

SA

SmithAmundsen

**EMPLOYEE  
BENEFITS  
SUMMARY**

**2021**



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# MISSION STATEMENT

SmithAmundsen provides the quality legal services that our clients require to achieve their goals. Each of us strives to demonstrate the highest degree of professionalism in our relationships with the bench, the bar, and in business transactions. Our success is built upon this foundation of integrity, shared values, a commitment to exceeding client expectations, and the use of creative approaches to resolve client matters efficiently. We distinguish ourselves from our competitors by our commitment to the professional development of our lawyers and staff.

# OFFICES

SmithAmundsen LLC operates 8 offices across the Midwest:

Chicago, IL

St. Charles, IL

Crystal Lake, IL

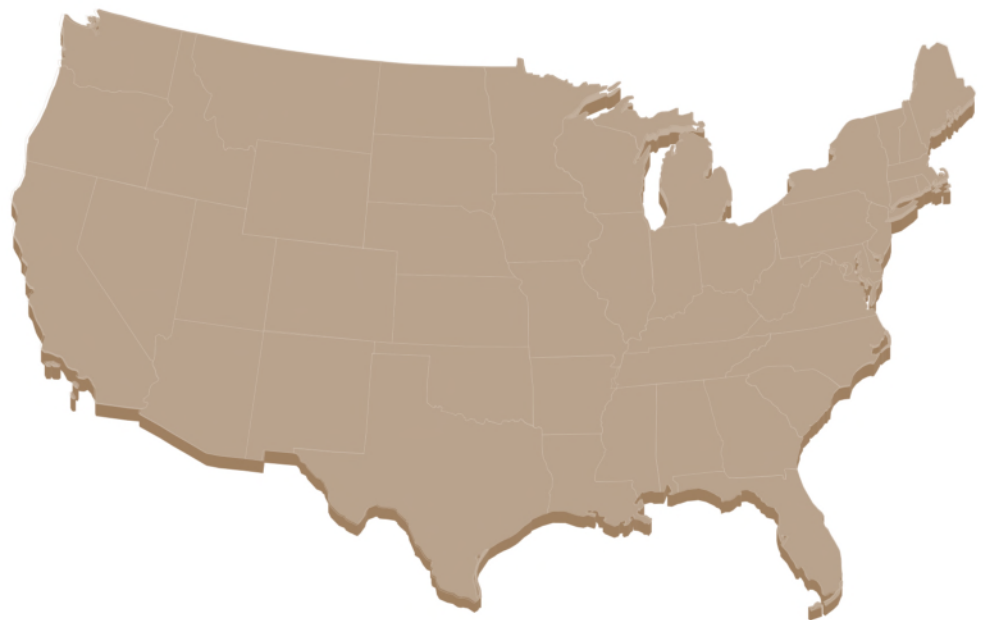
Rockford, IL

St. Louis, MO

Milwaukee, WI

Indianapolis, IN

Columbus, OH



# EMPLOYEE BENEFITS

If you are a full-time employee who is regularly scheduled to work 30 or more hours per week, you are eligible to participate in the firm's medical, dental, vision, life and disability plans, along with the Flexible Spending Account (FSA) 401k Retirement Savings Plan and additional paid benefits.

If you are a part-time employee who is regularly scheduled to work less than 30 or more hours per week, you are eligible for some paid time off benefits as well as the 401k Retirement Savings Plan.

## WHEN DOES COVERAGE BEGIN?

Employees become eligible on the first day of the month after the completion of 30 days of employment.



# HEALTH INSURANCE

The firm provides all full-time employees major medical insurance through BlueCross BlueShield of Illinois: HMO, HSA, and PPO+. The HMO coverage is only available to employees who work in Illinois.

## SPOUSAL SURCHARGE

There will be a \$200/month, “spousal surcharge” for spouses who are enrolled for coverage under the firm’s plan, when other coverage is available to them through their employer, etc. A spousal surcharge affidavit is required for all participants in this category.



