBS Blue Care Elect Saver High-Deductible Health Plan (HDHP) for 2025, and if you have a balance in your 2024 general purpose FSA as of December 31, 2024, remaining funds up to \$640 after April 15, 2025, will carry over into a 2025 limited purpose health care FSA. Any 2024 carryover funds will not be available in your 2025 limited purpose health care FSA until the claims run-out period closes on April 15, 2025, and all claims have been processed. This will be completed on or around April 30, 2025.

The following table summarizes the key provisions of FSA programs for 2025.

	General Purpose Health Care (not for those enrolled in an HDHP)	Limited Purpose Health Care (for those enrolled in an HDHP)	Dependent Care
Annual minimum election	\$100	\$100	\$100
Annual maximum election	\$3,300	\$3,300	\$5,000
Examples of eligible expenses	Medical, dental, and vision copays Prescription copays Deductibles Coinsurance	Dental and vision copays Deductibles Coinsurance	Day care center for child or adult Nursery school Nanny, au pair, babysitter Providers for disabled dependent or spouse
Eligible dependents	Any individual you claim as a dependent on your federal income tax return	Any individual you claim as a dependent on your federal income tax return	Children under age 13 Your spouse, if mentally or physically incapable of caring for him/herself Any other person who is your qualified IRS dependent, who is mentally or physically incapable of caring for him/herself

Goodwin-Provided Financial Protection

Goodwin automatically provides these financial protection benefits for you at no cost to you. Coverage is through Unum. For more information on these policies, visit the Human Resources pages on the iNet, or email benefitsdepartment@goodwinlaw.com.

- **Group basic term life insurance:** Coverage is equal to 2 times annual base salary, up to a maximum of \$600,000.
- **Group accidental death and dismemberment (AD&D) insurance:** Coverage is equal to 2 times annual base salary, up to a maximum of \$600,000.
- **Group short-term disability insurance:** Benefits are paid for a maximum of 180 calendar days if you are deemed disabled by Unum.
- **Group long-term disability insurance:** If your disability lasts beyond 180 calendar days, this benefit replaces 60% of your pre-disability base pay, up to a maximum benefit of \$20,000 per month for associates, officers, and directors and \$15,000 per month for all other employees.

Voluntary Term Life

Goodwin offers voluntary term life insurance through Unum that lets you supplement the basic life insurance coverage you automatically receive from Goodwin.

You must purchase coverage for yourself in order to cover your spouse and/or child. The following coverage is available for you to elect during Open Enrollment:

- **Employee voluntary term life insurance** – You may purchase additional term life insurance coverage for yourself of up to 5 times your annual base salary, not to exceed \$500,000, subject to evidence of insurability (EOI). Rates are based on your age at the time your coverage goes into effect.
- **Spouse or domestic partner voluntary term life insurance** – You may purchase term life insurance coverage for your spouse or domestic partner of up to \$250,000, subject to EOI. Please note that rates for a spouse or domestic partner coverage are based on your age at the time the coverage goes into effect.
- **Child voluntary term life insurance** – You may purchase \$10,000 of term life insurance coverage for your child(ren) up to age 26 (the benefit is \$1,000 if your child is less than 6 months old). Children are not subject to EOI. The premium rate for child term life coverage is \$2 per month, regardless of the number of children covered.

Voluntary Supplemental Long-Term Disability

Goodwin provides group long-term disability coverage automatically for you. However, you may wish to supplement this coverage by purchasing a buy-up option through Unum that provides 75% insurable income replacement in the event of disability.

Voluntary LTD features:

- A 25% discount because this is an employer-sponsored program
- Tax-free benefits
- Individually owned coverage that you can take with you if you leave the firm
- No increase in premiums until age 65
- If you are currently enrolled in voluntary LTD and your pay has increased in 2024, you will automatically receive an increased benefit for a higher premium, unless you opt out of coverage during Open Enrollment.

Enrolling in Voluntary LTD

If you're not currently enrolled in Voluntary LTD and would like to be, you can elect Voluntary LTD coverage during this year's Open Enrollment period.

If you're already enrolled in Voluntary LTD, you can use this year's Open Enrollment as an opportunity to increase your coverage.

Long-Term Care

Trustmark will continue to administer our long-term care (LTC) benefits.

Enrolling in LTC

To enroll, visit [Goodwin.SolveLTC.com](https://www.Goodwin.SolveLTC.com).

If you were hired prior to September 12, 2023 and would like to enroll in long-term care benefits for the first time, your coverage will be subject to medical underwriting. This means that your medical history will be reviewed and used to determine the coverage you are eligible for and the associated premium to be charged.

Employees hired after September 12, 2023 will be considered newly eligible and may enroll in LTC benefits with limited medical underwriting. If you are newly eligible, you will receive additional communications from Trustmark and the Goodwin Benefits Department on how to enroll.

If you have any questions about the Goodwin Long-Term Care (LTC) Solution, please contact our administrative service provider at 877-513-1480 or via email at LTC@nfp.com.

