



# 2018 Benefits at-a-glance

Welcome to a brief overview of the RELX Inc. benefits offerings, highlighting health and well-being and retirement programs available to eligible employees and their eligible dependents.

# Health Benefits Overview

RELX offers a multi-carrier benefits program that will allow you to align your health plan choices with your personal needs and your budget. All US benefits-eligible employees can choose from several medical plans of varying coverage levels and costs. RELX health and insurance benefits are administered by a trusted partner, Alight Solutions.

RELX employees share in the cost of health benefits through a bi-weekly contribution from their paycheck.

**NOTE:** This contribution is based on your base salary plus target incentive (if applicable), where you live and who you choose to cover.

**For a more comprehensive look at the following RELX medical, dental and vision benefits, to help you decide which are right for you, and to enroll, log in at [relxbenefitscenter.com](http://relxbenefitscenter.com) or call 1-877-734-1938, Option 1**

## Eligibility: Immediate, but you must enroll within 30 days of your hire date

- Full- & part-time employees working 20 hrs/week or more are eligible
- Same- & opposite-sex partners are eligible
- You are required to provide documentation verifying eligibility if you choose to cover spouse, domestic partner and/or child(ren)
- Benefits begin on your life event or hire date and will be subject to catch-up premium payments once you enroll
- **\$65 per-paycheck Working Spouse/Domestic Partner Surcharge** applies if your spouse/DP is eligible for coverage from their employer

## Medical Coverage Levels

<p><b>Bronze</b> <i>Basic, high deductible</i></p>	<ul style="list-style-type: none"> <li>• In- and out-of-network coverage with cost savings in-network; comes with a tax-advantaged Health Savings Account (HSA)</li> <li>• Pay more in payroll contributions and less out of pocket when receiving care</li> <li>• <b>In-network deductibles: \$3,000 Single / \$6,000 Family</b> before coinsurance begins</li> <li>• <b>Coinsurance:</b> After the deductible is met, the plan covers <b>80%</b> of the cost and you'll pay <b>20%</b> for in-network care</li> <li>• <b>Annual Out of Pocket Maximums: \$5,950 Single / \$11,900 Family</b></li> <li>• Combines with prescription expenses to meet deductible (<i>some preventive Rx excluded</i>)</li> <li>• Free in-network preventive care (<i>some restrictions apply</i>)</li> </ul>
<p><b>Bronze Plus</b> <i>Buy-up to basic, high deductible</i></p>	<ul style="list-style-type: none"> <li>• In- and out-of-network coverage with cost savings in-network; comes with a tax-advantaged HSA</li> <li>• Pay more in payroll contributions and less out of pocket when receiving care</li> <li>• <b>In-network deductibles: \$2,250 Single / \$4,500 Family</b> before coinsurance begins</li> <li>• <b>Coinsurance:</b> After the deductible is met, the plan covers <b>80%</b> of the cost and you'll pay <b>20%</b> for in-network care</li> <li>• <b>Annual Out of Pocket Maximums: \$3,575 Single / \$7,150 Family</b></li> <li>• Combines with prescription expenses to meet deductible (<i>some preventive Rx excluded</i>)</li> <li>• Free in-network preventive care (<i>some restrictions apply</i>)</li> </ul>
<p><b>Silver</b> <i>High deductible with lower deductible than Bronze options</i></p>	<ul style="list-style-type: none"> <li>• In- and out-of-network coverage with cost savings in-network; comes with a tax-advantaged HSA</li> <li>• Pay more in payroll contributions and less out of pocket when receiving care</li> <li>• <b>In-network deductibles: \$1,500 Single / \$3,000 Family</b> before coinsurance begins</li> <li>• <b>Coinsurance:</b> After the deductible is met, the plan covers <b>80%</b> of the cost and you'll pay <b>20%</b> for in-network care</li> <li>• <b>Annual Out of Pocket Maximums: \$3,575 Single / \$7,150 Family</b></li> <li>• Combines with prescription expenses to meet deductible (<i>some preventive Rx excluded</i>)</li> <li>• Free in-network preventive care (<i>some restrictions apply</i>)</li> </ul>
<p><b>Gold</b> <i>Preferred provider organization (PPO) with low deductible</i></p>	<ul style="list-style-type: none"> <li>• In- and out-of-network coverage with cost savings in-network</li> <li>• Pay less out of pocket when receiving care and more in payroll contributions</li> <li>• <b>In-network deductibles: \$600 Single / \$1,200 Family</b> before coinsurance begins</li> <li>• <b>Coinsurance:</b> After the deductible is met, the plan covers <b>80%</b> of the cost and you'll pay <b>20%</b> for in-network care</li> <li>• <b>Annual Out of Pocket Maximums: \$3,500 Single / \$7,000 Family</b></li> <li>• Prescription copays are not subject to the deductible, medical copays are after satisfying small deductible</li> <li>• Free in-network preventive care (<i>some restrictions apply</i>)</li> </ul> <p><b>NOTE:</b> This option is <b>not</b> HSA-eligible, but is eligible for a Healthcare Flexible Spending Account (HC FSA)</p>
<p><b>Platinum</b> <i>Preferred provider organization (PPO) with no deductible</i></p>	<ul style="list-style-type: none"> <li>• In-network coverage; limited out-of-network coverage (check with carrier)</li> <li>• Pay less out of pocket when receiving care and more in payroll contributions</li> <li>• <b>In-network deductibles: None</b></li> <li>• <b>Annual Out of Pocket Maximums: \$1,500 Single / \$3,000 Family</b></li> <li>• Free in-network preventive care (<i>some restrictions apply</i>)</li> </ul> <p><b>NOTE:</b> This option is <b>not</b> HSA-eligible, but is eligible for a Healthcare Flexible Spending Account (HC FSA)</p>

