

2019 Annual Enrollment Guide

Consider, Compare, Choose.
November 1 – 16, 2018



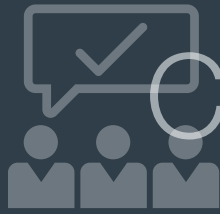
HEALTHY



WEALTHY



WISE



Consider



Compare



Choose

This guide will help you **consider, compare, and choose** the benefits you need for yourself and your family. Enroll in your benefits **November 1 – 16, 2018**.

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What You Need to Know About Annual Enrollment

Your Options

Annual Enrollment is your opportunity to enroll in or make changes to your coverage under these Equifax plans for 2019:

- Medical
- Dental
- Vision
- Health Care Flexible Spending Account or Health Savings Account
- Dependent Care Flexible Spending Account
- Buy-up Long-Term Disability
- Supplemental Life and Accidental Death and Dismemberment Insurance
- Accidental Injury Insurance
- Critical Illness Insurance
- Hospital Care Insurance



How to Enroll

Access **Workday** through Equifax Central under the People Link tab to enroll online.

What Happens If You Don't Enroll

If you do not complete and submit your enrollment in Workday by November 16, you will not have any coverage in the plans listed under Your Options for 2019.

You won't be able to enroll in these coverages during the year unless you experience a Qualified Life Event. To learn more about Life Events, visit *People Link > Life Events*.



New Medical and Dental Plan ID Cards

If you are a new enrollee or change your current plan election, you will receive a new medical and/or dental plan ID card in mid- to late-December. If you do not receive a new card, contact Cigna by calling **800-244-6224**. You can access your ID card any time on the myCigna mobile app for iPhone or Android.


















Don't Overlook These Benefits!

This guide highlights some additional benefits that don't require any action from you during Annual Enrollment and are available to you year-round.

Medical

You have three medical plan options to choose from. All three options cover the same medical and prescription drug benefits. The difference is in how you pay for care at the point of service and in your paycheck deductions.

	PPO	CDHP 20	CDHP 30
Per paycheck cost	 Low Moderate High	 Low Moderate High	 Low Moderate High
Health Savings Account (HSA)	 No	 Yes	 Yes
Health Care Flexible Spending Account (FSA)	 Yes	 Limited Purpose only	 Limited Purpose only
In-network deductible (what you pay before the plan pays)	 Low Moderate High	 Low Moderate High	 Low Moderate High
How much you pay for care	 Low Moderate High <p>You pay copays for doctor, urgent care, and ER visits. After meeting your deductible, you pay 20% of the cost for other in-network care.</p>	 Low Moderate High <p>Before meeting your deductible, you pay the full cost of care. After meeting your deductible, you pay 20% of the cost for other in-network care.</p>	 Low Moderate High <p>Before meeting your deductible, you pay the full cost of care. After meeting your deductible, you pay 30% of the cost for other in-network care.</p>
May be a good fit for you if ...	You want predictability in doctor visit and/or prescription drug costs.	You want to save money through an HSA but also want a smaller deductible than the CDHP 30.	You want to pay the least in premiums, you want to save money through an HSA, and you don't mind the higher out-of-pocket costs.

PPO – Open Access Plus Plan

This plan has the highest premiums each pay period, but you'll pay less when you receive a service.

How the PPO Plan Works

100%
COVERED

Preventive Care

Preventive care is always 100% covered in-network and is not subject to a copay.



Copays

You pay a copay for doctor visits, urgent care, emergency room, and prescription drugs.



Deductible

Until you satisfy the deductible, you pay 100% of medical services not subject to a copay, such as:

- Inpatient hospital stay
- Lab/radiology
- Durable medical equipment
- Ambulance
- Outpatient surgery



Coinsurance

If you reach the deductible, the plan then pays the majority of in-network costs (80%) until you reach the out-of-pocket maximum for the plan year.



Out-of-Pocket Maximum

If you reach the out-of-pocket maximum, the plan pays 100% of the cost of covered care for the rest of the plan year.

Copays Don't Apply to the Deductible

Copays **do not** apply to your deductible, but they do count toward your out-of-pocket maximum.

The PPO Works with the Health Care FSA

If you enroll in the PPO, you also can enroll in a tax-free Health Care FSA to help you pay for qualified health care expenses. See [page 18](#) to learn more.