Voluntary Insurance through Voya

Voluntary insurance can offer another layer of financial protection for serious accidents or illnesses. Your medical plan insurance is your primary source for comprehensive coverage for the care you need to stay healthy or to treat an injury or illness. But, when you're sick or injured, you may also need help with other expenses, like child care, groceries, and everyday household bills. That's where voluntary insurance can step in.

Plans Available to You

- **Voluntary Accident Insurance:** If you experience a covered accident, this insurance pays benefits for specific injuries and events, such as surgery, hospital admission and confinement, and medical equipment. The benefit depends on the type of injury and treatment received. For more information and the cost of coverage, please refer to the [Summary of Benefits](#).
- **Voluntary Critical Illness Insurance:** This coverage pays a lump-sum benefit if you are diagnosed with a covered illness or condition. For more information and the cost of coverage, please refer to the [Summary of Benefits](#).
- **Voluntary Hospital Indemnity Insurance:** This plan pays a daily benefit if you have a covered stay in the hospital, critical care unit, or rehabilitation facility. For more information and the cost of coverage, please refer to the [Summary of Benefits](#).

Enrolling in Voluntary Insurance

During Open Enrollment, you may elect voluntary supplemental insurance for yourself, your spouse or domestic partner, and/or child(ren) up to age 26, with no evidence of insurability (medical underwriting) required.

Note that you can elect voluntary insurance at any time during the year, but coverage will only apply to accidents, diagnoses, or hospital stays that occur on or after the coverage start date. Coverage may also be subject to medical underwriting.

Legal Insurance

Legal insurance isn't just for the serious issues. It's for your everyday needs too. Some things are planned, like creating a will, and others are more unexpected — like fighting a traffic ticket or getting your deposit back from a difficult landlord. With legal insurance, network attorney's fees are 100% paid-in-full for most covered matters.

Enrolling in Legal Insurance

During Open Enrollment, you may purchase an UltimateAdvisor legal insurance plan through ARAG effective January 1, 2025. The legal insurance plan covers your spouse or domestic partner and eligible dependent children.

Visit the [iNet](#) to learn more about the legal insurance plan.

Benefits Available Anytime

Goodwin automatically provides a variety of benefits and services to enhance your well-being any time of year. For more details on these benefits, visit the [iNet](#).

One Medical: 24/7 access to in-person or over-the-phone medical care. Goodwin covers the cost of membership fees for you and your eligible dependents. One Medical is considered in-network for the BCBS MA medical plans.

Bright Horizons Family Solutions®: Family support to help guide you through all personal and professional stages of life, including priority enrollment and discounted tuition for our child care centers, one-on-one dedicated support to assist with family care needs, college coaching from admission experts, pet care services through Rover or Wag!, and additional resources.

Cleo: Family planning services designed to help parents from the early stages of preconception and planning to support for pregnancy, returning to work, parenting, and finding vetted child care providers for children ages 1 to 12.

Pet insurance: Goodwin offers group discounts on pet insurance for your household pets through Spot. Spot offers a 10% discount on the first pet and a 10% discount on any additional pets (up to a maximum of a 20% discount).

Carrot Fertility: Free access to expert guidance on inclusive fertility, hormonal health, and family-forming benefits, including fertility health, assisted reproduction like IVF, elective preservation like egg or sperm freezing, adoption, surrogacy, pregnancy, postpartum, and early parenting. Goodwin provides reimbursement benefits through Carrot for eligible adoption and surrogacy, elective cryopreservation, and doula and postpartum services expenses for eligible employees.

Wellthy: Care support for you and your family with problems big or small, including Community, a private space for caregivers to connect, share stories, ask questions, and exchange knowledge across a range of care topics.

Health Advocate: Support from a team of medical doctors and administrative experts for assistance with finding the best care, obtaining services for elderly parents, addressing insurance claims and/or billing issues, and more, at no cost to you.

Employee assistance program (EAP): Guide is your free and confidential concierge-level employee assistance program (EAP) offered through BHS. You have up to eight (8) free, confidential counseling sessions, well-being coaching, and unlimited work-life services. A Guide Care Concierge will ask you questions to personalize a care plan and connect you with a licensed clinician, mental health counselor, or professional coach, depending on your situation. Referrals for long-term counseling, community-based resources, or a treatment or provider facility are also available.

Behavioral Health Consultants: Free, confidential consultations with a U.S. behavioral health consultant for support for a range of topics, including stress management, burnout, goal setting, relationships, and everyday challenges.

Headspace: A guide to mindfulness by helping to reduce stress, increase focus, and improve sleep with hundreds of meditation exercises. Receive free access for the Headspace meditation app by enrolling with your Goodwin email address.



Virtual Medical Care Anywhere

If you need medical care and it's not life-threatening or an emergency, you can access One Medical or the telehealth feature of the plan you're enrolled in. We encourage you to register ahead of time so you'll be ready when you do need care.

