



IHS Markit®

YOUR **US** BENEFITS

Explore your 2022 benefits

2022 Open Enrollment Guide





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Keep track

Check off which options you want to elect for the New Year as you read through the guide and use this list when you select your benefits online.

MEDICAL:

Plan type

- ☐ White - PPO/POS
- ☐ Green - HDHP
- ☐ Gray - HDHP

Coverage level

- ☐ Employee
- ☐ Employee + Spouse/DP
- ☐ Employee + Child
- ☐ Employee + Children
- ☐ Employee + Spouse/DP + Child
- ☐ Employee + Spouse/DP + Children

SPENDING ACCOUNTS:

HSA:

\$ per year

General Purpose FSA:

\$ per year

Limited Use FSA:

\$ per year

Dependent Care FSA:

\$ per year

Commuter Benefit Plan:

\$ per year

SUPPLEMENTAL LIFE INSURANCE:

Coverage level

- ☐ Employee Only
- ☐ Spouse/DP
- ☐ Child(ren)

DENTAL:

Coverage level

- ☐ Employee Only
- ☐ Employee + Spouse/DP
- ☐ Employee + Child(ren)
- ☐ Employee + Family

VISION:

Coverage level

- ☐ Employee Only
- ☐ Employee + Spouse/DP
- ☐ Employee + Child(ren)
- ☐ Employee + Family

SUPPLEMENTAL AD&D INSURANCE:

Coverage level

- ☐ Employee Only
- ☐ Spouse/DP
- ☐ Child(ren)

IDENTITY THEFT:

Coverage level

- ☐ Employee Only
- ☐ Employee + Spouse/DP
- ☐ Employee + Child(ren)
- ☐ Employee + Family

☐ LEGAL SERVICES

☐ CRITICAL ILLNESS

☐ ACCIDENT INSURANCE

☐ PET INSURANCE

☐ HOSPITAL INDEMNITY

Happy with your selections?



Use this page as a reference of which benefits you require and visit www.mybenefits.ihsmarkit.com to confirm your selections.

Do something today that your future self will thank you for

Our total rewards package reflects our commitment to you in order to cover all aspects of your life, including your health, security, financial stability, family and future. It is designed to put you in control so you can decide how best to maximize your benefits. Once you have considered the options available, you can easily make your elections online at TRI-AD's website www.mybenefits.ihsmarkit.com. For help with your enrollment, contact TRI-AD at 844-678-1670.



EXPLORE

Check out your options for 2022



PLAN

Use tools and resources to choose what's right for you and your budget



ACT

Make your elections easily online by visiting
www.mybenefits.ihsmarkit.com
by midnight EST on 5 November

“...designed to put you in control so that you can decide how best to maximize your benefits.”



Your benefits are split into three categories

HEALTH



Medical Insurance



Prescription Drug Benefits



Health Advocate



Vision Insurance



Teladoc



Health Advocate



2nd MD



Dental Insurance

WEALTH



401(k) Retirement Savings Plan



Health Savings Account (HSA)



Critical Illness Insurance



Accident Insurance



Life and AD&D Insurance



Disability Insurance



Flexible Spending Accounts (FSA)



Identity Theft Protection



Legal Plan



Pet Insurance



Hospital Indemnity

LIFESTYLE



Employee Assistance Program



Commuter Benefit Plan



Business Travel Insurance



Gympass

Shaping your future

How to enroll

Open enrollment 2022 is your opportunity to shape your future by selecting your benefits for the coming year.

During open enrollment, it is important to take the opportunity to review and understand your benefit options. You will not be able to enroll again or change your selections until the next open enrollment, unless you experience a qualifying event.

This year if you take no action during open enrollment your current elections will carry over to the 2022 plan year with the exception of the Flexible Spending Account (FSA). Annual re-enrollment is required for both the Health and Dependent care flexible spending accounts. If you are currently enrolled in these plans and do not actively re-elect them your participation will end December 31, 2021

Annual enrollment can only be completed online.



To help you through the process, here are the steps you need to take during this year's enrollment window.

1

Read this guide and make your benefit selections.

2

Use the form in this guide to write down your elections. (Keep track using the check list on **page 2**)

3

Go to TRI-AD's site at **www.mybenefits.ihsmarkit.com** to select your 2022 benefits. If you need assistance contact TRI-AD at **(844) 678-1670**

4

If accessing TRI-AD's site for the first time, create a username and password by clicking on the "Register as a new user" on the homepage. If you run into issues, call TRI-AD at 844-678-1670.

5

Click on the Benefits enrollment account tile.

6

Click on the Start Open Enrollment link. The process should take **approx. 15 minutes** from start to finish.

7

Take the opportunity to confirm birthdates, Social Security Numbers and beneficiaries **are up to date.**

8

If you choose to enroll a new dependent, you will be required to submit documentation to verify dependent eligibility **within 30 days** of January 1, 2022.

9

Don't forget to save!

Once you've made your elections, make sure you click **"Approve"** then save your Confirmation Statement for your records to confirm your deductions are correct on your first paycheck in January 2022.



Do you need to talk with a benefits counselor?
If so, you can register for a 45 minute virtual session at **www.benefitsgo.com/IHSMarkitWebScheduler**

Key dates

25 October 2021

The open enrollment window opens at 12:00 am CT

5 November 2021

The window closes at 11:59 pm CT

1 January 2022

Your benefit elections are effective

Can I change my benefits after Open Enrollment closes?

You can only change your benefits after the Open Enrollment window closes if you experience a Qualifying Life Event, such as a marriage, loss of coverage or birth of a baby. You would need to login to TRI-AD's site within 30 days of the life event to request a change. You will be asked to supply supportive documentation for the life event to TRI-AD, our third-party benefits administrator. This documentation must be submitted within 30 days of the effective date.

Don't forget Qualifying life events

Qualifying life events give you an opportunity to review your benefit elections when your circumstances change outside of the Open Enrollment window. You must notify TRI-AD within 30 days of your life event.

Qualifying life events include, but are not limited to:

- Marriage, divorce or legal separation
- The death of a spouse or other dependent
- The birth or adoption of a child
- A dependent's eligibility status changing due to age, marital status, or employment or, you or your spouse experience a change in work hours that affect benefits eligibility
- Voluntary or involuntary loss of other qualifying coverage or gaining other group coverage
- A loss or gain of coverage for a spouse or eligible child
- Moving in or out of the network (transferring to another country)

New hires

As a new colleague, you will need to enroll in your benefits through your New Hire Event within 30 days of your hire date AND complete the Open Enrollment Event at www.mybenefits.ihsmarkit.com.

You will receive a link to enroll in your benefits within approximately 5 days after your hire date. Please use this link to enroll so your benefits take effect first of the month following your date of hire. **You will also be taken into the Open Enrollment link once you complete your New Hire Event. Please complete the Open Enrollment Event between October 25-November 5.**

Who's eligible to be a dependent?

If you select coverage, your dependants are also eligible for benefits such as medical, dental, vision and life insurance coverage, as well as some voluntary coverages:

Eligible dependants include:

- Your legal spouse
- Your same- or opposite-gender domestic partner
- Your dependent children
- Your domestic partner's dependent children
- Legal guardianship of children and foster children

The plan provides coverage for dependent children up to the end of the calendar month in which the child reaches age 26. If you choose to cover a domestic partner, you will pay the same cost and receive the same coverage you would for a spouse; however, a portion of the cost will be deducted on an after-tax basis through payroll. Also, the employer portion for your DP will be included in annualized imputed income on your W-2.



What is new / changing?

There are no new plans or changes to current plans in 2022. There will be slight premium increases across all plans. See 2022 plan rates on page 39 of this Guide.





Health benefits

(Medical, prescription, dental, vision, telemedicine, Health Advocate, 2nd MD)



Medical and prescription drugs

Know our plans



All medical plans are provided by **Aetna** and Prescription Drugs are provided by **CVS Caremark**.



You pay a set amount out of each paycheck. **This is called a premium.**



When you go to a facility or the hospital, you pay an **annual deductible**. This is the amount you pay out-of-pocket before the plan covers any services. (In the PPO/POS plan, there is a co-pay, or flat fee, for office visits which is not subject to the deductible). Qualified preventive services are covered at 100% with no deductible or office visit co-pay.



