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2021 PARTNERS

Welcome!

As part of the team at Quinn Emanuel Urquhart & Sullivan, LLP, you are offered a wide variety of employee benefits. In this guide, you'll find detailed information on the benefits available to you and your dependents. Review the following information and if you have any questions on your benefits, contact the Benefits Department or the appropriate carrier listed at the end of this guide.

Eligibility

You are eligible for Quinn Emanuel Urquhart & Sullivan, LLP medical benefits on your date of hire. All other benefits are effective on the first of the following month when you are an active full-time partner.

You may enroll your eligible dependents in the same plans you choose for yourself. Eligible dependents include your legal spouse or domestic partner (same sex or opposite sex) and your children up to age 26.

When to Enroll

You can enroll for coverage within 30 days of your eligibility date or during the Annual Open Enrollment period.

If you are enrolling during the firm's annual open enrollment period, any changes you make will begin on September 1st.

If you don't enroll for coverage within 30 days of your eligibility date, you will not receive health coverage during the plan year, unless you have a qualified change in family status (see Making Changes for details).

Making Changes

The choices you make when you are first eligible are in effect for the remainder of the plan year, which ends on August 31. Once you enroll in coverage, you must wait until the next open enrollment period to change your benefits or add/remove coverage for dependents, unless you have a qualifying event in family status as defined by the IRS.

Here are some examples of Qualifying Events:

- Marriage, divorce, legal separation, annulment or death of spouse
- Birth, adoption or placement for adoption
- Change in your residence or workplace (if your benefit options change)
- Loss of other health coverage
- Change in your dependent's eligibility status because of age, student status or any similar circumstance

If you have a qualifying event, you have 30 days to make changes to your coverage.

Keep this in mind: Any change you make to your coverage must be consistent with the change in status.

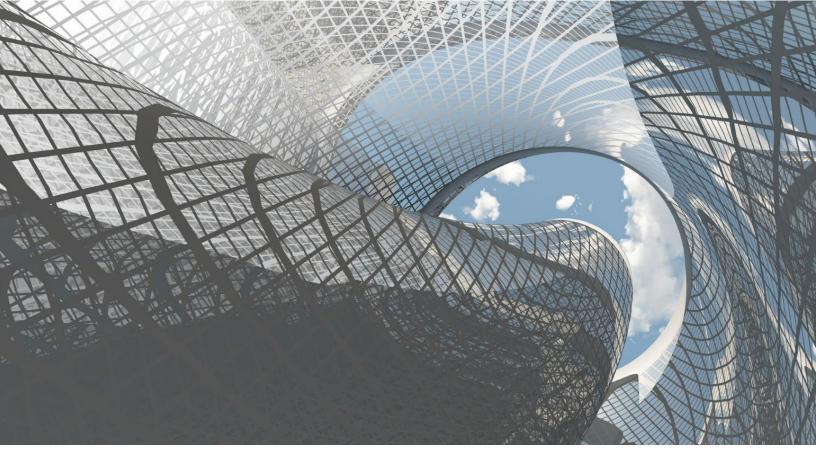
Medical Coverage

For your convenience and flexibility, you have a choice of several Cigna medical plans. Review this table and choose the plan that's right for you and your dependents. Premiums are paid by the firm and reflected on partner's K-1 as taxable income.