## TOBACCO SURCHARGE

There will be a \$60 tobacco surcharge on the monthly health insurance premiums for all tobacco users. A tobacco user form is required for all health insurance participants.



→ YOU CANNOT CHANGE YOUR BENEFIT SELECTIONS DURING THE PLAN YEAR UNLESS YOU HAVE A QUALIFYING LIFE EVENT, SUCH AS THE BIRTH OR ADOPTION OF A CHILD, MARRIAGE, DIVORCE, ETC.

# HEALTH INSURANCE

## HMO ILLINOIS

Overall Deductible	\$0
Out-of-Pocket Limit	\$2,000 Individual/ \$4,000 Family
Will you pay less if you use a network provider?	Yes. When enrolling, you must choose a Primary Care Physician and Medical Group within the HMO network. This can be changed
Do you need a Referral to see a specialist?	Yes. This plan will pay some or all of the costs to see a specialist for covered services but only if you have a referral.

## HSA PLAN

Overall Deductible	In-Network: \$1,400 Individual/\$2,800 Family Out-of-Network: \$2,500 Individual/\$5,000 Family
Out-of-Pocket Limit	In-Network: \$2,400 Individual/\$4,800 Family Out-of-Network: \$4,800 Individual/\$9,600
Will you pay less if you use a network provider?	Yes. This plan uses a provider network. You will pay less if you use a provider in the plan's network.
Do you need a Referral to see a specialist?	No. You can see a specialist without a referral.

## PPO PLAN

Overall Deductible	In-Network: \$1,000 Individual/\$3,000 Family
Out-of-Pocket Limit	In-Network: \$2,500 Individual/\$7,500 Family
Will you pay less if you	Yes. This plan uses a provider network. You will pay less if you
Do you need a Referral to see a specialist?	No. You can see a specialist without a referral.

# HEALTH INSURANCE

## ILLINOIS STAFF & ATTORNEY PREMIUM RATES

HMO ILLINOIS RATES	
Coverage	Monthly Rate
Employee Only	\$156.33
Employee + Spouse	\$345.98
Employee + Child(ren)	\$333.29
Employee + Family	\$514.67

HSA ILLINOIS RATES	
Coverage	Monthly Rate
Employee Only	\$277.90
Employee + Spouse	\$468.42
Employee + Child(ren)	\$441.12
Employee + Family	\$709.29

PPO ILLINOIS RATES	
Coverage	Monthly Rate
Employee Only	\$437.00
Employee + Spouse	\$805.53
Employee + Child(ren)	\$774.24
Employee + Family	\$1,230.14

RATES SHOWN ABOVE DO NOT INCLUDE "TOBACCO SURCHARGE" AND/OR "SPOUSAL SURCHARGE"

# HEALTH INSURANCE

## OUTSIDE ILLINOIS STAFF & ATTORNEY RATES

HSA RATES for ALL	
Coverage	Monthly Rate
Employee Only	\$277.90
Employee + Spouse	\$468.42
Employee + Child(ren)	\$441.12
Employee + Family	\$709.29

PPO RATES for STAFF	
Coverage	Monthly Rate
Employee Only	\$284.90
Employee + Spouse	\$603.04
Employee + Child(ren)	\$580.43
Employee + Family	\$906.82

PPO RATES for ATTORNEYS	
Coverage	Monthly Rate
Employee Only	\$361.29
Employee + Spouse	\$717.90
Employee + Child(ren)	\$676.73
Employee + Family	\$1,069.37

RATES SHOWN ABOVE DO NOT INCLUDE "TOBACCO SURCHARGE" AND/OR "SPOUSAL SURCHARGE"



# FLEXIBLE SPENDING ACCOUNT

## SECTION 125 SALARY & SAVINGS REDUCTION

The firm provides a plan in which the employee is able to pay for specific expenses using their pre-tax dollars. The provider for this account is: PayFlex. The employee can specify an amount of their salary to be set aside in the Section 125 (FSA) account for payment of medical expenses, dependent, and other premiums not associate with the Firm. The amount elected by a participating employee is not treated as taxable income, and is excluded from taxable earnings on payroll records and the W-2 form.