After your deductible is met, you pay **coinsurance** (a percent of the cost) or a co-pay until you meet your out-of-pocket maximum.

The **out-of-pocket maximum** is the most you could pay for covered services in the plan year.

100%

When you reach the **out-of-pocket maximum**, the plan pays 100% of your remaining eligible expenses for the remainder of the calendar year.

Please refer to the medical plan documents and Summary of Plan Descriptions posted in TRI-AD's Reference Center.

What are my options?

PPO/POS

The **WHITE** Plan is a Preferred Provider Organization (PPO)/Point of Service (POS) plan which allows you to visit an in-network or out-of-network health care provider of your choice. If you use an in-network provider you will generally pay a co-pay at the time of office visit.

RIGHT FOR YOU IF

- ✓ You want to know your predicted expenses, such as office visit co-pays

HDHP

The **GREEN** and **GRAY** Plans are both high deductible health plans which provide you with medical coverage and allow you to contribute and receive a company match to your Health Savings Account (HSA). You also have a choice of using an in-network or out-of-network provider, and will receive a better benefit if you use an in-network provider.

RIGHT FOR YOU IF

- ✓ You want more control over your health care dollars
- ✓ You want lower premiums now and the opportunity to save for your future health care costs with tax advantages
- ✓ You want the benefits of the Health Savings Account (HSA). See page 19 for more information.

Medical Plan changes – In-Network Coverage*

	2022 White PPO Plan	2022 Green HDHP Plan	2022 Gray HDHP Plan
Deductible	\$750/\$1,500	\$1,500/\$3,000	\$2,000/\$4,000
HSA Company Match	N/A	\$350/\$700	\$600/\$1,200
CoInsurance	20%	20%	20%
Out-of-Pocket Max	\$3,500/\$7,000	\$3,500/\$7,000	\$6,000/\$12,000
Co-pay	\$20	Subject to deductible, then 20%	Subject to deductible, then 20%
Specialist Co-pay	\$45	Subject to deductible, then 20%	Subject to deductible, then 20%
Preventive Care	\$0	\$0	\$0
Inpatient Hospital	20% (after deductible)	20% (after deductible)	20% (after deductible)
Outpatient Hospital	20% (after deductible)	20% (after deductible)	20% (after deductible)
Emergency Room	\$150	20% (after deductible)	20% (after deductible)
Urgent Care	\$75	20% (after deductible)	20% (after deductible)

*Out-of-Network coverage is explained on the Benefit Summaries that can be found on www.mybenefits.ihsmarkit.com.

Prescription drug plan – In-Network Coverage*

RX	White – PPO/POS	Green – HDHP	Gray – HDHP
Retail Tier 1	\$10	20% (after deductible)	20% (after deductible)
Retail Tier 2	20% (\$75 max)	20% (after deductible)	20% (after deductible)
Retail Tier 3	30% (\$125 max)	20% (after deductible)	20% (after deductible)
Preventive Maintenance RX	Above co-pays apply	\$10/20%/30%	\$10/20%/30%
Mail Order	2.5 times retail	2.5 times retail	2.5 times retail
Out-of-Pocket max	\$1,500/\$3,000 (separate from medical OOP)	Included in Medical OOP maximum	Included in Medical OOP maximum

Find a doctor

Find an in-network doctor at aetna.com by Inputting your zip code as a guest, and select “Aetna Choice POS II (Open Access)” under Aetna Open Access Plans. Then search by provider name or specialty.

See if your prescription is covered

Find the CVS drug listing at www.mybenefits.ihsmarkit.com under Reference Center/Pharmacy. You can also look up your prescription cost using CVS’s cost estimator tool in the Reference Center/Pharmacy.

No changes to the medical and prescription drug plan for 2022

Tobacco Surcharge*

As part of the benefits enrollment process, anyone who is enrolled in or covered by one of our medical plans is required to attest to his or her use of tobacco products. Tobacco users who elect coverage under a medical plan option will be subject to a tobacco surcharge of \$40 per month, or \$20 per pay period, in addition to the annual cost of coverage. The surcharge is added to the medical premium deduction.

Tobacco Cessation program

Need help quitting tobacco for good? Join the Quit For Life Program through Optum by calling 1-866-QUIT-4-LIFE or register online at <https://myquitforlife.com/IHSinc>.

*Your 2021 Tobacco Surcharge attestation will carry over to 2022 if you take no action to update it during Open Enrollment.

Working Spouse Surcharge*

Medical plan premiums are subject to a working spouse surcharge.

If you are covering a spouse on your medical plan who has an offer of medical coverage through his/her employer, we encourage you to evaluate all options before enrolling your spouse in an IHS Markit plan. You often can realize a savings in monthly premiums and annual out of pocket costs by enrolling your spouse in his/her employer's plan.

If you decide to cover your working spouse on our medical plan, a surcharge of \$100/month (\$50/semi-monthly) will be charged in addition to your regular medical premium deduction.

The surcharge will NOT apply if:

- Your spouse is not employed
- Your spouse is self-employed
- Your spouse is employed but does not have an offer of medical coverage
- Is an IHS Markit employee
- Your spouse is eligible and/or enrolled in Medicare, and is not employed or self-employed

Action Required

- If you cover your spouse on your IHS Markit medical plan, you must certify that your spouse does not have access to other coverage through his or her own employer to avoid the \$100 monthly working spouse surcharge during Open Enrollment.
- If your spouse gains or loses employer coverage mid-year, you will report the eligible life event through www.mybenefits.ihsmarkit.com. Following your medical election changes, you will re-submit the Working Spouse Affidavit so the surcharge can be adjusted as necessary.

*Your 2021 Spousal Surcharge attestation will carry over to 2022 if you take no action to update it during Open Enrollment.

Teladoc

You have 24/7 access from anywhere to board-certified physicians without having to book an appointment or even leave your house.

This service provides you with fast and professional treatment for a huge range of health concerns.

- Cold & flu symptoms
- Skin infection
- Urinary tract infection
- Behavioral Health
- Bronchitis
- Acne
- Moles/wart
- Allergies
- Skin rash
- Pink eye
- Abrasions

WHITE Plan participants pay a specialty visit copay. GREEN and GRAY Plans pay \$47 maximum for a medical visit. Teladoc also offers a suite of Behavioral Health services, and professionals offers to IHS Markit price at preferred prices.

Access Teladoc by calling 1-800-835-2362 or visiting <https://member.teladoc.com/aetna>.

Health Advocate

Health Advocate offers a unique level of personalized support for your healthcare needs at no cost to you. Services include:

Support for every type of medical condition

- Explain health conditions, diagnoses and treatments; research treatment options
- Answer questions so you can make the right choices for your care

Coordinate medical care

- Facilitate any necessary pre-authorizations and coordinate benefits
- Provide in-hospital support and arrange post-discharge services and care

Research and arrange second opinions and tests

- Identify and connect you with leading specialists and Center of Excellence
- Arrange for transfer of medical records, lab results and x-rays

Take the hassle out of healthcare

- Find the right doctors and make appointments
- Review medical bills to find errors or duplicate charges; resolve claims and billing issues

Contact Health Advocate at 866.695.8622 or visit their website at HealthAdvocate.com/members.

2nd.MD

Do you have an upcoming surgery or new diagnosis you need a 2nd medical opinion on?

Speak to the nation's leading medical specialists by phone or video from the comfort of your own home with Aetna's 2nd.MD to get a second opinion about your:

- ✓ Disease or condition (cancer, diabetes, chronic pain, etc.)
- ✓ Surgery or procedure
- ✓ Medications you are taking
- ✓ Treatment plans

Available at no cost to you and your dependents covered on your Aetna medical plan. Activate your membership at www.2nd.MD/aetna or call 866-410-8649.



Delta dental – triple option

Your smile matters

Dental coverage, much like medical and vision, is a highly valued benefit for very good reasons. Aside from routine check-ups and cleanings, knowing that you're covered should you need to see a dentist or a specialist for a big ticket procedure, such as fillings, root canals and crowns, is a great relief.