Plan Features	Cigna Choice Fund HDHP Cigna Open Access Plus Open Access Plus PPO (OAP) PPO		Open Access Plus PPO (OAP) PPO		Cigna Open Access-In HMO (All states except CA & FL)	Cigna HMO (CA Only)
	In-Network	Out-of- Network	In-Network	Out-of- Network	In-Network Only	In-Network Only
Calendar Year Deductible	\$2,000 Individual \$4,000 Family	\$4,000 Individual \$8,000 Family	\$500 Individual \$1,000 Family	\$750 Individual \$1,500 Family	None	None
Calendar Year Out-of-Pocket Maximum	\$5,850 Individual \$11,700 Family	\$11,700 Individual \$23,400 Family	\$2,000 Individual \$4,000 Family	\$2,000 Individual \$4,000 Family	\$1,500 Individual \$3,000 Family	\$1,500 Individual \$3,000 Family
Primary Care Visit	20% after deductible	40% after deductible	\$25 copay	30% after deductible	\$25 copay	\$25 copay
Specialist Visit	20% after deductible	40% after deductible	\$25 copay	30% after deductible	\$25 copay	\$25 copay
Preventative Care	Covered in full	Not covered	Covered in full	30% after deductible	Covered in full	Covered in full
Emergency Room	20% after deductible	20% after deductible) copay f admitted)	\$100 copay (waived if admitted)	\$100 copay (waived if admitted)
Urgent Care	20% after deductible	40% after deductible	\$50 copay (waived if admitted)		\$50 copay (waived if admitted)	\$50 copay (waived if admitted)
Outpatient Hospital Services	20% after deductible	40% after deductible	10% after deductible	30% after deductible	\$100/facility visit	\$100/facility visit
Inpatient Hospital Services	20% after deductible	40% after deductible	\$250/admission, plus 10% after deductible	\$250/admission, plus 30% after deductible	\$240/admission	\$240/admission
Outpatient Mental Health	20% after deductible	40% after deductible	\$25 copay	30% after deductible	\$25 copay	\$25 copay
Inpatient Mental Health	20% after deductible	40% after deductible	\$250/admission, plus 10% after deductible	\$250/admission, plus 30% after deductible	\$240/admission	\$240/admission
Prescription Drugs: Retail (up to a 30-day supply)						
Generic	\$15	50% up to \$250	\$15	30% after \$250	\$10	\$10
Brand Formulary	\$30	50% up to \$250	\$30	30% after \$250	\$20	\$20
Non-Formulary	\$45	50% up to \$250	\$45	30% after \$250	\$40	\$40
Prescription Drugs: Mail Order (up to a 90-day supply)						
Generic	\$30		\$30		\$20	\$20
Brand Formulary	\$60	Not covered	\$60	Not covered	\$40	\$40
Non-Formulary	\$90		\$90		\$80	\$80

This is only a brief summary of the plans. For more details, including limitations and exclusions, please review on the Intranet or contact the Benefits Department for a Summary Plan Description.

2021 PARTNERS



Dental Coverage

California partners have a choice of two Cigna dental plan options. The Cigna dental plans cover a portion of approved dental procedures.

Plan Features	Total Cigna DPPO		
Pidii rediules	In-Network	Out-of-Network*	
Calendar Year Deductible	\$50 pc	er person	
(waived for Preventive Services)	\$150 per family		
Calendar Year Maximum	\$5,000		
Diagnostic and Preventive Services	Covered in full	Covered in full	
(e.g., X-rays, cleanings, exams)	Covered in full		
Basic and Restorative Services	80%	80%	
(e.g., fillings, extractions, root canals)	80%		
Major Services (e.g., dentures, crowns, bridges)	50%	50%	
Orthodontia (deductible waived)	50%	50%	
Orthodontia Lifetime Maximum (dependent children to age 19)	\$1,000	\$1,000	

^{*}Note: If you visit an out-of-network provider, you are responsible for charges above usual, customary and reasonable (UCR) limits

The Patient Charge Schedule for the Cigna DHMO (CA Only) dental plan applies only when covered dental services are performed by your Network Dentists, unless otherwise authorized by Cigna Dental as described in your plan documents. Not all Network Dentists perform all listed services. Check with your Network Dentist in advance of receiving services.

	Total Cigna DHMO (CA Only) Network Only	
Code	Procedure	Patient Charge
D9310	Consultation	\$0
D9430	Office visit	\$5
	X-rays intraoral – complete series of radiographic images (limit 1 every	
D0210	3 years)	\$0
D0431	Oral cancer screening	\$50
D1110	Cleaning (2 per calendar year)	\$0
D2140/50/60-1	Fillings: Amalgam 1-4 surface(s)	\$0
D2391-4	Fillings: Resin-based composite (posterior) 1-4 surface(s)	\$35/\$45/\$65/\$80
D2710	Crown - Resin, laboratory	\$40
D2720	Crown - Resin with high noble metal	\$60
D3330	Molar Root Canal	\$100
D4260	Osseous Surgery - 4 or more teeth per quadrant	\$150
	Implant/abutment supported removable denture for completely	
D6110	edentulous arch	\$375
	Periodic orthodontic treatment visit (contract)	
	Children (up to age 19):	\$1,608
	24-month treatment fee =	\$67/month
D8670	Charge per month for 24 months =	
	Adults:	\$1,800
	24-month treatment fee = Charge per month for 24 months =	\$75/month

This is only a brief summary. See the complete Cigna DHMO Patient Charge Schedule for complete details.