CDHP 20 & CDHP 30 – Choice Fund Open Access Plus

Both CDHP 20 and CDHP 30 offer lower monthly premiums than the PPO, but require higher out-of-pocket costs. With both CDHPs, you can save for your current and future health care expenses with a tax-advantaged Health Savings Account (HSA).

The differences between CDHP 20 and CDHP 30 are the monthly premiums, coinsurance amount, deductible, and out-of-pocket maximum. You can compare these plans side by side on [page 9](#).

The CDHPs also Work with the Limited Purpose FSA

If you enroll in either CDHP, you can also enroll in a Limited Purpose FSA so you can use pre-tax dollars to pay for eligible dental and vision expenses. See [page 18](#) to learn more.

How the CDHPs Work

**100%
COVERED**

Preventive Care

Preventive care is always 100% covered in-network, regardless of whether you've met your deductible.



Deductible

You pay 100% of medical services and prescription drug costs before the plan shares in costs. See next [page](#).



Coinsurance

If you reach the deductible, the plan then pays the majority of costs until you reach the out-of-pocket maximum for the plan year. See next [page](#).



Out-of-Pocket Maximum

If you reach the out-of-pocket maximum, the plan pays 100% of the cost of covered care for the rest of the plan year. See next [page](#).

HSA: You can use your pre-tax HSA funds to pay for eligible medical, prescription drug, dental, and vision care expenses.

Limited Purpose FSA: You can also use the pre-tax Limited Purpose FSA for eligible dental and vision expenses.

Worried About the Higher Deductible?

Check out the additional protections on [page 23](#).

Understanding the CDHPs

About the Out-of-Pocket Maximum

The out-of-pocket maximum is a limit on how much you will pay toward the cost of covered care during the plan year. If you reach this limit, the plan then pays all costs of covered care for the rest of the plan year.

In both CDHP 20 and CDHP 30, if you cover any family members, each covered member of the family will have their own out-of-pocket maximum. This “embedded” maximum amount is lower than the total family out-of-pocket maximum.

1

Let’s say you enroll in CDHP 20 and cover **yourself**, your **spouse**, and one **child**. Your in-network, **family** out-of-pocket maximum will be **\$9,000**, but your **individual** out-of-pocket maximum will be **\$6,850**.

2

You have a surgery and your **individual** out-of-pocket costs exceed **\$6,850** (but do not yet meet the family out-of-pocket maximum of \$9,000).

3

All of your **individual** additional covered, in-network medical and prescription drug expenses will be 100% covered for the remainder of the year.

4

Your **spouse** and **child** will continue to incur medical and prescription drug expenses until your family’s combined out-of-pocket expenses reach **\$9,000**.

5

If your combined expenses reach **\$9,000**, the plan will pay 100% of covered, in-network medical and prescription drug expenses for **all covered family members** for the rest of the plan year.

About the Deductible

In CDHP 20, the entire family deductible must be satisfied — either by one covered family member or by any combination of covered family members — before any family member moves to coinsurance.

In CDHP 30, if you cover any family members, each covered member will have an in-network deductible of \$6,850. When an individual reaches this deductible, that individual will start paying coinsurance when receiving care from an in-network provider. When the family deductible is satisfied — either by one covered family member or by any combination of covered family members — all family members will start paying coinsurance.




Prescription Drug

Prescription drug coverage is included with the medical plan you choose.

You can use your coverage to purchase your prescriptions at local participating pharmacies and you can purchase certain medications through the mail-order service.

Coverage Levels

Your Equifax medical plan covers your prescription medications at three levels. The amount you pay will depend on the type of medication your doctor selects.

Prescription Costs	Type of Prescription
 <p>Lowest Higher Highest</p>	<p>Generic medications will cost you less. These drugs have the same active ingredients, safety, quality, and strength as their brand-name counterparts.</p>
 <p>Lowest Higher Highest</p>	<p>Preferred brand-name medications will cost you more. These are drugs for which generic equivalents are not available. While they typically cost more than generics, they usually cost less than non-preferred brand-name drugs.</p>
 <p>Lowest Higher Highest</p>	<p>Non-preferred brand-name medications will cost you the most. Generally, these are drugs that have generic alternatives and/or one or more preferred brand-name options within the same drug class.</p>

If a physician prescribes you a non-preferred brand-name prescription when a generic option is available:

- You must pay the difference in cost.
- The difference you pay will not count toward your deductible, if you are in the PPO.
- This difference you pay will not count toward your out-of-pocket maximum.