IHS Markit offers a national dental plan through Delta Dental of Colorado. We have one dental plan with three tiers of coverage. How your provider is contracted with Delta Dental will determine what percentage you pay for your services. To determine which tier your provider falls under go to www.deltadentalco.com for a list of the network providers.

Dental plan summary details

Please refer to the Dental Plan Summary to confirm the coverage under each tier.

Delta Dental PPO

The PPO network has the lowest deductible per person and the highest percentage of coverage for services

Delta Dental Premier

The Premier network is the middle tier in regards to the deductibles and percentage of coverage for services

Out-of-Network

If you go to a dental provider who is not registered with Delta Dental then your treatment will fall under the Out-of-Network tier

You will note that some providers are covered under both the **PPO** and **Premier networks** and when you see this, you and your covered family members will receive the highest percentage of coverage via the **PPO**

	PPO	Premier	Out-of-Network
Deductible	\$25 (x3 family)	\$50 (x3 family)	\$75 (x3 family)
Preventive / Diagnostic	100%	100%	Employee pays negotiated rate
Basic	90%	80%	50%
Major-implants	60%	50%	50%
Orthodontia	Covered	Covered	Covered
Orthodontia Maximum (adult + children)	\$1,750 / Individual / Lifetime		
Annual Maximum per person	\$2,000 (preventive excluded from annual max)		



Vision

Your vision. Our focus.

Regular eye exams are an important part of health maintenance, no matter your age. If you or your family members wear glasses or contact lenses, you know that the cost of vision care can quickly add up.

Your Vision plan is provided by VSP and there are four different tiers of coverage for you to choose from:



Employee Only



Employee + Spouse/DP



Employee + Child(ren)



Employee + Family

Benefit	Description	Co-pay	Frequency
WellVision Exam	– Focuses on your eyes and overall wellness	\$15	Every 12 months
Prescription Glasses		\$15	See frame & lenses
Frame	<ul style="list-style-type: none"> – \$200 allowance for a wide selection of frames – \$220 allowance for featured frame brands – 20% savings on the amount over your allowance 	Included in Prescription Glasses	Every 12 months
Lenses	<ul style="list-style-type: none"> – Single vision, lined bifocal and trifocal lenses – Polycarbonate lenses for dependent children 	Included in Prescription Glasses	Every 12 months
Lens Enhancements	<ul style="list-style-type: none"> – Standard progressive lenses – Premium progressive lenses – Custom progressive lenses – Average savings of 20-25% on other lens enhancements 	\$55 \$95 - \$105 \$150 - \$175	Every 12 months
Contacts (instead of glasses)	<ul style="list-style-type: none"> – \$200 allowance for contacts; co-pay does not apply – Contact lens exam (fitting and evaluation) 	Up to \$60	Every 12 months
Diabetic Eyecare Plus Program	– Services related to diabetic eye disease, glaucoma and age-related macular degeneration (AMD). Retinal screening for eligible members with diabetes. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details.	\$20	As needed
Extra Savings	Glasses and Sunglasses <ul style="list-style-type: none"> – Extra \$20 to spend on featured frame brands. Go to vsp.com/specialoffers for details. – 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam. 		
	Retinal Scanning <ul style="list-style-type: none"> – No more than \$39 co-pay on routine screening as an enhancement to a Wellvision Exam. 		
	Laser Vision Correction <ul style="list-style-type: none"> – Average \$15 off the regular price or 5% off the promotional price; discounts only available from contracted facilities. 		



Check out the Benefit Rates at the end of this guide for more information about the premiums you could pay for the different coverage tiers.



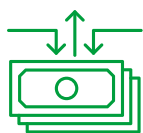
If you plan to see an Out-of-Network provider, visit www.vsp.com for additional co-pay details and claim form.





Wealth benefits

(401(k), HSA, FSA, Life/Disability, Critical Illness, Accident, Identity Theft, Legal, Pet Insurance)



401(k) Retirement Plan

It's easy to get caught up in the present, but it's also important to look ahead. Start investing in your future—and yourself—with help from the Plan and Fidelity.

Enroll Now! If you haven't joined the Plan, you can enroll on Fidelity NetBenefits® at www.401k.com or call a Fidelity representative at 800-835-5087.

Key Features of Your IHS Markit 401(k) Plan

Eligibility	You can enroll in the Plan at any time.
Automatic Enrollment	If you do not enroll in the Plan or elect to opt out after 30 days, you will be automatically enrolled at a 6% pre-tax contribution rate. Your contributions will be invested in the Plan's default fund, one of the T.Rowe Price Retirement Trust (Class F). Target Date Funds are an asset mix of stocks, bonds and other investments that automatically becomes more conservative as the fund approaches its target retirement date and beyond. Principal invested is not guaranteed. Your contribution rate will automatically increase by 1% each year, up to a maximum rate of 10%. We encourage you to choose a contribution rate and investment options that are appropriate for you. If you don't want to contribute to the Plan, you must change your contribution rate to 0%. You can change your contribution rate, select other available investment options, or opt out of the Plan at any time.
Your Contributions	You can contribute from 1%–60% of your eligible base pay as pre-tax or Roth contributions, or a combination, up to the annual IRS dollar limits. A Roth contribution to your Plan allows you to make after-tax contributions and take any associated earnings completely tax-free at retirement, as long as the distribution is a qualified one. A qualified distribution, in this case, is one that is taken at least five tax years after your first Roth 401(k) contribution and after you have attained age 59½ or become disabled or die.
Employer Contributions	IHS Markit will match 100% of the first 3% of pre-tax and/or Roth contributions you make to the Plan and then 50% on the next 3% of pay you defer to your plan.
Contribution Limits	The IRS contribution limit for 2022 is \$20,500. If you have reached age 50 or will reach 50 during the calendar year January 1– December 31 and are making the maximum plan or IRS pre-tax contribution, you may make an additional “catch-up” contribution each pay period. The maximum annual catch- up contribution for 2022 is \$6,500.
Investments	The Plan offers you a range of options to help you meet your investment goals. You can select a mix of investment options that best suits your goals, time horizon, and risk tolerance. Descriptions of the Plan's investment options and their performance are available online at www.401k.com .
Vesting	You are always 100% vested in your own contributions and any employer contributions to your Plan account, as well as any earnings on them.
Loans	Although your Plan account is intended for the future, you may borrow from your account for any reason. Log on to NetBenefits for more details or to request a loan.
Withdrawals	Withdrawals from the Plan are generally permitted when you attain age 59½, terminate your employment, retire, become permanently disabled, or have severe financial hardship as defined by the Plan. Refer to the Summary Plan Description or call Fidelity for more details.
Rollovers	You are permitted to roll over eligible pre-tax contributions from another 401(k), 403(b), or governmental 457(b) retirement plan account, or eligible pre-tax contributions from conduit or non-conduit individual retirement accounts (IRAs). Rollovers from Roth and after-tax sources are allowed. Be sure to consider all your available options and the applicable fees and features of each before moving your retirement assets.
Online Beneficiary Designation	It's important to designate a beneficiary for your Plan account. Log on to www.401k.com . Select Profile, then Beneficiaries and follow the steps to designate your beneficiary online.
Fidelity® Personalized Planning & Advice*	Take the time and stress out of managing your own investments with access to a team of professionals that will help you create a plan and stay on track to retirement.
One-on-one consultations	Fidelity representatives are available and can help with enrollment, asset allocation, retirement planning and other questions you have about the Plan.



Accessing your account

Access your Plan account online at www.401k.com. Download the NetBenefits® app from the App Store®, Google Play™ Store, or Windows Store to access your account on your mobile device.

Fidelity is here to help! If you have questions, call 800-835-5087 Monday through Friday, 8:30 a.m. to midnight Eastern time (excluding most holidays). You can also use the automated voice response system, virtually 24 hours, 7 days a week. Para español, llame al 800-587-5282.



Health savings account (HSA)

A Health Savings Account (HSA) is a tax-favored individual savings account available to those who are enrolled in the Green or Gray High Deductible Health Plans. You can contribute to and use this account to pay for eligible health expenses tax-free. IHS Markit will match your contribution up to an annual maximum. You own your HSA.