Vision Coverage

Protect your eyesight with EyeMed vision coverage. Visit in-network doctors to save on out-of-pocket expenses. You can find in-network providers at eyemed.com. EyeMed also offers the following perks just for being a member.

 Discounts on sunglasses: \$20 off, or \$50 off your purchase of \$200 or more at Sunglass Hut.

EyeMed Vision

Member Login:

eyemedvisioncare.com/member

Provider Locator:

https://eyedoclocator.eyemedvisioncare.com/member/en/ Vision PPO Network Name: "Insight"

	EyeMed		
PLAN FEATURES	In-Network	Out-of-Network	
	You pay:	Plan reimburses you:	
Exam – every 12 months	\$10	Up to \$40	
	No copay; \$190 allowance,		
Frames – every 12 months	20% off balance over \$190	Up to \$133	
Lenses – every 12 months			
Single Vision	\$10 copay	Up to \$30	
Bifocal	\$10 copay	Up to \$50	
Trifocal	\$10 copay	Up to \$70	
Lenticular	\$10 copay Up to \$70		
Contact Lenses – every 12 months			
(in lieu of lenses and frames)	No copay; \$200 allowance		
Elective	15% off balance over \$200	Up to \$200	
Medically Necessary	Covered in full	Up to \$210	

Your Cost for Health Coverage

The Firm advances the monthly cost of health care to partners and the annual costs will appear on your Partner K-1 statements as earned income.

Benefit Plan	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Medical				
Cigna HMO (CA Only)	\$676.19	\$1,573.44	\$1,219.99	\$1,933.73
Cigna Open Access-In HMO	\$821.23	\$1,916.27	\$1,484.89	\$2,355.92
Cigna OAP	\$987.84	\$2,284.95	\$1,945.69	\$3,242.82
Cigna Choice Fund HDHP	\$671.11	\$1,561.33	\$1,211.73	\$1,921.78
Dental				
Cigna DPPO	\$64.49	\$132.04	\$146.80	\$215.45
Cigna DHMO (CA Only)	\$14.89	\$29.44	\$25.37	\$41.96
Vision				
EyeMed	\$6.87	\$13.05	\$13.73	\$20.19

Keep Track of Your Health with myCigna

Organize Your Health Plan Information with myCigna

myCigna.com is a simple way to personalize, organize, and access your important plan information. Register at myCigna.com and login anytime to:

- Manage and track claims
- View ID Card information
- Find doctors and compare costs and quality ratings
- Review your coverage
- Track your account balances and deductibles
- Refill your prescription drugs online and check order status with Cigna Home Delivery Pharmacy

Get started today! Register at myCigna.com or download the myCigna Mobile App for Apple, Android, Kindle Fire, or Blackberry.

What Matters Most? Your Health

Finding your way on your health journey can be challenging, but Cigna is here to help.

Cigna offers personalized support to meet you where you are on your health journey and get you where you need to be. You'll receive the information, tools, and inspiration you need to take greater charge of your health. It's easy, fun, and available at no additional cost to you!

- Take a simple, game-like online assessment that helps you identify your health goals
- Keep track of all your important health information—BMI, blood pressure, cholesterol, and more
- Discover popular health & wellness apps that work best for you—then track your progress
- Find fun new ways to better manage your health

Your health matters. Cigna is here to make your journey easier. Visit myCigna.com from your desktop, smartphone, or tablet to get started.