For the health care account only, the 2021 carryover maximum is \$550. This does not decrease the maximum you are able to defer for the year, it will only add to it. The Firm does not reimburse employees if unused funds are remaining in employee's account.

The health care account does not have a grace period, which means you must incur all expenses you intend to seek reimbursement for by December 31st of the plan year.

### MAXIMUM ELECTIVE CONTRIBUTION

Dependent Care Expenses: \$5,000 Annual Max

Health Care Reimbursements: \$2,750 Annual Max

➔ IF YOU PARTICIPATE IN THE HSA MEDICAL PLAN, YOU ARE ELIGIBLE TO PARTICIPATE IN THE FSA ACCOUNT TO SAVE FOR DENTAL & VISION EXPENSES.

# DENTAL BENEFITS

## DELTA DENTAL

The firm provides full-time employees dental insurance through Delta Dental Insurance Company: Delta Dental PPO+ Delta Dental Premier. Please see a brief summary of benefits below:



Annual Deductible (applies to Basic and Major Services Only)	\$50/person; \$150/family
Annual Maximum	\$1,500/person
Enhance Benefits Program	Your plan provides additional cleanings and/or applications of topical fluoride to people with specific health conditions that put them at risk for oral health disease. The costs of the additional cleanings and fluoride treatments will be applied to your annual maximum.
Lifetime Orthodontic Max	\$1,000/dependent

## EMPLOYEE PREMIUMS

Employee Only	\$44.55/mo.
Employee + Spouse	\$89.10/mo.
Employee + Child(ren)	\$102.24/mo.
Employee + Family	\$150.03/mo.

# VISION BENEFITS

## SUPERIOR VISION

The firm provides full-time employees access to vision insurance through Superior Vision. Please see a brief summary of benefits below:



Co-payments	\$20/Exam, \$20/Materials \$25/Contact Lens Fitting Fee
Services covered in full (in-network)	Eye exams, standard single vision, bifocal, trifocal, lenticular lenses, and medically necessary
Frames	Standard frames are covered up to \$125.00 (in-network). Limits apply to out of network services.

## EMPLOYEE PREMIUMS

Employee Only	\$9.16/mo
Employee + Spouse	\$15.70/mo
Employee + Child(ren)	\$16.02/mo
Employee + Family	\$25.80/mo

# 401K RETIREMENT SAVINGS PLAN

## EMPOWER RETIREMENT

The firm provides a voluntary 401(k) salary savings plan which offers both a traditional 401(k) pre-tax deferrals and a Roth 401(k) post-tax deferrals.

## MAXIMUM CONTRIBUTION

2021 IRS Limit: \$19,500

Catch-up contribution, 50 or older: \$6,500

## ELIGIBILITY & FEATURES

Employees become eligible on the first day of the month after the completion of 30 days of employment. If you do not make your own contribution and investment elections within 45 days of becoming eligible, you will automatically be enrolled in the plan at **6%** and will be subject to the annual auto escalation feature.

### EMPLOYER MATCH

Full-time, eligible staff members (non-attorneys) who have been employed by the firm for at least one year receive \$.50 for every dollar that they contribute to the 401(k) plan, up to a deferral rate of **4%** of their annual compensation.

### PROFIT SHARING

Full-time, eligible employees and attorneys, receive a profit-sharing contribution to their 401(k) plans. The profit-sharing contributions are on a 5 year vesting schedule.



# UNUM INSURANCE BENEFITS

## BASIC LIFE AND AD&D

All full-time employees are eligible for life insurance coverage through Unum Insurance Company, providing \$50,000 Basic Life coverage and \$50,000 AD&D (Accidental Death & Dismemberment).

Full-time employees become eligible on the first day of the month after the completion of 30 days of employment.

## SUPPLEMENTAL LIFE INSURANCE

All full-time employees have an opportunity to purchase additional life insurance for themselves and their dependents.