Compare the Medical Plans

	PPO		CDHP 20		CDHP 30	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual plan deductible (individual/family)	\$800/\$2,400	\$1,600/\$4,800	\$1,500/\$3,000	\$3,000/\$6,000	\$3,500/\$7,000*	\$7,000/\$14,000
Annual out-of-pocket maximum						
• Individual	\$3,300	\$6,600	\$4,500	\$9,000	\$6,500	\$13,000
• Individual in a family	\$3,300	\$6,600	\$6,850	\$18,000	\$6,850	\$26,000
• Family	\$9,900	\$19,800	\$9,000	\$18,000	\$13,000	\$26,000
Coinsurance (you pay)	20% after deductible	40% after deductible	20% after deductible	40% after deductible	30% after deductible	50% after deductible
Preventive care	\$0	No coverage	\$0	No coverage	\$0	No coverage
Primary care physician	\$30 copay	40% after deductible	20% after deductible	40% after deductible	30% after deductible	50% after deductible
MDLIVE telemedicine visits	\$30 copay		\$45 per visit before deductible; 20% after deductible		\$45 per visit before deductible; 30% after deductible	
Amwell telemedicine visits	\$30 copay		\$49 per visit before deductible; 20% after deductible		\$49 per visit before deductible; 30% after deductible	
Specialty care physician	\$45 copay	40% after deductible	20% after deductible	40% after deductible	30% after deductible	50% after deductible
Urgent care	\$50 copay		20% after deductible		30% after deductible	
Emergency care	\$200 copay		20% after deductible		30% after deductible	

* In CDHP 30, each covered family member will have an individual, in-network deductible of \$6,850. When an individual reaches this deductible, that individual will start paying coinsurance. When the family deductible is satisfied, all family members will start paying coinsurance.

Compare the Medical Plans (Prescription Drugs)

	PPO		CDHP 20		CDHP 30	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
30-day prescription drug cost (retail)						
Generic	\$10 copay	No coverage	20% after deductible	No coverage	30% after deductible	No coverage
Preferred brand-name	30% up to \$30 maximum	No coverage				
Non-preferred brand-name	50% up to \$70 maximum	No coverage				
90-day prescription drug cost (mail-order or retail)						
Generic	\$25 copay	No coverage	20% after deductible	No coverage	30% after deductible	No coverage
Preferred brand-name	30% up to \$75 maximum	No coverage				
Non-preferred brand-name	50% up to \$175 maximum	No coverage				

Medical Plan Bi-weekly Rates for 2019

New Tiered Medical Plan Premiums

Beginning in 2019, we're adopting tiered premiums for our medical plans. This means the amount you pay out of each paycheck for your coverage will be based on your annual base salary as of October 1, 2018.

Coverage Option	PPO	CDHP 20	CDHP 30
Annual salary less than \$60,000			
Employee only	\$110.92	\$58.23	\$36.28
Employee + children	\$216.09	\$120.86	\$106.68
Employee + spouse/domestic partner	\$248.28	\$130.01	\$114.74
Employee + family	\$349.84	\$182.30	\$160.90
Annual salary between \$60,000 and \$149,999			
Employee only	\$117.84	\$65.15	\$43.20
Employee + children	\$229.93	\$134.71	\$120.52
Employee + spouse/domestic partner	\$262.13	\$143.85	\$128.59
Employee + family	\$370.61	\$203.07	\$181.67
Annual salary equal to or greater than \$150,000			
Employee only	\$124.76	\$72.07	\$50.13
Employee + children	\$243.78	\$148.56	\$134.37
Employee + spouse/domestic partner	\$275.97	\$157.70	\$142.44
Employee + family	\$391.38	\$223.84	\$202.44

Dental

You have a choice between two dental plan options:

- Dental PPO Enhanced
- Dental PPO

Both plans are administered by Cigna. And, both plans allow you to visit any dentist you choose. However, you'll save money when you receive care from an in-network service provider.

The main differences between these plans are that the Dental PPO does not cover orthodontia and it has a lower annual maximum benefit.