MotivateMe Rewards Your Healthy Actions (plan participation is limited to employees, not dependents)

Being healthy doesn't happen overnight; it takes consistency in making good choices every day. To encourage you on your health journey, Cigna's MotivateMe program allows you to earn gift card rewards by participating in a variety of activities, including:

- Health assessment
- Annual preventive exams

Getting started is easy! Visit myCigna.com and select Incentive Awards Program or call 800-244-6224 to:

- Review detailed instructions on how the MotivateMe program works
- View a list of eligible goals and matching rewards
- Check and track your completed goals and earned rewards

Make Smarter Medical Decisions with Cigna One Guide

Get the most out of your medical plan with Cigna One Guide. This service will assist you in making more informed choices, so you can stay healthy and save money. You can access Cigna One Guide through the myCigna mobile app or call 800-244-6224 to get answers to your health plan questions. Your One Guide team will help you:

- Understand your coverage and how it works
- Locate in-network doctors and facilities
- Connect with health coaches, pharmacists and more
- Receive dedicated one-on-one support for complex health issues
- Maximize your benefits and earn incentives
- Get cost estimates and service comparisons

Finding an In-Network Doctor Is Easy

Is your doctor or hospital in the Cigna network? Cigna's online directory makes it easy to find who (or what) you're looking for.

4 Simple Steps to Find a Doctor or Facility

Step 1

Go to Cigna.com and click on "Find a Doctor, Dentist, or Facility" at the top of the screen. Then Select "Plans through your employer or school." (If you're already a Cigna customer, log in to myCigna.com or the myCigna* app to search your current network. To search other networks, use the Cigna.com directory.)

Step 2

Enter the geographic location you want to search.

Step 3

Select specialty or type of doctor.

Step 4

Enter geographic location you reside in and select medical plan.

That's it! You can also refine your search results by distance, years in practice, specialty, languages spoken, and more.

Cigna Virtual Care

WHEN LEAVING THE HOUSE IS EASIER SAID THAN DONE.

Get care whenever and wherever with medical and behavioral/mental health virtual care.

Life is demanding. It's hard to find time to take care of yourself and your family members as it is, never mind when one of you isn't feeling well. That's why your health plan through Cigna includes access to medical and behavioral/mental health virtual care.

Whether it's late at night and your doctor or therapist isn't available, or you just don't have the time or energy to leave the house, you can:

- Access care from anywhere via video or phone.
- Get medical virtual care 24/7/365 even on weekends and holidays.
- Schedule a behavioral/mental health virtual care appointment online in minutes.
- Connect with quality board-certified doctors and pediatricians, as well as licensed counselors and psychiatrists.
- Have a prescription sent directly to your local pharmacy, if appropriate

Medical Virtual Care

Board-certified doctors and pediatricians can diagnose, treat and prescribe most medications for minor medical conditions, such as:

- Acne
- Allergies
- Asthma
- Bronchitis
- Cold and flu
- Constipation
- Diarrhea
- Earaches
- Fever
- Headache
- Infections
- Insect bites

- Joint aches
- Nausea
- Pink eye
- Rashes
- Respiratory infections
- Shingles
- Sinus infections
- Skin infections
- Sore throats
- Urinary tract infections

Convenient? Yes. Costly? No.

Medical virtual care for minor conditions costs less than ER or urgent care center visits, and maybe even less than an in-office primary care provider visit.

Behavioral/Mental Health Virtual Care

Licensed counselors and psychiatrists can diagnose, treat and prescribe most medications for nonemergency behavioral/mental health conditions, such as:

- Addictions
- Bipolar disorders
- Child/adolescent issues
- Depression
- Eating disorders
- Grief/loss
- Life changes
- Women's Issues

- Men's Issues
- Panic Disorders
- Parenting Issues
- Postpartum depression
- Relationship and marriage issues
- Stress
- Trauma/PTSD

Cigna Virtual Wellness Care - MDLIVE.

Wellness Screenings/Preventive Care can be done anywhere via phone, tablet or computer.

Virtual wellness screenings through MDLIVE are now available to all Cigna members. There is NO cost for the screening and lab work that is required. Your screening is provided by a board-certified MDLIVE provider. Simply make your appointment online through www.mycigna.com and go for a quick visit to a lab for your blood work and biometrics. The rest is completed online and via video or phone, wherever it's most convenient for you.