Under SA's group plan employees can purchase supplemental life insurance in increments of \$10,000, to a maximum of 5 times their annual salary, or \$500,000. Life insurance can be purchased for spouses in \$5,000 increments, up to 100% of the employee's coverage. For children, life insurance can be purchased in increments of \$2,000 to \$10,000 maximum.



→ THERE IS A 'GUARANTEE ISSUE' AMOUNT OF \$140,000 MEANING YOU DO NOT NEED TO HAVE ANY MEDICAL UNDERWRITING TO QUALIFY FOR AT LEAST \$140,000 WORTH OF SUPPLEMENTAL LIFE INSURANCE. PREMIUMS ARE BASED ON AGE AND OTHER DETERMINING FACTORS.

# DISABILITY INSURANCE BENEFITS

## SHORT TERM DISABILITY

Short-term disability benefits may be used in instances of short-term illness or disability rendering the employee unable to perform the responsibilities of his/her position, and is taken in conjunction with the Family Medical Leave Act, if applicable.

For non-exempt employees, there is a 7-day (5 business day) elimination period for paid disability benefits. Leave time (PTO or sick) must be used to cover this elimination period. If none is available, the elimination period is unpaid. Exempt employees are waived from the elimination period clause.

Partners	6+ Months of Service	11 weeks leave paid at 100% of salary
Associates, Managers/	1+ Years of Service	Initial 7 weeks leave paid at 50% of salary, then 4 weeks leave paid at 100% of salary
Paralegals	1+ Years of Service	Initial 6 weeks leave paid at 100% of salary, then 4 weeks leave paid at 60% of salary
Staff Members	1+ Years of Service	Initial 4 weeks leave paid at 60% of salary, then 4 weeks leave paid at 100% of salary

# DISABILITY INSURANCE BENEFITS

## LONG TERM DISABILITY

The Firm provides all full-time employees who regularly work 30 or more hours a week with long term disability insurance. The eligibility period is one year of employment.

The elimination period is 90 days. Benefits begin the day after the elimination period has been completed in conjunction with short-term disability benefits and Family Medical Leave, if applicable.

## MONTHLY BENEFITS

Attorney and Senior Management Staff are eligible for 60% of their monthly earnings, up to a maximum benefit of \$20,000/month.

All other staff members are eligible for 60% of their monthly earnings, up to a maximum benefit of \$12,000/month.



→ EMPLOYEES MAY UTILIZE AVAILABLE PTO IN ADDITION TO DISABILITY BENEFITS.

# PARENTAL LEAVE

## ELIGIBILITY

Any employee who gives birth or adopts a child, and who has been employed by the firm on a full or part-time basis for at least 52 consecutive weeks prior to the date on which a leave period is to begin.

Employees who are spouses or domestic partners of a person giving birth or adopting a child, and who have been employed on a full or part-time basis for at least 52 consecutive weeks, irrespective of family status or gender. Employees who are the primary caregivers of a newborn baby or a child who has been newly placed for adoption in their home.

For non-exempt staff, there is a 5 day elimination period before Parental Leave becomes effective. Employees who are not the primary caregiver are entitled to 2 weeks of paid leave for the birth or adoption of their child. Non-primary caregiver leave must be taken within 1 month of the birth or adoption of the child. All time taken under the Parental Leave Policy will run concurrent with time off covered under the Family and Medical Leave Act (FMLA), if applicable. A completed Health Care Provider certification will be required prior to an employee taking Parental Leave, if applicable.

## PAY SCHEDULE

Partners	6+ months of Service	11 weeks paid at 100% of pay
Associates, Managers/Directors	1+ years of Service	7 weeks at 100% of pay 4 weeks at 50% of pay
Paralegals	1+ years of Service	6 weeks at 100% of pay 4 weeks at 60% of pay
Staff Members	1+ years of Service	4 weeks at 100% of pay



# LEAVE TIME

The Firm provides eligible employees with paid time off (PTO), sick days, a floating holiday and paid holidays.

Hired before 01/01/2021: 5 PTO days available as of January 1, 2021; employee earns prorated amount on the 1st of the month for February through December.