Compare Plans

	Dental PPO Enhanced	Dental PPO
Your costs (in-network only)		
Annual plan deductible	\$50 per person \$150 per family	\$50 per person \$150 per family
Preventive (no deductible required)	0%	0%
General	10% after deductible	20% after deductible
Major	40% after deductible	50% after deductible
Orthodontia	50% after \$50 deductible	Not covered
Lifetime orthodontia maximum	\$2,000 per person	Not covered
Annual benefit maximum	\$2,000 per person	\$1,500 per person

Bi-weekly Rates for 2019

Coverage Option	Bi-weekly Rate
Dental PPO Enhanced	
Employee only	\$13.48
Employee + one dependent	\$29.70
Employee + two or more	\$36.40
Dental PPO	
Employee only	\$9.26
Employee + one dependent	\$20.35
Employee + two or more	\$25.04

 Visit mycigna.com or call **800-244-6224** to locate participating dentists.

Vision

The vision plan offered through EyeMed gives you two ways to receive benefits:

- 1 Use the network and receive an allowance for most expenses.
- 2 Go to a doctor outside the network and file a claim for reimbursement for part of the cost of your exams, glasses, and/or contacts.

Compare Plans

	In-Network Member Cost	Out-of-Network Reimbursement
Eye exams (once every calendar year)	\$15 copay	Up to \$45
Standard plastic lenses (once every calendar year)		
• Single vision	\$25 copay	Up to \$45
• Bifocal	\$25 copay	Up to \$60
• Trifocal	\$25 copay	Up to \$85
• Standard progressive	\$25 copay	Up to \$60
• Lenticular	\$25 copay	Up to \$125
• Premium progressive	\$25 copay, PLUS 80% of the balance above \$120	Up to \$60
Frames (once every two calendar years)	\$115 allowance toward purchase, PLUS 20% off the balance above \$115	Up to \$35
Contact lenses — elective (once every calendar year)	\$105 allowance toward purchase, PLUS 15% off the balance above \$105	Up to \$84
Contact lenses — medically necessary	\$0	Up to \$200

Bi-weekly Rates for 2019

Coverage Option	Bi-weekly Rate
Employee only	\$2.91
Employee + one or more	\$7.27

i Find a provider near you by visiting eyemedvisioncare.com or by calling **866-723-0513**. To register online with EyeMed, you will need to use your Employee ID (found in Workday) as your Member ID. Your Social Security number will not work.

Additional Health & Wellness Programs

See the Doctor. Any Time. Anywhere.

When you enroll in an Equifax medical plan, you can get doctor visits on-demand by phone or online.

Live Video Doctor Visits

Amwell connects you to board-certified doctors 24/7 using your phone, tablet, or computer. Browse a list of physicians, their experience, and ratings, and choose the doctor that's best for you.

 **855-667-9722** | [AmwellforCigna.com](https://www.amwellforCigna.com) | [Google Play](#)
[iTunes App Store](#)

Online Doctor Visits

With MDLIVE from Cigna, you can get medical care and prescriptions for many non-emergency conditions without leaving your home. You can connect with board-certified doctors, nurses, and therapists 24/7 via phone, email, or video.

 **888-726-3171** | [mdliveforcigna.com](https://www.mdliveforcigna.com) | [Google Play](#)
[iTunes App Store](#)

Quit Smoking, Manage Weight, Heal Stress

beWell Personal Health Team

Reach out to Cigna's beWell Personal Health Team for help finding solutions to your health care needs, including weight management, stress management, and tobacco cessation.

beWell is available Monday through Friday from 8 a.m. to 6 p.m. to all U.S. employees enrolled in one of our medical plans.

 **877-459-9896** | [myCigna.com](https://www.myCigna.com)

Tobacco Cessation Program

If you're trying to quit tobacco use, you can also partner with Cigna to quit for good with the Tobacco Cessation Program at no cost to you.

 **800-244-6224** | [myCigna.com](https://www.myCigna.com)



The chart on [page 9](#) reflects a slight increase in the maximum cost for our two on-demand doctor visit services for those enrolled in CDHP 20 or CDHP 30. MDLIVE maximum cost will increase from \$42 to \$45. Amwell maximum cost will increase from \$42 to \$49.

Additional Health & Wellness Programs

Because Your Health Matters

Health Matters is an interactive health assessment platform that connects you with personalized information, tools, and inspiration to help you take charge of your wellness goals.