Health Savings Account (HSA)	Healthcare Flexible Spending Account (HC FSA)
<b>Eligible for bronze, bronze plus and silver coverage levels only</b>	<b>Eligible for HC FSA if NOT enrolled in HSA</b>
A bank account for eligible healthcare expenses that rolls over each year, and is portable. Use the funds today or save for future medical expenses, even after retirement. Your account comes with a debit card	\$2,600 annual maximum helps pay for eligible out-of-pocket healthcare expenses for you and your dependents. Your account comes with a debit card.
For IRS qualified medical/prescription drug use expenses. Visit: <a href="https://www.irs.gov">irs.gov</a>	IRS-approved tax savings on eligible healthcare expenses Eligible expenses: <a href="https://www.irs.gov/publications/p502">irs.gov/publications/p502</a>
Contribute tax-free and change your contribution amount anytime	Use it or lose it: these funds do not roll over from year to year — budget and track wisely!
You and your covered spouse/domestic partner can earn HSA incentive funds by completing annual well-being activities*	Call Optum: 1-800-791-9361
Visit: <a href="https://optumbank.com">optumbank.com</a>	

\*Employees and medically-covered spouses and domestic partners are eligible for \$250 after completing both wellness incentive activities.

Dental Coverage Levels			
Bronze	Silver	Gold	Platinum <sup>1</sup>
A basic Dental Preferred Provider Organization (DPPO) plan option that covers in- and out-of-network care. You'll receive a discounted rate with in-network providers, but it does not cover major services or orthodontic expenses	A buy-up to the basic DPPO option that covers in- and out-of-network care. You'll receive a discounted rate with in-network providers, including coverage for major services and, for children up to age 19, orthodontic expenses	An enhanced DPPO option that covers in- and out-of-network care. You'll receive a discounted rate with in-network providers, including coverage for major services and orthodontic expenses for children and adults	A Dental Health Maintenance Organization (DHMO) option that covers in-network care only, including orthodontic expenses for children and adults. Not available in some limited areas
<b>Annual Maximum:</b> \$1,000/person	<b>Annual Maximum:</b> \$1,500/person	<b>Annual Maximum:</b> \$2,000/person	<b>Annual Maximum:</b> N/A
<b>Annual Deductible (ind/family):</b> \$100/\$300	<b>Annual Deductible (ind/family):</b> \$100/\$300	<b>Annual Deductible (ind/family):</b> \$50/\$150	<b>Annual Deductible (ind/family):</b> N/A
<b>Orthodontia Lifetime Maximum:</b> Not covered	<b>Orthodontia Lifetime Maximum:</b> \$1,500/child	<b>Orthodontia Lifetime Maximum:</b> \$2,000/person	<b>Orthodontia Lifetime Maximum:</b> Varies by insurance carrier
What's Covered: In-Network Dental Benefits			
Preventive Care			
Covered 100%, no deductible	Covered 100%, no deductible	Covered 100%, no deductible	N/A
Minor Restorative Care (e.g., root canal treatment, gum disease treatment and oral surgery)			
You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible	Varies by insurance carrier
Major Restorative Care (e.g., implants, dentures)			
Not covered	You pay 40% after deductible	You pay 20% after deductible	Varies by insurance carrier
Orthodontia			
Not covered	You pay 50%, no deductible; children up to age 19 only	You pay 50%, no deductible; for children and adults	Varies by insurance carrier

<sup>1</sup> Not available in some limited areas. Only the coverage levels for which you are eligible will show as options when you enroll online.