Plan Highlights

- As defined by the IRS, the HSA contribution limit will be \$3,650 for individual coverage and \$7,300 for family coverage in 2022. The match from IHS Markit goes toward the annual IRS maximum.
- If you are going to turn 55 by the end of the 2022 calendar year, you may contribute an additional \$1,000 per year as a catch-up contribution. TRI-AD's system automatically adds this additional \$1,000 to the annual maximum when appropriate.
- HSA Payroll deductions can be changed anytime during the year by logging onto **www.mybenefits.IHSMarkit.com**.
- Balances of \$1,000 or more are eligible for investment through a mutual fund platform.
- You will receive a debit card called "Benefits Card" that can be used at doctor's offices and the pharmacy. If you have the Health FSA, Limited-use FSA, Dependent Care FSA, and/or Commuter Spending Account, you will use the same Benefits Card for all transactions.
- When using your Benefits Card, or reimbursing yourself online via TRI-AD's system, you can only be reimbursed up to your current available balance.
- Income tax and a tax penalty of 20% applies if the HSA funds are used for non-qualified health expenses.
- You can front load your account at the beginning of the year if you are anticipating large expenses early in the year.
- The IHS Markit HSA is through UMB. You must utilize the HSA through UMB in order to make deposits to the HSA directly through payroll, as well as to receive matching contributions.



All contributions roll over and remain yours, even if you change plans, retire or leave the company.

Maximum contributions

	Green - HDHP	Gray - HDHP
IRS Annual Maximum	\$3,650 Individual/\$7,300 Family	\$3,650 Individual/\$7,300 Family
IHS Markit dollar-per-dollar match maximum	\$350/\$700	\$600/\$1,200
Colleague Maximum Annual Contribution	\$3,300/\$6,600	\$3,050/\$6,100
Age 55+ \$1,000 Catch-up, IRS Annual Maximum	\$4,650/\$8,300	\$4,650/\$8,300
IHS Markit dollar-per-dollar match maximum	\$350/\$700	\$600/\$1,200
Colleague's Age 55+ Maximum Annual Contribution	\$4,300/\$7,600	\$4,050/\$7,100

If you enroll in either of these plans, IHS Markit will match colleague contributions dollar for dollar up to the following maximums:

Green HDHP		Gray HDHP	
\$350	\$700	\$600	\$1,200
for colleague only coverage	for family coverage	for colleague only coverage	for family coverage

Qualified Medical Expenses

Funds you withdraw from your HSA are tax-free when used to pay for qualified medical expenses as described in Section 213(d) of the Internal Revenue Service Tax Code. The expenses must be qualified medical expenses including dental and vision.

A list of these expenses is available on the IRS website,

www.irs.gov in IRS Publication 502, "Medical and Dental Expenses." Any funds you withdraw for non-qualified medical expenses will be taxed at your income tax rate plus 20% tax penalty.



Opening your HSA

Once you have enrolled in either the Green or Gray HDHP Plans, you will receive a Welcome Kit Letter and Account Opening flyer in the mail from TRI-AD. Your HSA will automatically open once you pass CIP (Customer Identification Process). If there are questions regarding your CIP information you will receive email communication or letters from TRI-AD and UMB. Please respond in a timely manner with the requested documentation.



Flexible spending accounts (FSAs)

Healthcare FSA

- ✓ Reimburses eligible medical, dental, vision or Rx expenses for you, your spouse or your eligible dependents.
- ✓ Can be used to pay for certain medical expenses not covered by insurance plan, such as deductibles, co-pay and coinsurance payments, for anyone you claim as a dependent on your tax return.
- ✓ You'll receive a Benefits Card, for easy access to your savings. Use it to pay for eligible health care expenses and services at the point of purchase.
- ✓ Funds will automatically be deducted from your Healthcare FSA, reducing your account balance. You may be required to provide documentation for expenses.
- ✓ You can also submit a claim form or electronically via TRI-AD's system.
- ✓ You can utilize your full annual election amount as of January 1.

For more information and a list of most eligible and ineligible expenses, review the IRS Publications available at www.irs.gov, specifically Publication 502, "Medical and Dental Expenses".

2022 Healthcare FSA limits can be found at www.irs.gov

Limited purpose health FSA

The Limited Purpose Health FSA is a flexible spending account that reimburses you for eligible dental and vision expenses only. It is only available to employees who are enrolled in a High Deductible Health Plan (HDHP) and HSA. You can save money on taxes by using money from this account for your dental and vision expenses, while preserving your HSA funds for other purposes, including saving funds for the future.

Dependent care FSA

- ✓ Set aside money to pay for eligible non-medical dependent care expenses such as child care or adult care center, summer day camp, or a caregiver for an elderly or incapacitated dependent.

To make a claim, you will need to complete a claim form (available at www.mybenefits.ihsmarkit.com) and attach itemized receipts that include:

- ✓ The dependent's name(s)
- ✓ The period during which the services were rendered
- ✓ The name, address, and Taxpayer ID or Social Security number of the individual or organization providing services

Alternatively, if the above information is documented on the reimbursement form, you can have the provider sign the reimbursement form in place of a receipt.

Dependent Care FSA limits:

Up to \$5,000 if single or married filing a joint tax return, and up to **\$2,500 if married** filing an individual tax return.

You may be required to file Form 2441 with your annual income tax return. This form provides information about the person or organization providing the dependent care.

For more information and a list of most eligible and ineligible expenses, review the IRS Publications available at www.irs.gov, specifically Publication 503, "Child and Dependent Care Expenses".

Use your Benefits Card or file a claim at TRI-AD's site www.mybenefits.ihsmarkit.com. You can also view transactions and account balances on this site.

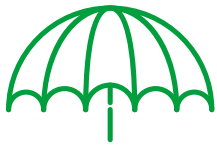


Some debit card transactions may require validation, so make sure to keep all of your itemized receipts and documentation for your health-related expenses.

HSA vs. Health FSA comparison

The below chart identifies the major differences between an HSA and Health FSA

	Health Savings Account	Limited-Use Health FSA	General Purpose Health FSA
Contribution Maximum if you are enrolled in an HDHP with HSA through IHSM or your spouse/DP	In 2022, the individual coverage limit is \$3,650 and the family coverage limit is \$7,300 . These maximums include both employer and employee contributions	\$2,750 for 2021 (2022 limits not published as of the creation of this guide)	N/A
Contribution Maximum if you are not enrolled in an HDHP with HSA through IHSM or your spouse/DP	\$0.00	\$0.00	\$2,750 for 2021 (2022 limits not published as of the creation of this guide)
Contribution election changes during the year	Yes, at any time	No, only within 30 days from a qualified life event	No, only within 30 days from a qualified life event
When can you use the funds?	The money must be in your account before it can be used	The annual contribution election is available once TRI-AD has received enrollment information	The annual contribution election is available once TRI-AD has received enrollment information
Medical expenses	Yes, if enrolled in an HDHP plan and not covered by any other lower deductible health plan	No	No, if enrolled in an HDHP plan. Yes, if in any other plan
Vision & Dental expenses	Yes, if enrolled in an HDHP plan No, if in any other plan	Yes	No, if enrolled in an HDHP plan. Yes, if in any other plan
Over-the-Counter medications	No, see IRS publication 502	No	No, see IRS publication 502
Earns interest on account balance	Yes	No	No
Investment options available?	Yes, account balance must be greater than \$1,000	No	No
Carryover of unused funds	Yes	No	No
Portable when leaving employment	Yes	No	No
Cash-out of unused funds	Yes, but subject to income tax and 20% penalty tax (prior to age 65)	No	No
Accessing funds	Debit card (no charge), checks and ATM (fees apply).	Debit card and submit claim forms (direct deposit available)	Debit card and submit claim forms (direct deposit available)



Life and AD&D insurance

Financial protection for you and your loved ones

IHS Markit provides a number of benefits for you to choose from, designed to provide extra support and make life easier when you need it most.

Basic Life and AD&D Insurance

We provide colleagues with Basic Group Term Life and Accidental Death & Dismemberment (AD&D) Insurance in the amount of two times your annual salary to a maximum of \$1,000,000, or you may choose a flat \$50,000, **at no cost to you**.

If you die during your working years, this benefit can help cover expenses such as:

				
Mortgage Debt	Health Care Costs	College Tuition	Car Loans	Final Expenses

Supplemental Life and AD&D Insurance

In addition to the Company-funded benefit, you can elect for additional Life and AD&D Insurance through UNUM.