It's important that you proactively identify health issues such as high cholesterol and other risk factors before they become serious and costly. A summary of your preventive care visit will be provided to you for your records.

MDLIVE® = medical and behavioral/mental health virtual care. 888.726.3171

STEP 1	Complete your MDLIVE online health assessment.	
STEP 2	Choose an in-network lab and schedule an appointment.**	
STEP 3	Choose an MDLIVE provider and schedule your virtual visit.	
STEP 4	Go to your lab appointment. You'll receive a notification when the results are available in the MDLIVE customer portal.	
STEP 5	Attend your virtual visit from anywhere via video or phone. After your visit, you'll receive a summary of your screening results for your records.	

Cigna Behavioral Health also provides access to video-based counseling through Cigna's network of providers. To find a provider:

- Visit myCigna.com, go to "Find Care & Costs" and enter "Virtual counselor" under "Doctor by Type"
- Call the number on the back of your Cigna ID card 24/7

CIGNA BEHAVIORAL EXPANDS ITS NETWORK TO INCLUDE NEW VIRTUAL PROVIDERS IN CALIFORNIA.

Utilize your behavioral benefits to access care.

Talkspace

Available nationwide

Connect with a licensed therapist or psychiatrist online, by video or text using Talkspace, available for Cigna Behavioral customers, ages 13 and up.

To schedule an assessment, go to talkspace.com/Cigna.



Meru Health

Only available to customers in CA, CO and AZ

This 12-week virtual counseling program offers support for people suffering from depression, anxiety or burnout. The program includes live virtual counseling and private texting with licensed therapists, as well as an online peer support community and other educational resources for ages 18 and above.

To schedule your free screening session, go to meruhealth.com/Cigna

NOCD

Only available to customers in CA, MI and NC

Get personalized treatment for obsessive compulsive disorder (OCD) through virtual live therapy and app-based digital tools, including texting with a therapist. Available to Cigna Behavioral customers ages 6 and up.

For a free assessment, go to **TreatMyOCD.com**.

The health information line is here for you 24/7

It can be a fever in the middle of the night or a question about a popular medication. Whether you're looking for general information or have a specific health concern, the health information line is open 24 hours a day, seven days a week.

Dial 800.Cigna24 and you'll be connected with a nurse who is ready to help answer your health questions.

And there's more.

You can also listen to hundreds of podcasts in English and Spanish on almost any health topic to be better informed about your health. To listen:

- Select a topic and listen via livestream. Visit myCigna.com for more information.
- Call the health information line, follow the voice prompts, enter a code for the audio library, and you will be listening in seconds.



401(k)

You are eligible to participate in a Merrill Lynch 401(k) plan after six months of employment on the first day of the next calendar quarter. Enrollments are effective on a quarterly basis. Once enrolled, you may drop contributions to zero at any time, but can only adjust up or down on the calendar quarter. An employer match is not available.

Merrill Lynch offers Benefits OnLine to help plan for your future. Use this online resource to:

- Enroll in your 401(k) plan
- Check your balance
- Track investment performance
- Review transactions and account statements
- Chart your rate of return
- Change your elections and contribution rate
- Find tips and tools about investing in retirement

Visit benefits.ml.com (desktop) or m.benefits.ml.com (mobile) for more information.

Profit Sharing Plan

You are eligible to participate in the Profit Sharing Plan after three consecutive months of employment. If projected income is less than \$600,000, estimated annual contribution will be \$20,000. If projected income is greater than \$600,000, estimated annual contribution will be \$37,500. You must also be employed on December 31 to receive the contribution.

Employer contribution is a fixed percentage contingent upon the firm's profitability and discretion. Employees are fully vested upon funding.

The contribution is made into the 401(k) plan. If you are not participating in the voluntary portion of the 401(k), the firm will open an account in your name for the purposes of the Profit-Sharing Plan.

Partner Benefits

Defined Benefit Retirement Plan

Eligible to participate after 12 consecutive months of service. Must be employed on December 31.

Draws

Draws will be paid on the 15th and last day of the month (if either of these days fall on a weekend, per period day will be the proceeding business day).