Hired on or after 01/01/2021: Employee accrues prorated amount on the 1st of the month following 60 days of employment through the year end.

All PTO, including sick days and floating holiday, do not carry over from year to year.

## PAID TIME OFF (PTO)

Attorneys:		As needed, to be taken with professional discretion.  *New Associates are discouraged from taking vacation time during their first 3 months of employment; unless already agreed upon prior to employment.
Senior Management:	0+ years	4 weeks (20 days/year) Accrued at 1.666 days/month
	15+ years	5 weeks (25 days/year) Accrued at 2.083 days/month
Staff members (non-exempt and exempt, full time):	0-5 years	2 weeks (10 days/year) Accrued at .833 days/month
	5+ years	3 weeks (15 days/year) Accrued at 1.25 days/month

# LEAVE TIME

## FLOATING HOLIDAY

All full-time employees receive 1 floating holiday per year. A floating holiday must be scheduled at least one week in advance; cannot be carried over from one year to the next.

## SICK & PERSONAL TIME

Attorneys & Senior Mgmt Staff:	As needed, to be taken with professional discretion. (See Section 7.2.4 in Personnel Manual)
Paralegals:	Advance of 2 sick days, equivalent to hours; thereafter, 1 hour for every 40 hours worked. Maximum of 40
Staff Members (Non-Exempt):	Advance of 2 sick days, equivalent to hours; thereafter, 1 hour for every 40 hours worked. Maximum of 40
Part-time Hourly Employees:	After 120 days of employment, 1 hour of paid sick time for every 40 hours worked.



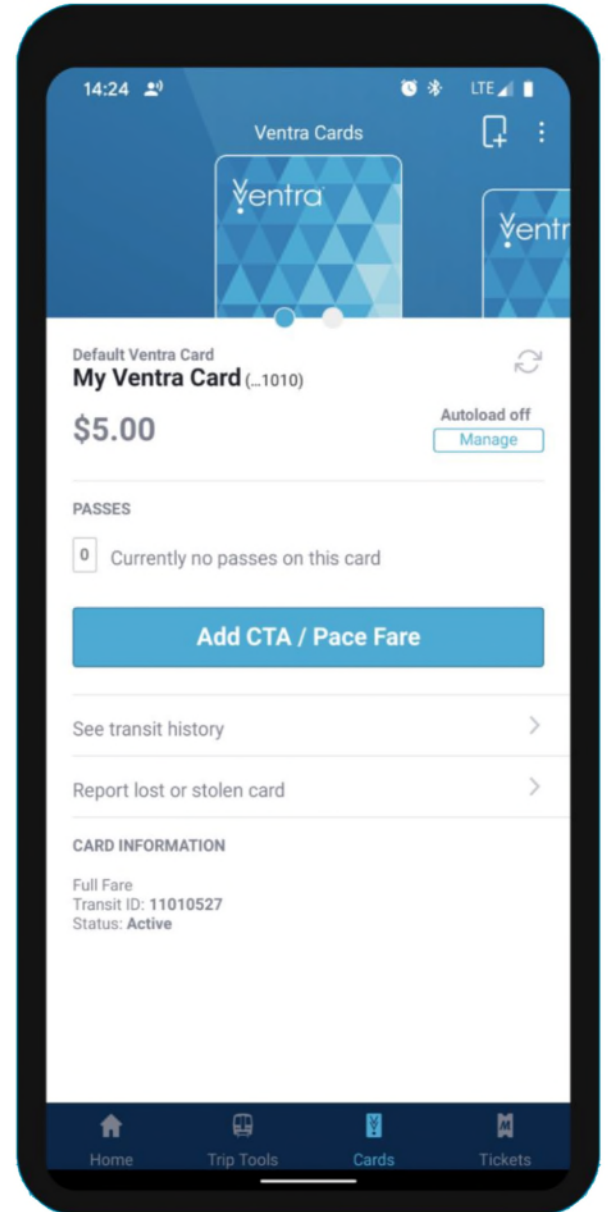
➔ IN THE EVENT OF AN FMLA LEAVE, THE FIRM WILL FRONT 20 HOURS OF SICK TIME TO BE USED DURING THAT LEAVE PERIOD.