You choose the amount of coverage that's right for you, and you keep coverage for a set period of time, or "term." If you die during that term, the money can help your family pay for basic living expenses, final arrangements, tuition and more.

AD&D Insurance is a benefit that covers you if you suffer serious injuries from an accident. It pays an additional amount if you die from a covered accident.

	Life coverage	AD&D coverage
You	Choose from \$10,000 to \$800,000 in \$10,000 increments. You can get up to \$500,000 with no health questions. This is your guaranteed issue amount	Get up to \$800,000 of AD&D coverage for yourself in \$10,000 increments
Your spouse/ Domestic Partner	Get up to 50% of employee's Voluntary Life and Employer Paid Life election combined, in \$5,000 increments Your spouse can get up to \$50,000 with no health questions; if eligible. This is your guaranteed issue amount	Get up to \$500,000 in \$5,000 increments
Your children	Choose \$10,000 of coverage if eligible. One policy covers all of your children until their 26 th birthday	Choose \$10,000 of coverage if eligible



Choosing coverage and designating a beneficiary

When you elect Life and AD&D coverage, you must choose the coverage amount and designate a beneficiary to receive these benefits in the event of your death. For more information on how to calculate your costs and update your beneficiary information, visit www.mybenefits.ihsmarkit.com.

We would recommend that you review and update your beneficiary elections during each year's Open Enrollment; however, changes can be made at any time. You can end coverage at any time, you can only enroll at Open Enrollment or following a life event. The beneficiary for spouse/Domestic Partner and child(ren) life insurance is automatically the employee.

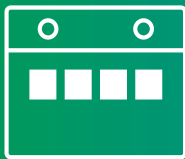


Disability

Peace of mind

Have you ever thought about how your family would manage if an accident or major illness kept you from working for an extended period?

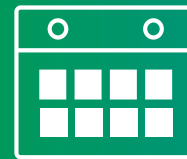
Most people would have a hard time getting by without a regular paycheck, so Disability Insurance, replaces a portion of your income if you aren't able to work due to illness or injury.



Short-Term Disability

Short-term disability offers you payment should you become unable to work due to your own illness or injury. There is a benefit **waiting period of 7 calendar days** for an illness, accident, injury or hospitalization. Your benefit will begin on the eighth day.

Your monthly paycheck is protected at **100%** for the first 13 weeks (following the initial 7 day waiting period), then at 60% for weeks 14 – 26.



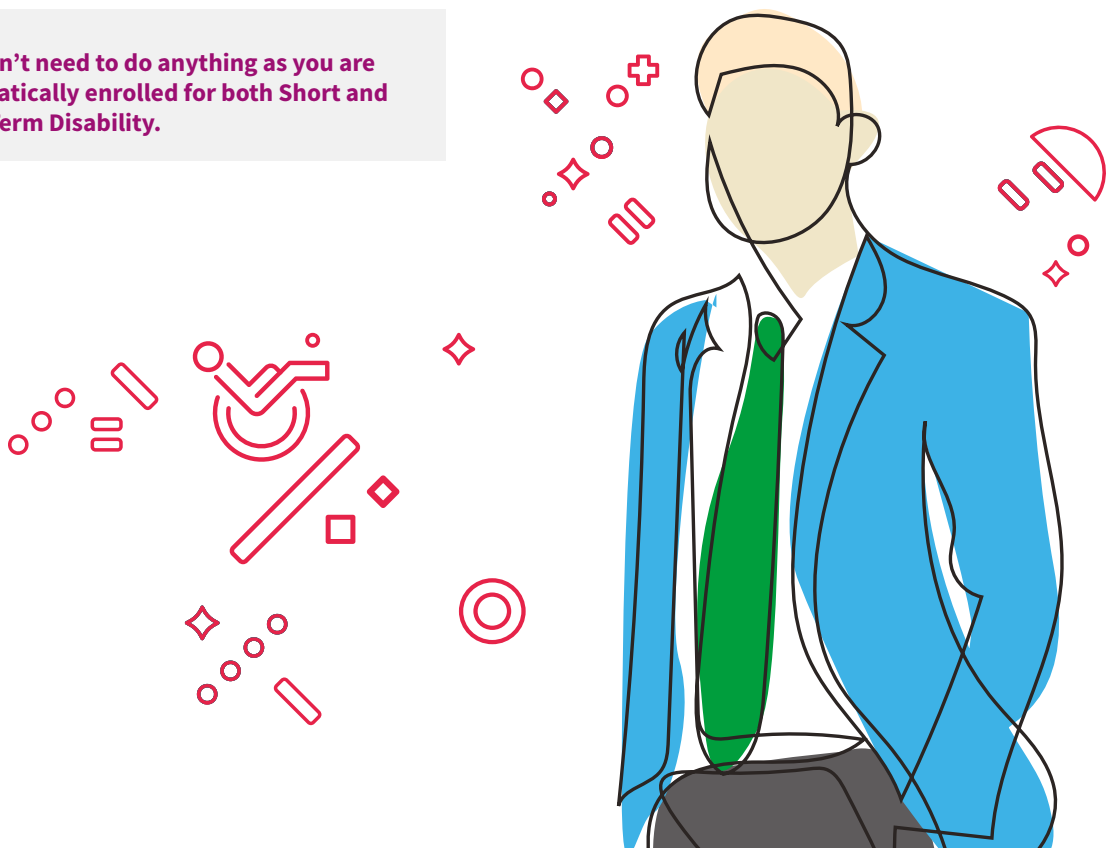
Long-Term Disability

Long-term disability offers you a **maximum benefit of \$15,000 a month** should you become unable to work due to illness or injury. There is a benefit **waiting period of 180 days for an illness**, accident, injury or hospitalization.

The benefit offers you **50%** of annual salary (post-tax) which means the amount that you receive if you become disabled is not taxable to you. The maximum benefit period is to age 65 or normal retirement age.



You don't need to do anything as you are automatically enrolled for both Short and Long-Term Disability.





Accident and Critical Illness

Critical Illness with Reliance Standard

Critical Illness Insurance is designed to protect your income and personal assets when your out-of-pocket expenses increase as a result of an illness. Health insurance is not always enough to cover all of the unforeseen expenses associated with a serious medical condition like a heart attack or cancer. Critical Illness Insurance pays a lump sum benefit that can be used any way you choose and benefits are paid in addition to any other insurance coverage you may have.

Covered illnesses payment percentages	
Heart Attack	100%
Stroke	100%
Major Organ Transplant	100%
End Stage Renal (Kidney) Failure	100%
Invasive Cancer	100%
Stroke	100%



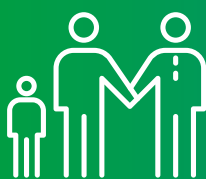
For more information on these benefits, visit www.reliancestandard.com/IHSMarkit

The benefit amount is based on the coverage level you elect – \$10,000 to \$30,000, in increments of \$10,000 with a Guaranteed Issue of \$30,000.

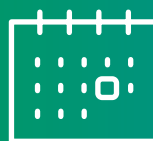
Plan features:



You do not have to be terminally ill to receive benefits.



Coverage options are available for your spouse and children as riders to your coverage at 50% of the coverage you elect for yourself.



A Health Screening Benefit Rider is included, which provides a \$50 benefit per insured per calendar year for covered health screening tests (not available in all states).



Coverage is portable — you can take your policy with you if you change jobs or retire. Costs vary depending upon factors such as your age, whether you use tobacco, and the dependent coverage you choose.

The policy/certificate of coverage or its provisions, as well as covered illnesses, may vary or be unavailable in some states. In New York, a Specified Disease product is offered. The policy/certificate of coverage has exclusions and limitations which may affect any benefits payable. See the product brochure, certificate of coverage and any applicable riders for a complete list of covered conditions, along with complete provisions, exclusions and limitations.

Why we offer critical illness & accident insurance

Medical insurance, no matter how generous, does not prevent all of the financial strain of a major illness or injury. You can be exposed to up to \$20,000 if you or a family member becomes seriously sick or injured.