<sup>2</sup> If you switch insurance carriers, any orthodontic expenses you've already incurred under your current carrier will count toward your new carrier's orthodontia lifetime maximum

**NOTE:** The charts within this brochure may not take into account how each coverage level covers any state-mandated benefits, its plan administration capabilities or the approval from the state Department of Insurance of the benefits offered by the plan. If you have questions about a specific benefit, contact the insurance carrier for additional information.

## Vision Coverage Levels

Bronze	Silver	Gold
Exam-only option that provides in-network discounts for certain materials	A PPO option that covers in- and out-of-network care	An enhanced PPO option that covers in- and out-of-network care
What Does it Cost? In-Network Vision Benefits		
Routine Vision Exam (once per plan year)		
Covered 100%	You pay \$20	You pay \$10
Frames		
Discount may apply	\$100 allowance	\$200 allowance
Lenses (once per plan year; includes single vision, bifocal, trifocal, lenticular, standard progressive)		
Discount may apply	You pay \$20	You pay \$10

**NOTE:** The RELX Benefits Center will give a more detailed look at these and additional coverages—and does account for some carrier adjustments to standardized plan benefits. To see summaries when you enroll online, check the boxes next to the options you want to review and click Compare. In order to get the most comprehensive information about any specific coverage, you will need to call the carrier directly.

### HEALTH INSURANCE CARRIER INFORMATION

For comprehensive lists of all the available medical, dental and vision carriers and their contact information visit [relxbenefitscenter.com](https://relxbenefitscenter.com) and click on **Benefits Contacts & Carriers**

### HEALTH & INSURANCE QUESTIONS & “LIFE EVENTS”

Call 1-877-734-1938, Option 1 or visit [relxbenefitscenter.com](https://relxbenefitscenter.com)

# Voluntary & Protection Benefits

For a more comprehensive look at the following RELX voluntary and protection benefits, to help you decide which are right for you, and to enroll, log in at [relxbenefitscenter.com](http://relxbenefitscenter.com) or call 1-877-734-1938 Option 1

Supplemental Hospitalization Insurance (via UnitedHealthcare)	Critical Illness Coverage (via UnitedHealthcare)
<p><b>Eligibility:</b> All benefits-eligible employees; covered spouse/partner and/or eligible child(ren)</p> <ul style="list-style-type: none"> <li>-- Not a replacement for medical insurance;</li> <li>-- Benefits are paid directly to you</li> <li>-- Check policy details about pre-existing conditions and how they could impact your coverage</li> </ul>	<p><b>Eligibility:</b> All benefits-eligible employees; covered spouse/partner and/or eligible child(ren)</p> <ul style="list-style-type: none"> <li>-- Not a replacement for medical insurance</li> <li>-- The plan pays lump sum, tax-free benefits directly to you</li> <li>-- Coverage may be affected by a pre-existing condition</li> </ul>
<p>Purchase additional limited coverage for hospitalization costs</p>	<p>Several coverage options available, ranging from \$5,000–\$30,000, with rates based on age</p>
<p>\$1,000 minimum per enrolled family member per year. Additional \$250-\$500 per day, after the first day, depending on time spent in ICU</p>	<p>Employees earning under \$70,000: Base coverage of \$5,000 will automatically be provided by RELX to you and your covered dependents at no cost</p>