Distributions

There are four distributions annually. Distribution dates are: April 15, June 15, September 15, and January 15 (final for previous calendar year).

Memberships

Paid for by Partner.



Life and Disability Insurance

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

As an active partner, you are eligible for \$750,000 of guaranteed Basic Life coverage and \$2,500,000 of AD&D coverage. You are also eligible for an additional \$750,000 (totaling \$1.5 million) with Evidence of Insurability.

Additional Voluntary Life Insurance

You may purchase additional life insurance coverage for yourself at group rates. Consider costs such as funeral expenses, legal expenses, and general living expenses for your surviving family members when determining an appropriate amount of additional coverage.

Employee: You may choose amounts up to 5x your base salary in increments of \$10,000 to a maximum of \$500,000. The guaranteed issue amount for employees is \$200,000 during initial enrollment only. Unum's Lock-In Feature: If the minimum of \$10,000 is selected at initial enrollment, the benefit amount may be increased up to the full guaranteed issue amount during future open enrollments.

If you enroll in additional coverage for yourself, you may choose to elect coverage for your spouse and/or your child(ren) in the following amounts:

Spouse: \$5,000 increments up to 100% of additional employee life insurance. The guaranteed issue amount is \$25,000.

Child(ren): Amounts in \$2,000 increments up to \$10,000.

Please note: Evidence of Insurability is required prior to approval for coverage above guaranteed issue amounts and for late entrants.

Long-Term Disability (LTD)

You're automatically covered under the LTD plan at no cost to you. Premiums are reported as taxable income on K-1 statements.

LTD coverage will replace 60% of your base salary to a monthly maximum of \$100,000 if you are disabled for more than 90-days and are unable to work. The benefit is broken down by three benefit tiers.

LTD benefits are offset with other sources of income, such as Social Security and workers' compensation.

Benefit Tier	LTD Benefit
Tier 1 Unum	International Partners 60% of salary up to \$30k/month benefit, whichever is less. U.S. Partners 60% of salary up to \$25k/month benefit, whichever is less. Up to age 61 = benefits continue to Social Security Retirement Age (see table below) Age 62 = 60 months Age 63 = 48 months Age 64 = 42 months Age 65 = 36 months Age 66 = 30 months Age 67 = 24 months Age 68 = 18 months Age 68 = 18 months
Tier 2 Unum (if applicable U.S. Partners Only)	If eligible, benefit is up \$20k/month in coverage for U.S. Partners. No underwriting or medical exams. Before age 61 = benefits continue to age 65 Age 61 = 48 months Age 62 = 42 months Age 63 = 36 months Age 64 = 30 months Ages 65-74 = 24 months Age 75 or older = 12 months

If eligible, benefit is \$55k/month in coverage. (International up to \$70k)

Tier 3 Lloyd's of London (if applicable) This is guaranteed coverage with no underwriting required.

60 Months to Age 67

Whichever is lesser but never less than 12 months

Year of Birth	Social Security Normal Retirement Age
On or before 1937	65 years
1938	65 years, 2 months
1939	65 years, 4 months
1940	65 years, 6 months
1941	65 years, 8 months
1942	65 years, 10 months
1943-1954	66 years
1955	66 years, 2 months
1956	66 years, 4 months
1957	66 years, 6 months
1958	66 years, 8 months
1959	66 years, 10 months
On or after 1960	67 years

Long Term Care Insurance

Unum Long Term Care insurance protects your income and assets in the event you need home care or assisted living for an extended illness or injury. The base plan is provided at no cost to you. Additional coverage for yourself and your family is available for an additional expense.

What Is Long Term Care?

It is the type of care you may need if — due to an accident or serious illness— you are unable to perform, without substantial assistance from another individual, two or more Activities of Daily Living such as:

- Eating
- Bathing
- Continence
- Dressing
- Toileting
- Transferring

What Your Employer Is Offering

Long Term Care Insurance Base Plan:

\$5,000/Month, 6 Years for: Nursing Facility & 70% Residential Care Facility/ 50% Home & Community-Based Care

No New Entrants after 4/1/22.

Partners Benefits Summary: http://www.unuminfo.com/quinnemanuel/

How Does This Coverage Help?