- Play a short, online assessment game to identify your health goals.
- Discover personalized recommendations to keep you on target.
- Track important health information, like your BMI, blood pressure, cholesterol, and more.
- Stay motivated with fun activities and rewards for healthy behaviors.



Get Help Managing Chronic Disease

Omada is our digital wellness program for employees and family members who are pre-diabetic or at risk for heart disease. There is no cost to participate.

If you qualify for Omada, you can receive full-time health coaching, access to programs that adapt to your needs, online support groups, and more. You will even get a wireless smart scale and digital pedometer to support your wellness journey.

i To see if you qualify, take the quick quiz at OmadaHealth.com/Equifax.



Get Started Today!

- 1 Log on to myCigna.com.
- 2 Go to the My Health tab.
- 3 Click on the health assessment tile.

Health Savings Account

If you enroll in CDHP 20 or CDHP 30, you'll have access to a Health Savings Account (HSA) from Fidelity. An HSA allows you to set aside money on a pre-tax basis from your pay* to help you save and pay for eligible medical, prescription drug, dental, and vision care expenses.

Key Facts

2019 HSA Maximum Contributions		
Coverage Level	Maximum Contribution	
	Less than 55 Years of Age	Age 55 or Older
Individual	\$3,500	\$4,500
Family	\$7,000	\$8,000



- Your HSA funds are available only as they are deposited in your account.
- The HSA comes with a Visa debit card.
- Your money is not taxed when withdrawn to pay for **eligible expenses**.
- You can pair your HSA with a Limited Purpose FSA. See **page 18** to learn more.
- If the funds in your account reach \$1,000, you can invest that money through Fidelity, our account administrator.
- **Your HSA dollars are always yours — even if you change medical plans, leave the company, or retire.**

* HSA contributions for COBRA participants and individuals receiving Long-Term Disability benefits cannot be made through Equifax. Rather, in those two situations, HSA contributions must be made directly to Fidelity.

The Top 3 Reasons to Consider an HSA

1 Generally pairs with medical plans having lower premiums. By saving the difference in your HSA, you can help offset out-of-pocket costs not covered by the health plan.



2 Tax advantages. HSA contributions, earnings, and distributions are tax free¹ when used to pay for qualified medical expenses.



3 The money is always yours. Besides being free to choose when and how much of your HSA funds to use, any money left over at year's end is yours to keep.



i Learn more about HSAs at Fidelity.

¹ With respect to federal taxation only. Contributions, earnings, and distributions may or may not be subject to state taxation. See a tax professional for more information on the state tax implications.

Health Savings Account


Electing an HSA for the first time?

After you enroll in the HSA in Workday, you'll need to activate your HSA with Fidelity.

- 1 Log on to netbenefits.com in late December using the same username and password for your Equifax 401(k) Plan. If you don't have a Fidelity NetBenefits account, you can create one on this site.
 - 2 Click Activate or Open next to Health Savings Account and follow the online instructions.
 - 3 After your account is created:
 - Choose a beneficiary if you have not already done so.
 - Confirm the contribution amount you selected when enrolling in Workday is enough to meet your goals. Any changes to your contribution amount must be made in Workday.
 - Request additional debit cards for yourself, your spouse, or eligible dependents. Go to HSA Summary and click the Paying tab.
- i** You may need to provide Fidelity with more information to activate your account. If you need help navigating these steps, call **800-544-3716** to speak with a Fidelity HSA specialist.

Health Care FSA

The Health Care Flexible Spending Account (FSA) allows you to set aside pre-tax dollars for health care expenses, such as doctor visit copays, deductible expenses, and dental and vision care needs.

PPO &  **FSA**

2019 FSA Maximum Annual Contribution

Up to \$2,650

The Health Care FSA works with traditional medical plans, like the PPO, but it does not work with high-deductible plans, like CDHP 20 or CDHP 30.

You can enroll in the Health Care FSA even if you're enrolled in an eligible, non-Equifax medical plan.

Key Facts

- The IRS determines how you can use your Health Care FSA. See the full list of **IRS-approved expenses**.
- Your entire Health Care FSA election is available to you on January 1, even if you haven't yet saved the full amount.
- In-network medical and dental expenses are paid automatically from your account through auto-claim forwarding. You pay other eligible expenses out-of-pocket and are reimbursed from your account in tax-free dollars after submitting an expense claim form.
- Unused Health Care FSA funds do not roll over from one plan year to the next. Any unused amount will be forfeited.