Many families don't have enough in their savings to cover the deductible and coinsurance of a major medical event. Supplemental medical benefits, like Critical Illness and Accident Insurance, can help cover this out-of-pocket financial exposure for a reasonable cost. The benefits are paid directly to you, allowing you to use the funds however you choose. You receive the full benefit even if you have other insurance.

Detailed plan information on both the Critical Illness and Accident Insurance plans can be found on the [Open Enrollment microsite](#).

Accident Insurance with Reliance Standard

Accidents happen. You can't always prevent them, but you can reduce your exposure to the financial impact. Accident Insurance pays a lump sum directly to you if you suffer a range of covered injuries such as a fracture, burn, ligament damage or major concussion. Benefits are paid even if you have other coverage.

The benefit amount is calculated based on the type of injury, its severity and what medical services are required in treatment and recovery. The plan covers a wide variety of injuries and accident-related expenses, including:

- Injury Treatment (fractures, dislocations, concussions, burns, lacerations, and more)
- Hospitalization
- Physical Therapy
- Emergency Room Treatment
- Transportation

Plan features:

- ✓ **Guaranteed Acceptance:** There are no health questions or physical exams required.
- ✓ **Family Coverage:** Options are available for your spouse and children.
- ✓ **Portable Coverage:** You can take your policy with you if you change jobs or retire.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable.

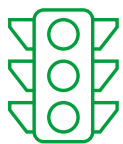
How accident insurance works

Sam tears a knee ligament that requires extensive treatment and rehab. Even with medical insurance, this will cost Sam \$3,000 out-of-pocket in deductibles and coinsurance. Fortunately, Sam has Accident Insurance. This coverage paid Sam a total benefit of \$2,640. Rather than \$3,000 out of his savings, the injury only costs Sam \$360...much better.

How sam's accident benefit was calculated:

Medical service benefit	
Emergency Room	\$300
Ligament Surgery	\$1,500
Anesthesia	\$300
Physical Therapy (\$90 for six visits)	\$540
Total benefit	\$2,640

This scenario does not reflect the benefits of a specific Accident Insurance plan schedule. The benefits are generic benefits for the purposes of this example to show how the benefit total of an Accident Insurance plan is calculated. The plan offered to you may offer different benefit amounts and may not cover all services. See the plan details for the benefit schedule for the plan offered to you.



Commuter benefit plan

Transit and parking

You can use your Benefits Card to pay for commuter expenses with money you set aside on a pre-tax basis from your paycheck.

The Commuter Benefit Plan helps reduce the bite that commuting expenses take out of your budget by letting you pay for eligible expenses with tax-free dollars, up to \$270 for 2021* per month for transit and \$270 per month for parking.

Eligible expenses include public transportation, such as trains, buses, subways, ferries and vanpools. Parking at or near your place of employment, or at a location from which you commute to work, is also part of the plan.

**Commuter Plan IRS limits are not yet posted as of publication for 2022*



Ready

Enroll in the Commuter Spending Account at the same time you select your other benefits. You can enroll in either parking, transit or both. Elect the amount you would like to contribute per pay period.



Set

Once your deductions are taken from your paycheck, you can use your Benefits Card for transit, parking expenses, or to purchase directly. You submit your receipts for reimbursement via the mobile app or online.



Go

Enjoy commuting at a fraction of the cost!

For more information

Please contact TRI-AD Participant Services:



888 844 1372

Monday-Friday

5:00 a.m. - 6:00 p.m. (Pacific Time)



www.tri-ad.com/commute



commute@tri-ad.com



InfoArmor PrivacyArmor Plus

Hold on to who you are

Identity theft is one of the fastest growing crimes in America. Your identity is made up of more than your Social Security number and bank accounts.

While it may not be possible to prevent identity theft, it is still important to take steps to help protect yourself. To ensure that our colleagues have access to the latest identity protection services, IHS Markit has partnered with InfoArmor, an Allstate company, to offer Armor Plus® as a voluntary benefit available for all US Active IHS Markit colleagues.

Aarmor Plus® not only monitors your credit reports and scores, but safeguards your personal information, the data you share, and the relationships you treasure. Their new proprietary tools stay one step ahead – allowing InfoArmor to catch fraud as it happens. This includes identity monitoring and alerts, full-service remediation, identity theft reimbursement, an iOS and Android app.

PrivacyArmor Plus features:

- Run your personalized Allstate Digital Footprint and see your digital exposure
- Check your identity health score
- View, manage, and clear alerts in real time
- Monitor your credit scores and reports for any changes or errors
- Reduce solicitation attempts by opting out of credit card offers, telemarketing calls, commercial mail and email, and unrequested coupons
- Get reimbursed for stolen 401(k) & HSA funds; we'll also advance fraudulent tax returns
- Protect your account biometric authentication security in iOS and Android

There are four tiers of coverage:



Employee Only



Employee + Spouse/DP



Employee + Children



Employee + Spouse/DP + Children

* The scores you receive with Identity Guard® are provided for educational purposes to help you understand your credit. They are calculated using the information contained in your Equifax, Experian and TransUnion credit files. Lenders use many different credit scoring systems, and the scores you receive with Identity Guard are not the same scores used by lenders to evaluate your credit.

** Identity Theft Insurance underwritten by insurance company subsidiaries or affiliates of American International Group, Inc. The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.



For more information about the Identity Guard Total Protection benefit plan please visit the IHS Markit dedicated website at <https://www.privacyarmor.com/ihsmarkit>



LegalEase legal services

Save time and money with legal insurance

Legal insurance helps you address everyday situations like handling traffic tickets, resolving warranty issues or buying a home. When you need help, don't waste time looking for the right attorney or paying costly attorney fees, which average \$323 per hour.

LegalEase offers top-performing legal insurance featuring:

- **In-office services:** Meet with an experienced attorney who can advise and represent you when you need someone on your side.
- **Telephone advice:** Talk to a legal professional over the phone when you need information and direction to address your legal matters.
- **Online resources:** The LegalEase website provides online tools and useful information to help you learn more about your legal issues on your own.
- **Identity Theft Protection:** Includes legal advice and consultation, a personal recovery kit and document review.

Top plan uses:



Consumer Protection

Get advice from an attorney for cell phone contract disputes, warranty disputes and small claims court representation.



Estate Planning

Meet with an attorney to protect your life's work with a will, living will or the appropriate powers of attorney.



Property Protection

Our Network Attorneys can help you address neighbor disputes, tenant and landlord disputes and construction defects.



Family

When your family faces a challenge in life, whether it's helping an ailing parent, adopting a child or overcoming divorce, our Network Attorneys are ready to provide assistance and representation.

What do I get?

- ✓ You will receive in-office access to a nationwide network of more than 10,000 credentialed attorneys.
- ✓ You can call a Network Attorney for unlimited legal advice to help prepare documents, letters or a Will.
- ✓ A list of all services covered can be found on the [Open Enrollment microsite](#).



IHS Markit offers a Hospital Indemnity plan with Reliance Standard for extra coverage in case you are hospitalized. This benefit pays a lump sum for a hospital admission and a per day confinement allotment due to sicknesses or accidents.