Long term care insurance offers benefits to help you pay for care provided by:

- Adult Day Care and Home Health Care
- Homemaker Services
- Hospice Services
- Personal Care and Respite Care
- Alzheimer's Facility and Hospice Facility
- Nursing Facility and Residential Care Facility
- Rehabilitation Facility



Excess Liability

Chubb

Umbrella policies provide an extra layer of insurance (including unlimited defense costs) beyond homeowner or automobile liability insurance in the event of a suit for a variety of claims—including auto or boating accidents or accidents that occur on your property. Partners may purchase coverage at the group rates listed below:

Benefit Amount	Annual Premium
\$5 million	\$694
\$10 million	\$1,239
\$15 million*	\$1,916
\$20 million*	\$2,962
\$25 million*	\$3,738

^{*}Requires Underwriting Questionnaire

Employee Assistance Program

The Employee Assistance Program (EAP) through Unum is available to you and your household family members 24 hours a day, seven days a week at (800) 854-1446. All calls are completely confidential and there is no cost to you for using the service.

The professionals at the EAP will help by assessing, advising, and recommending options to help you or your family members deal with problems. In addition to unlimited telephonic counseling, you are eligible for 3 face-to-face counseling sessions per incident per year.

The EAP can help with many issues including:

- Locating childcare or eldercare services
- Financial or legal problems
- Personal or work relationships

- Depression or grief
- Substance abuse
- Identity theft protection

Helpful Hint

Access useful resources online at unum.com/lifebalance

Travel Assistance

Whenever you travel 100 miles or more from home, make sure to bring the travel assistance phone number! Travel assistance helps both you and your family have access to medical and other important travel services 24 hours a day.

Use Unum travel assistance for quick access to:

- Emergency medical evacuation
- Prescription replacement assistance
- Care and transport of unattended minor children
- Emergency message service
- Emergency trauma counseling
- Referrals to Western-trained, English-speaking medical providers
- Passport replacement assistance

Contact Travel Assistance anywhere in the world, day or night:

Within U.S.: (800) 872-1414

Outside U.S.: +609-986-1234

Email: medservices@assistamerica.com

Questions? Ask Here

All Summary Plan Descriptions, Claim Forms, and Enrollment Forms can be found on the Intranet.

Benefit	Contact	Telephone	Website or Email
General Information	QE Benefits Department: Kathy Starr	(213) 443-3637	<pre>intranet.quinnemanuel.com Email: benefitsdepartment@quinnemanuel.com Email: kathystarr@quinnemanuel.com</pre>
Medical	Cigna	(800) 244-6224	mycigna.com
Telehealth Services	Cigna	MDLive for Cigna 888-726-3171	mdliveforcigna.com Mobile app search: MDLive for Cigna
Dental	Cigna	(800) 244-6224	mycigna.com
Vision	EyeMed	(888) 439-3633	Member Login: <u>eyemedvisioncare.com/member</u> Provider Locator: https://eyedoclocator.eyemedvisioncare.com/member/en/
401(k)	Merrill Lynch	(800) 228-4015	benefits.ml.com (desktop)
Basic Life and AD&D	Unum	(800) Ask-UNUM	Email: askunum@unum.com
Voluntary Life	Unum	(800) Ask-UNUM	Email: askunum@unum.com
Long-Term Disability	Unum	(800) Ask-UNUM	Email: askunum@unum.com
Long Term Care Insurance	Unum	(800) Ask-UNUM	http://www.unuminfo.com/quinnemanuel/
Employee Assistance Program (EAP)	Unum	(800) 854-1446	unum.com/lifebalance
Travel Assistance	Unum	U.S. (800) 872-1414 Outside U.S. +(609)986-1234	Email: medservices@assistamerica.com

This communication highlights your Quinn Emanuel Urquhart & Sullivan, LLP benefit plans. Your actual rights and benefits are governed by the official plan documents. If any discrepancy exists between this communication and the official plan documents, the plan documents will prevail. Quinn Emanuel Urquhart & Sullivan, LLP reserves the right to change any benefit plan without notice. Benefits are not a guarantee of employment.

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