You have until December 31, 2019 to incur an eligible expense and until **March 31, 2020** to submit the expense for reimbursement from your FSA.

You Can Pair an HSA with a Limited Purpose FSA

CDHP 20


OR

CDHP 30



HSA

&



LPFSA

2019 Limited Purpose FSA Maximum Annual Contribution

Up to \$2,650

The Limited Purpose FSA is similar to the Health Care FSA, but is designed to work with the HSA. If you enroll in CDHP 20 or CDHP 30, you can elect to contribute up to \$2,650 annually to a Limited Purpose FSA.

You **can only** use the Limited Purpose FSA to pay for eligible dental and vision expenses, including orthodontia, LASIK surgery, glasses or contacts, and dental or vision coinsurance and copays.

Dependent Care FSA

The Dependent Care Flexible Spending Account (FSA) lets you set aside pre-tax dollars to pay for child care for a dependent child under age 13 or to care for your spouse or relative who is physically or mentally incapable of taking care of themselves and lives in your home.



The Dependent Care FSA is not used for healthcare expenses.



You can use a Dependent Care FSA regardless of whether or not you're enrolled in a medical plan or what medical plan you're enrolled in.

2019 Dependent Care FSA Maximum Annual Contributions

If you are:	Maximum Annual Contribution
Married and filing a joint return or if you are a single parent	\$5,000
Married and filing separately	\$2,500

Key Facts

- Dependent Care FSA funds are available only as they are deposited in your account.
- After paying for an eligible expense, you can submit an expense claim form to be reimbursed from your account.
- Unused Dependent Care FSA funds do not roll over from one plan year to the next. Any unused amount will be forfeited.



You have until December 31, 2019 to incur an eligible expense and until **March 31, 2020** to submit the expense for reimbursement from your FSA.

Disability Insurance

Our Disability Insurance benefits help protect your income if you are unable to work due to a disability.

You are eligible for the following coverage as of the first of the month following your date of hire.



Protect More of Your Pay with Buy-up LTD

Buy-up LTD provides an **additional 15% of income replacement** coverage, which would bring your total LTD benefit to 65% of your basic monthly earnings, up to a maximum monthly benefit of \$20,000.

The portion of your monthly earnings replaced by the additional Buy-up LTD benefit will include bonuses and commissions.

You may choose to purchase Buy-up LTD coverage during Annual Enrollment or as a new hire. Evidence of insurability may be required.

i Visit [People Link > Benefits > Disability Insurance](#).

Paid Parental Leave

Paid Parental Leave is an important way Equifax supports you and your growing family.