Hospital Admission Benefit:

\$1,000
per year

Hospital Confinement Benefit:

\$100

(180 day maximum/year)

Hospital ICU Confinement Benefit:

\$200

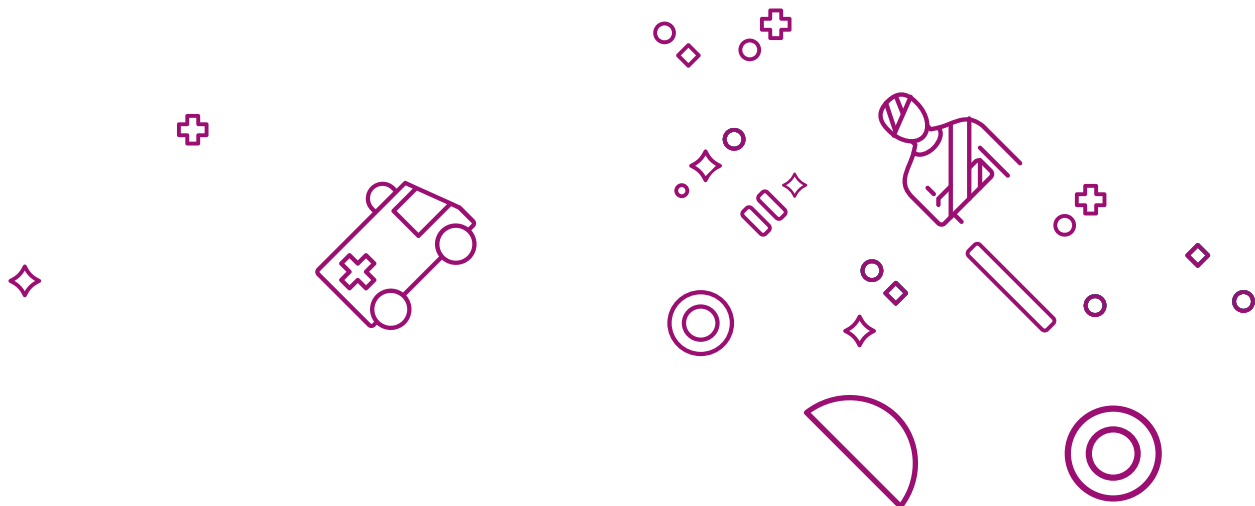
(30 day maximum/year)

These benefits cover hospitalizations including maternity (newborns eligible for their own hospital admission and confinement benefit), mental and substance abuse, and COVID-19.

Plan features:

- ✔ **Guaranteed Acceptance:** There are no health questions or physical exams required.
- ✔ **Family Coverage:** Options are available for your spouse and children.
- ✔ **Portable Coverage:** You can take your policy with you if you change jobs or retire.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable.



Medicare Transition Services

Are you turning 65 soon?

If so, this means you will soon be eligible for Medicare - even if you choose to keep working after your 65th birthday. As you approach this date, it's smart to consider your health care needs and whether it makes sense to switch from group health coverage to a Medicare plan. But the fact is that many people find Medicare confusing.



Should I enroll—
and when?



What are all the
Medicare parts
about?



How much will I pay
out of pocket?



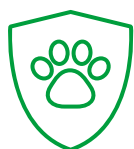
What's a Medicare
Advantage plan, and
is it right for me?

These are just a few of the questions people ask along their Medicare journey. Breathe easier – IHS Markit has a solution to help, the Medicare Transition Services team.

This team can provide answers to many of your questions and give you confidence to arrive at the best decision for you and your family. They'll also help you shop Medicare Advantage or Supplemental plans if you choose to go that route.



Get started by calling the Medicare Transition
Services team at 888-675-0449 (TTY: 711) or visit
[MedicareTransitionServices.com](https://www.MedicareTransitionServices.com)



Pet insurance

Insurance for all the family

Pet ownership can get expensive. With veterinary care costs rising, we understand how important it is for colleagues with pets to find affordable, quality care for their four-legged family members.

You can benefit from a group discount when you enroll in Pet Insurance from Nationwide and choose a Pet Plan which fits your needs.

	my pet protection with wellness	my pet protection
Accidents, including poisonings and allergic reactions	✓	✓
Injuries, including cuts, sprains and broken bones	✓	✓
Common illnesses, including ear infections, vomiting and diarrhea	✓	✓
Serious/chronic illnesses, including cancer and diabetes	✓	✓
Hereditary and congenital conditions	✓	✓
Surgeries and hospitalization	✓	✓
X-rays, MRIs and CT scans	✓	✓
Prescription medications and therapeutic diets	✓	✓
Wellness exams	✓	
Dental cleaning	✓	
Vaccinations	✓	
Spay/neuter	✓	
Flea and tick prevention	✓	
Heartworm testing and prevention	✓	
Routine blood tests	✓	

Nationwide, like all other pet insurers, doesn't cover pre-existing conditions, but they do go above and beyond with extra features such as emergency boarding, lost pet advertising and more.

Get **cash back** on eligible vet bills. Choose from three levels of reimbursement: 90%, 70% or 50%.

All policies have 24/7 access to the exclusive Vethelpline, where you can talk to a live veterinarian for free.



You can enroll or terminate your coverage at any time not just during the Open Enrollment window. To enroll, please visit www.petinsurance.com/ihsmarkit to get a quote or for more information.

Please note you cannot terminate/cancel pet insurance through TRI-AD. You must contact Nationwide directly to cancel your policy.

Easy enrollment



* To enroll your bird, rabbit, reptile or other exotic pet, call **888-899-4874**.

A close-up, low-angle shot of a person riding a bicycle on a gravel path. The image is bathed in the warm, golden light of a setting or rising sun, creating a strong lens flare effect. The focus is on the front wheel and the rider's leg in motion. A semi-transparent green and blue gradient box is overlaid on the right side of the image, containing the text "Lifestyle benefits".

Lifestyle benefits



Business travel insurance

Protection for you when you're on the move

To keep you safe and healthy while traveling for IHS Markit business, we have partnered with the following organizations to help provide you peace of mind.

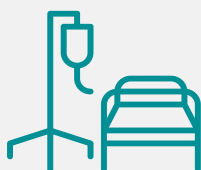
ACE USA/AXA

ACE Travel Assistance services are only a phone call away. You may call anytime to get assistance you need to help manage your travel risk. As an ACE client, you may reach a multilingual coordination center 24 hours a day, 365 days a year by calling toll-free **1-800-243- 6124** in the U.S. or Canada or **1-202-659-7803** collect outside the USA.

Call ACE when:



You require a referral to a hospital or doctor



You are hospitalized



You need to guarantee payment for medical expenses

Highlighted Benefits

- ✓ Accidental Death benefits are equal to 5 times basic annual salary (to USD \$1 ,000,000)
- ✓ Permanent Total Disability benefits of 5 times basic annual salary (to USD \$1 ,000,000)
- ✓ Out-of-Country Emergency and Urgent Care medical coverage for accidents or Sickness (to USD \$1 ,000,000)
- ✓ Loss of Personal Effects for lost baggage and other personal property (to USD \$2,000)
- ✓ Trip interruption due to death in the family, injury or sickness to yourself or a family member, and a substantial destruction of your principal residence by fire or weather related activity while you are traveling



INTERNATIONAL SOS (ISOS)

Access a wealth of destination-specific information to make informed decisions about your health and safety when traveling abroad. For more information, visit **internationalsos.com** and enter **Member ID: 11BCPS000225**.





Employee Assistance Program (EAP)

Here for you

Whenever, wherever, there's always someone to help you and your family.

Sometimes balancing work, home, family, finances, health, and well-being can seem challenging, and we want to make sure that you have access to the advice and support that you need. Your ComPsych® GuidanceResources® program offers someone to talk to and resources to consult whenever and wherever you need them.

As an IHS Markit colleague, you and any household members living in your home have access to a number of free services, including:



Confidential emotional support

Our highly trained clinicians will listen to your concerns and help you or your family members with any issues, including:

- Anxiety, depression, stress
- Grief, loss and life adjustments
- Relationship/ marital conflicts

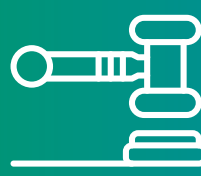
You can receive three face-to-face counseling sessions per person, per issue, per year as part of this service.



Work-Life solutions

Our specialists provide qualified referrals and resources for just about anything on your to-do list, such as:

- Finding child and elder care
- Hiring movers or home repair contractors
- Planning events, locating pet care



Legal guidance

Talk to our attorneys for practical assistance with your most pressing legal issues, including divorce, adoption, family law, wills, trusts and more.

Need representation?

Get a free 30-minute consultation and a 25% reduction in fees



Financial resources

Our financial experts can assist with a wide range of issues.

Talk to us about:

- Retirement planning, taxes
- Relocation, mortgages, insurance
- Budgeting, debt, bankruptcy

Access these services

All of these services and more are available to all household members free, strictly confidential and accessible 24 hours per day, 365 days per year.



855 327 4447



www.guidanceresources.com
using the web ID: IHSMarkit



Employee discounts

Discount Partnerships

Did you know employees of IHS Markit can take advantage of a number of different discount partnerships?

You can save on things like:

Carfax report

Travel

Lyft



Access your discounts:

INFOnet under Global Benefits/ Discount partnerships



Lifestyle benefits (continued)



Gympass

We know that staying physically and mentally well is not easy. That's why Gympass offers you the chance to stay active and well anytime, anyplace. Even at your place.