# TRANSIT BENEFITS

All employees can elect to have a portion of their taxable salary set aside for qualified mass transit and parking expenses. This can be done through either simply lowering an employee's taxable income or deferring pre-tax dollars into a digital Ventra account.

If you choose to have your pre-tax dollars loaded into your Ventra account, contact [All-HumanResources@salawus.com](mailto:All-HumanResources@salawus.com) and note your per paycheck election amount and your Ventra transit ID. This can be found in your Ventra online account or app. After your pre-tax dollars are loaded onto your Ventra account, you may purchase CTA, Metra, and Pace tickets through the app or web portal.

Employees may change their transit benefit amounts at any time. A maximum of \$270.00 per month can be deducted between the general pre-tax transportation program and the Ventra program.



# PERSONAL UMBRELLA INSURANCE

The Firm provides all non-equity partners with group excess personal umbrella insurance through CHUBB Personal Insurance. The policy limit is \$1.0 million per partner, including \$1.0 million for uninsured/underinsured motorist coverage. The insurance is separate and apart from the Firm's business insurance and the premium will be paid by the firm.

All applicants must complete the CHUBB Umbrella participant questionnaire, sign and return to Human Resources.

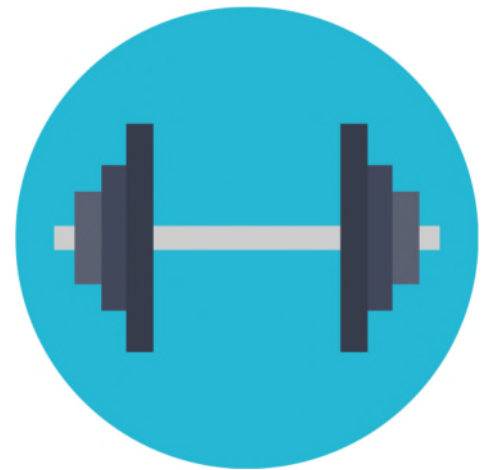
Review the following limits and rates table. You have the option of obtaining higher umbrella limits in addition to the \$1.0 million provided by the Firm. You need to sign and complete the Limits and Rates page and circle the increased limit if desired.

Premium tax of 3.7% in addition to the premiums shown below.

Limit of Liability	ANNUAL Group Rate
\$1,000,000 including \$1,000,000 Underinsured /	\$567
\$2,000,000 including \$2,000,000 Underinsured /	\$891
\$5,000,000 including \$5,000,000 Underinsured /	\$1568

# GYM MEMBERSHIP REIMBURSEMENT

The Firm reimburses full-time attorneys for the cost of an annual gym membership, to a maximum amount of \$250/year. The expense must be accompanied by a receipt that shows proof of payment made, not a contract with a promise of payment, or a flyer indicating how much the membership costs. The receipt should be dated and indicate the period covered by the gym membership.



This policy is for all full-time attorneys only, with the exception of Of Counsel attorneys.

Reimbursement of gym memberships will follow all other guidelines set forward for the reimbursement of expenses.



# PERSONAL UMBRELLA INSURANCE

## TERMS

If you currently have a personal Umbrella policy it must be cancelled when the Group Policy becomes effective.

Each partners is responsible for maintaining the following minimum underlying limits as stipulated in the personal umbrella policy.



## MINIMUM UNDERLYING LIMITS

Coverage	Limit
Personal Liability	\$300,000
Unregistered Vehicles	\$300,000
Personal Auto	\$250,000 / \$500,000 BI \$100,000 Property Damage or \$300,00 CSL
Uninsured / Underinsured Motorist Protection	\$250,000 / \$500,000 BI or \$300,000 CSL
Watercraft < 26 ft. or 50 hp	\$300,000
Watercraft > 26 ft. or 50 hp	\$500,000

## HUMAN RESOURCES DEPARTMENT

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