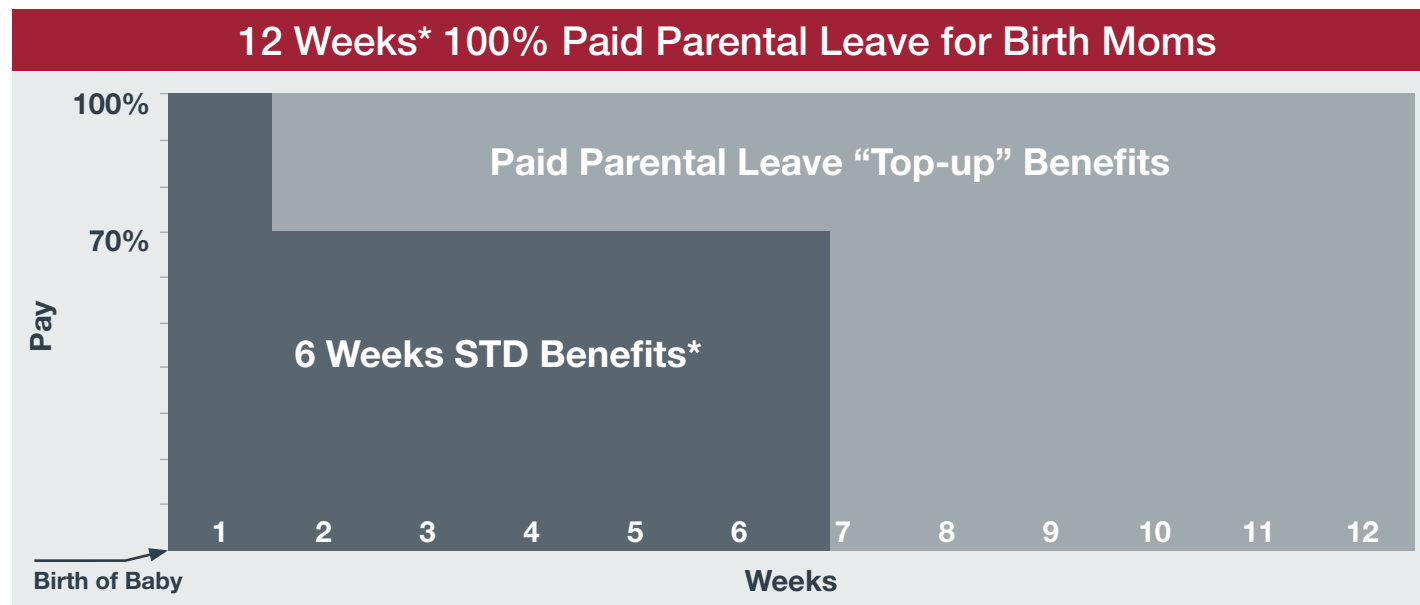


Moms, dads, spouses, partners, foster parents, and legal guardians get six weeks of paid time off to bond with a child, as a result of birth, adoption, foster care, or guardianship. (Nine weeks for two or more children at the same time.)

The leave must be taken in a minimum of two-week increments within the first 12 months of your child's birth or adoption.

Birth Moms Get a Boost to Their STD Benefits

Birth moms are also eligible for Short-Term Disability (STD) benefits — for six weeks following a natural childbirth and for eight weeks following a cesarean section delivery. Paid Parental Leave boosts this benefit to ensure birth moms can receive at least 12 weeks of fully-paid leave.



*For cesarean births, you receive an additional two weeks of STD leave, increasing the total length of fully-paid leave up to 14 weeks.

Get Full Details on People Link

If you're expecting to become a parent, get the full details about eligibility, the waiting period, exclusions, special situations, and more.

i Go to [People Link > Paid Time Off > Paid Parental Leave](#).

\$5,000 Adoption Reimbursement

Equifax offers up to a \$5,000 reimbursement to new parents for qualified adoption expenses of an eligible child. To learn more, review the [policy](#) and [claim form](#).

Life and AD&D Insurance

Life and Accidental Death and Dismemberment (AD&D) Insurance can help protect your family's financial well-being in the event of your death.

1x BASE

Min. \$50,000
Max. \$250,000

Immediately upon hire, Equifax provides you a Basic Term Life and AD&D Insurance benefit equal to your base salary with a minimum benefit of \$50,000 and a maximum benefit of \$250,000.

Add Coverage for Yourself and Your Family

To supplement your Basic Term Life and AD&D coverage, you have the option to purchase the following life insurance benefits for yourself, your spouse, or your children during Annual Enrollment. Evidence of insurability may be required when you elect supplemental coverage for yourself or your spouse.

Supplemental Term Life and AD&D Insurance

For You	1, 2, 3, or 4 times base salary, not to exceed \$1 million (The combined amount of basic and supplemental life insurance may not exceed \$1,250,000.)
For Your Spouse	Coverage in \$10,000 increments, up to \$50,000
For Your Child(ren)	\$10,000 for each eligible dependent child

Keep Your Beneficiaries Current

When you enroll, your beneficiaries will be pre-populated in Workday. Be sure your beneficiaries are up to date so that your family members get the benefits they are entitled to.

Additional Insurance Protections

Protect Yourself from the Unexpected

You can help protect yourself and your family from unforeseen events with these additional health insurance coverages available through Cigna. Equifax employees enjoy a group premium discount.

This additional coverage could help you manage the higher deductibles under the CDHPs. To learn more about these plans, log on to myCigna.com or refer to the summary of benefits available on [People Link](#).



Accidental Injury

Pays a lump sum, fixed benefit for covered accidents, such as emergency care, hospitalizations, fractures, and follow-up care. It can help you pay for out-of-pocket expenses that might not be covered by traditional insurance.



Critical Illness

Pays a fixed, lump sum benefit if you're diagnosed with a covered condition, like cancer, a heart attack, or a stroke. The benefit can be used to pay for child care, travel costs, medical treatments, copays, and prescriptions.