Gympass gives you access to:

- Live streamed classes
- One-on-one personal training sessions • Wellness apps and on-demand fitness content
- Gyms and studios

Enroll in any Gympass plan to start enjoying the digital features! Find classes for beginners, pros and everyone in-between. Choose one of the flexible plans from basic to premium.

Download the Gympass app in the Apple App Store or Google Play Store. View plans and studios:
www.gympass.com/us



Key contacts

If you have any questions or need further information, please contact the benefit providers.

Benefit	Provider	Contact information	Website
Benefits questions or Life Events	TRI-AD	(844) 678-1670	www.mybenefits.ihsmarkit.com
Medical	Aetna	(855) 616-2361	www.aetna.com
Pharmacy	CVS	(800) 552-8159	www.caremark.com
Dental	Delta	(800) 610-0201	www.deltadentalco.com
Vision	VSP	(800) 877-7195	www.vsp.com
Life Insurance, Disability, FMLA	UNUM	(866) 779-1054	www.unum.com/claims
HSA, FSA, Commuter, COBRA	TRI-AD	(844) 678-1670	www.mybenefits.ihsmarkit.com
Healthcare Navigation	Health Advocate	(866) 695-8622	www.healthadvocate.com/members
401(k)	Fidelity	(800) 835-5087	www.401k.com
Reliance Standard	Accident/Critical Illness/Hospital Indemnity	(800) 351-7500	www.reliancestandard.com/IHSMarkit
Identity Theft	Info Armor	(800) 789-2720	www.infoarmor.com
Legal	Legalease	(800) 248-9000	www.legaleaseplan.com/ihsmarkit
Gym/Fitness	Gympass	(844) 478-4744	www.gympass.com/us
EAP	ComPsych	(855) 327-4447	www.guidanceresources.com Company ID: IHSMarkit
Global Travel	ISOS	(215) 942-8226	www.internationalsos.com



Visit the [US Benefits INFOnet](#) page for the most recent legal notices.

Monthly Rates at a Glance

Medical Rates

Salary Level	Coverage Level	Employee Rate
White PPO/POS		
< \$75,000 annual salary	Employee Only	\$263.20
	Employee & Spouse	\$622.54
	Employee & Child	\$397.80
	Employee & Children	\$567.26
	Employee & Spouse & Child	\$713.88
	Employee & Family	\$890.55
	Taxable Domestic Partner	\$359.34
\$75,000 - \$149,999 annual salary	Employee Only	\$296.93
	Employee & Spouse	\$701.16
	Employee & Child	\$447.90
	Employee & Children	\$638.78
	Employee & Spouse & Child	\$803.47
	Employee & Family	\$1003.09
	Taxable Domestic Partner	\$404.23
>\$150,000 annual salary	Employee Only	\$335.22
	Employee & Spouse	\$790.80
	Employee & Child	\$504.77
	Employee & Children	\$719.62
	Employee & Spouse & Child	\$905.99
	Employee & Family	\$1131.19
	Taxable Domestic Partner	\$455.58

Salary Level	Coverage Level	Employee Rate
Green HDHP (HSA)		
< \$75,000 annual salary	Employee Only	\$121.38
	Employee & Spouse	\$298.05
	Employee & Child	\$189.89
	Employee & Children	\$270.41
	Employee & Spouse & Child	\$342.52
	Employee & Family	\$429.05
	Taxable Domestic Partner	\$176.67
\$75,000 - \$149,999 annual salary	Employee Only	\$135.99
	Employee & Spouse	\$335.61
	Employee & Child	\$213.34
	Employee & Children	\$304.42
	Employee & Spouse & Child	\$385.51
	Employee & Family	\$484.08
	Taxable Domestic Partner	\$199.62
>\$150,000 annual salary	Employee Only	\$154.02
	Employee & Spouse	\$379.22
	Employee & Child	\$240.73
	Employee & Children	\$342.98
	Employee & Spouse & Child	\$434.88
	Employee & Family	\$544.89
	Taxable Domestic Partner	\$225.20

Salary Level	Coverage Level	Employee Rate
Gray HDHP (HSA)		
< \$75,000 annual salary	Employee Only	\$82.93
	Employee & Spouse	\$218.73
	Employee & Child	\$135.81
	Employee & Children	\$193.49
	Employee & Spouse & Child	\$249.98
	Employee & Family	\$312.47
	Taxable Domestic Partner	\$135.80
\$75,000 - \$149,999 annual salary	Employee Only	\$93.57
	Employee & Spouse	\$247.03
	Employee & Child	\$153.46
	Employee & Children	\$218.33
	Employee & Spouse & Child	\$280.71
	Employee & Family	\$351.83
	Taxable Domestic Partner	\$153.46
>\$150,000 annual salary	Employee Only	\$104.84
	Employee & Spouse	\$278.27
	Employee & Child	\$173.43
	Employee & Children	\$245.91
	Employee & Spouse & Child	\$317.10
	Employee & Family	\$396.05
	Taxable Domestic Partner	\$173.43

Dental

Coverage	Employee Rate
Employee (EE)	\$17.00
EE + Spouse/DP	\$31.00
EE + Children	\$35.00
EE + Spouse/DP + Children	\$56.00
Taxable Domestic Partner	\$14.00

Vision

Coverage	Employee Rate
Employee (EE)	\$7.68
EE + Spouse/DP	\$14.57
EE + Child(ren)	\$16.12
EE + Spouse/DP + Child(ren)	\$26.09
Taxable Domestic Partner	\$6.89

Identity Theft

Coverage	Employee Rate
Employee (EE)	\$9.95
All other coverage levels	\$17.95

LegalEase Legal Services

Coverage	Employee Rate
All coverage levels	\$17.78

Supplemental Life

Age	Employee amount per \$1,000	Spouse/DP amount per \$1,000	Child(ren) amount per \$1,000
Less than 25	\$0.048	\$0.048	\$0.115
25-29	\$0.058	\$0.058	\$0.115
30-34	\$0.077	\$0.077	\$0.115
35-39	\$0.096	\$0.096	\$0.115
40-44	\$0.154	\$0.154	\$0.115
45-49	\$0.230	\$0.230	\$0.115
50-54	\$0.353	\$0.353	\$0.115
55-59	\$0.660	\$0.660	\$0.115
60-64	\$1.014	\$1.014	\$0.115
65-69	\$1.950	\$1.950	\$0.115
70-74	\$2.640	\$2.640	\$0.115
75 and over	\$2.640	\$2.640	\$0.115

Supplemental AD&D Insurance

Coverage	Employee Rate
Employee (EE)	\$0.029
EE + Spouse/DP	\$0.029
EE + Child(ren)	\$0.029

Accident Insurance

Coverage	Employee Rate
Employee (EE)	\$7.80
EE + Spouse/DP	\$12.50
EE + Child(ren)	\$15.46
EE + Spouse/DP + Child(ren)	\$20.16

Critical illness insurance

Age	Non-Tobacco	Tobacco
<25-29	\$0.30	\$0.40
30-34	\$0.38	\$0.52
35-39	\$0.47	\$0.69
40-44	\$0.64	\$1.11
45-49	\$0.89	\$1.94
50-54	\$1.28	\$2.86
55-59	\$1.77	\$3.75
60-64	\$2.54	\$4.84
65-69+	\$3.78	\$5.44

Hospital Indemnity

Coverage	Employee Rate
Employee Only	\$19.52
Employee + Spouse/DP	\$41.17
Employee + Child(ren)	\$29.27
Employee + Spouse/DP + Child(ren)	\$50.92



For more information regarding rates and any other associate costs, visit the Reference Center section at www.mybenefits.ihsmarkit.com



Important note: All benefits are discretionary and may be changed from time to time. If any of the above information differs when compared to the benefit policy currently in place and/or current legislation, the policy and/or legislation will prevail. If there are any specific questions regarding personal circumstances or if further details are required, please contact the **HR Services team**.

For any HR related questions, please log a ticket on the HR Services portal.

Benefits administered by TRI-AD

Email: ihsmarkitbenefits@tri-ad.com

Tel: (844) 678-1670