With telehealth, your copay is \$0* for a video visit with a U.S.-licensed doctor for convenient, secure care through your phone or computer. Consider using telehealth services when you have:

- Nonemergency medical conditions, such as flu, sore throat, rashes, allergies, and ear, eye, or sinus infections
- Minor rashes
- Prescriptions sent directly to your pharmacy

**For the HDHP plan, your copay is \$0 after deductible for a primary care visit or 10% coinsurance after deductible for other preferred providers.*

How to Get Started

Medical Plan	Telehealth Service	How to Access
BCBS	Well Connection	Use the MyBlue app for medical virtual visits. Download the app, or go to bluecrossma.com/telehealth , and register with your BCBS ID number.
	One Medical	One Medical is considered in-network for BCBS medical plans only and offers access to same-day urgent care appointments in person or a virtual health visit. Visit onemedical.com/myhealth to register using your email address and code GOODXMED. Download the One Medical app, available in the App Store or Google Play .
Kaiser	Kaiser telehealth	Call the phone number on the back of your ID card 24/7, or log in to your Kaiser account at my.kp.org or the Kaiser app to make an appointment. You may also schedule an appointment with Kaiser 24/7 by calling 866-454-8855.

How You Pay for Coverage

The firm shares in the cost of some programs with you while you are responsible for paying the full cost of others.

The chart below summarizes how premiums are charged and how they are treated for tax purposes. You can view the [2025 premium rates](#) on iNet.

Benefit Plan	Who Pays	Tax Treatment
Medical	You & The Firm	Pretax
Dental	You & The Firm	Pretax
Vision	You	Pretax
Health Savings Account	You & The Firm	Pretax
Flexible Spending Accounts	You (Non-partners only)	Pretax
Critical Illness	You	After-tax
Accident Insurance	You	After-tax
Hospital Indemnity	You	After-tax
Long-Term Care	You	After-tax
Group Long-Term Disability	The Firm	N/A
Voluntary Group Long-Term Disability	You	After-tax
Group Term Life and AD&D Insurance	The Firm	N/A
Voluntary Life Insurance	You	After-tax
Commuter Benefits	You	Pretax (NY & DC); After-tax (all other locations)
Legal Insurance	You	After-tax
401k Retirement Plan	You	Pretax & Roth (after-tax)

Contacts

We recommend you visit the [iNet](#) Benefits page to look for any unanswered questions you may still have. It's the place to go if you are looking for specific information on our benefit programs, links to vendors' websites, and various documents and forms.

To access the Benefits page from the [iNet](#) home page, click on **Human Resources**, and then click on **Benefits – US** from the menu on the left. If a specific topic is not addressed in this guide, email benefitsdepartment@goodwinlaw.com.

Benefits Vendors			
Plan	Vendor	Website / Email Address	Phone Number
Behavioral Health Consultants	BHS	iNet	
Bright Horizons Family Solutions®	Bright Horizons	clients.brighthorizons.com/goodwinlaw (First-time users: Username: GoodwinLaw; Password: gpbackup)	877-242-2737
Cleo Considering, Cleo Baby, and Cleo Kids	Cleo	iNet	
Dental	Delta Dental	deltadentalma.com	800-872-0500
Flexible Spending Accounts (FSAs)	HealthEquity	healthequity.com	877-924-3967
Guide Employee Assistance Program (EAP)	BHS	portal.bhsonline.com (Username: Goodwin)	888-784-5665
Headspace Meditation App	Headspace	work.headspace.com/goodwinprocter/member-enroll (Use your Goodwin email address to enroll)	
Health Savings Accounts (HSAs)	HealthEquity	healthequity.com	866-346-5800
Health Advocate	Health Advocate	members.healthadvocate.com/Home	866-695-8622
Mail-Order Pharmacy	CVS Caremark		877-817-0477
Medical PPO and HDHP	Blue Cross Blue Shield	bcbsma.com	800-262-2583
Medical HMO	Kaiser	kaiserpermanente.org	800-464-4000
Medical	One Medical	onemedical.com/sponsored-membership (Use your Goodwin email address to enroll)	888-663-6331
Vision	VSP	vsp.com	800-877-7195
Critical Illness, Accident, and Hospital Indemnity	Voya	presents.voya.com/EBRC/GoodwinLaw	877-236-7564
401(k)	Fidelity Investments	401k.com	800-890-4015
Legal Insurance	ARAG	araglegal.com/plans (Access Code: 18946gp)	800-247-4184
Life, AD&D, and Disability Insurance	Unum	benefitsdepartment@goodwinlaw.com	866-679-3054
Long-Term Care Insurance	Trustmark	LTC@nfp.com	877-513-1480
Wellthy	Wellthy	wellthy.com/goodwinlaw	877-588-3917

If there are any discrepancies between this Guide and the legal plan documents, the legal plan documents will govern. The firm reserves the right to change or terminate any plan, the terms of any plan, or cost-sharing arrangement at any time.