Hospital Care

Provides extra protection after a covered hospitalization resulting from a covered injury or illness. You can use the money to pay for child care, copays, deductibles, coinsurance, and follow-up care.



Traveling on Business? You're Covered!

If you're traveling on company business more than 100 miles outside the limits of the city or town in which you live or are regularly employed, you're covered by the Equifax Business Travel Accident and Out-of-Country Accident & Sickness Medical Coverage plan.

This plan protects you and your accompanying spouse and/or dependent child(ren) while you travel.

You'll be automatically enrolled in the plan. Just be sure to print a copy of the Travel Assist ID card (found on [People Link](#)) before your first business trip.

Equifax Extras

Get Exclusive Discounts on Cool Stuff

Equifax Extras offers Equifax employees and retirees exclusive discounts on a wide variety of goods and services including:



Computers (HP, Dell, Lenovo)



Cell phone providers (AT&T, Verizon, Sprint, and T-Mobile)



Whirlpool appliances



Tickets for movies, amusement parks, sporting events




Mortgage services



Student loan refinancing



Flowers and gifts

 Visit the **Equifax Extras** website to learn more about all of the discounts and special offers available.

Equifax 401(k) Plan

The 401(k) Plan lets you contribute on a before-tax and after-tax basis, and offers more than 20 investments funds to choose from. Beginning in 2019, Equifax will match 100% of your contributions to the plan, up to 5% of your pay.

You are eligible to participate as of your date of hire.

2019 401(k) Plan IRS Contribution Limits

The 2019 federal contribution limit is \$19,000.

If you're age 50 or older by December 31, you're eligible to make additional catch-up contributions of \$6,000 for a total contribution amount of \$25,000.

Your combined before-tax, Roth after-tax, traditional after-tax, company-matching, and direct contributions cannot be more than \$56,000 in 2019.

It is your responsibility to ensure you do not exceed this limit each plan year.

Financial Engines

No matter what type of investor you are, you can get free personalized investment advice and help managing your Equifax 401(k) Plan account from the investing experts at Financial Engines.

Visit financialengines.com/forEquifax or call **877-401-5762** and be connected to Financial Engines.*

*Advisory services, including Online Advice and Professional Management, are provided by Financial Engines Advisors, L.L.C., an independent, federally registered investment advisor and wholly owned subsidiary of Financial Engines, Inc. Financial Engines does not sell investments or receive commissions for the funds it recommends. Financial Engines does not guarantee future results. The information has been provided by Financial Engines. Financial Engines is not affiliated with Fidelity Investments or its affiliates.

Employee Assistance Program

Confidential Help 24/7, 365

The LifeWorks Employee Assistance Program (EAP) is a free and confidential service designed to help you and your family with issues that can impact health, relationships, finances, and job effectiveness.



Call to get help with:



Confidential counseling on personal issues



Legal information and referrals



Referrals and resources for work-life needs



Money management

i You can contact LifeWorks for help 24/7, 365 days a year.

www.lifeworks.com

Username: Equifax
Password: lifeworks

To speak with a counselor: **888-267-8126**
Para español: **888-732-9020**

Download the LifeWorks mobile app.

iTunes App Store
Google Play

Need Some Time Off?

Visit the **Paid Time Off** section of **People Link** for more information about:



Vacation and Paid Time Off



Holidays



Leaves of Absence



Paid Parental Leave Policy



Family Medical Leave (FMLA)



Short-Term Disability



Long-Term Disability

Legal Notices



Copies of legal notices can be found on People Link under ***Health and Benefits > Medical:***

- HIPAA Privacy Notice
- Medicare Part D Notice
- Medicaid Children's Health Insurance Program (CHIP) Coverage
- Summary of Benefits and Coverage
- ADA Wellness Program Notice

i Have questions? AskHR. If you have questions, submit an **AskHR ticket** on **People Link**.

This document (and any additional items or documents referred to in this document, or otherwise related to enrollment) is a summary of material modifications (SMM) for the Equifax Inc. Medical Plan and any other Equifax Inc. benefit plan applicable to you. This SMM amends the latest Summary Plan Description (SPD) that the Plan Administrator determines is applicable to you and must be read together with the SPD. The SMM describes changes and provides clarifications to the SPD regarding the rules applicable to and the benefits provided by the plans. You should keep this SMM together with the SPD.

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