DISABILITY INSURANCE (via UNUM)	
<b>Short-term</b>	<p>The plan will pay either 100%, or 66 2/3% of your earnings, or a combination thereof, for up to 25 weeks depending on length of service, after the five working-day elimination period</p> <p>Shorter service employees receive a shorter duration of paid benefits</p> <p>Subject to approval by Unum, the plan's administrator; to initiate STD, call 1-800-ask-unum; 1-800-275-8686</p>
<b>Long-term (Basic)</b>	<p>After 25 weeks of short-term disability, the plan will pay 50% of monthly earnings; maximum monthly benefit: \$14,583</p> <p>Subject to approval by Unum, the plan's administrator. Call 1-800-ask-unum; 1-800-275-8686</p>
<b>Long-term (Buy-up)</b>	<p>Optional buy-up increases the long-term disability benefit to 60% of monthly earnings; raises maximum monthly benefit to \$17,500</p> <p>Subject to approval by Unum, the plan's administrator. Call 1-800-ask-unum; 1-800-275-8686</p>

SPENDING ACCOUNTS	
<b>Dependent Day Care Flexible Spending Account (DC FSA) via Optum</b>	<p>\$5,000 annual maximum covers expenses like day care and elder care for eligible dependents*</p> <p>IRS-approved tax savings on eligible expenses</p> <p>Use it or lose it: these funds do not roll over from year to year — budget and track wisely!</p> <p>Call Optum: 1-800-791-9361</p>
<b>Commuter Spending Accounts (CSA) via WageWorks</b>	<p>Set aside maximum of \$510 pre-tax monthly for transportation expenses: \$260 for mass transit; \$260 for parking</p> <p>Convenient payroll deductions; Transit passes mailed to your home for maximum convenience!</p> <p>Visit: <a href="http://wageworks.com">wageworks.com</a> or call 1-866-206-5751</p>

LIFE & ACCIDENT INSURANCE (via UNUM)	
<b>Basic Life</b>	<p>1x your earnings up to a maximum of \$750,000</p> <p>\$50,000 "cap" option to avoid paying imputed income tax</p>
<b>Supplemental Life</b>	<p>Up to 8x your earnings up to a maximum of \$2,100,000 (certain coverage levels are subject to Evidence of Insurability)</p>
<b>Dependent Life</b>	<p>Spouse or domestic partner (\$25,000/\$50,000/\$100,000) Note: Certain spousal coverage levels are subject to Evidence of Insurability. Eligible children (\$5,000/\$10,000)</p>
<b>Accidental Death &amp; Dismemberment</b>	<p>1x your earnings up to a maximum of \$750,000</p>
<b>Supplemental AD&amp;D</b>	<p>8x your earnings up to a maximum of \$1 million</p> <p>For questions or more information about RELX Life and/or AD&amp;D insurance call Unum: 1-800-275-8686</p>

\*The DC FSA cannot be used for healthcare expenses for your dependents. Please see the HC FSA on pg. 2 of this document for healthcare spending account options.

# Financial/More Benefits

## Retirement Benefit Options

**ELIGIBILITY:** Immediate, but you must enroll

### RELX 401(k) via Empower Retirement

Option of before-tax, after-tax or Roth after-tax contributions, contribute up to 75% of pay via payroll deduction; subject to IRS limits

100% Company match on the first 5% you contribute; opportunity for 7% or 9% Company match, depending on years of service and your contribution; you must contribute to get the Company match

100% vested in company matching contributions after three years of service with RELX

Variety of investment options including self-managed brokerage account and advisor service available

Call Empower Retirement at 844-465-4455 or visit [www.relx401kplans.com](http://www.relx401kplans.com)

### Employee Stock Purchase Plan (EMSIP)

Opportunity to purchase company stock at current market prices via after-tax payroll deductions

No service requirement to participate; no broker's commission or fees on purchases

Visit: [cpushareownerservices.com](http://cpushareownerservices.com) and enter "RELX" or call Computershare at 1-866-247-0050

## Work + Life Benefit Options

### Adoption Assistance

Eligibility: Full or part-time benefits eligible

100% reimbursement of certain expenses

Maximum of \$5,000 per adoption, subject to plan terms

### Tuition Reimbursement

Eligibility: Six months of continuous service

Management approval required prior to enrolling in class(es)

Course grade requirement: C or better AND receive college credit

Maximum reimbursement per calendar year: \$5,250 for full-time employees; \$1,000 for part-time employees

### Auto, Home & Pet Insurance via MetLife

Group discount rates; convenient payroll deduction; portable coverage so you can keep it if you leave the Company

Visit: [metlife.com/MyBenefits](http://metlife.com/MyBenefits) or 1-800-438-6388

## WELL-BEING + SUPPORT

### StayWell @ RELX Well-being Incentives

Your well-being incentive and program portal.

Earn \$250 towards your HSA or as an e-giftcard upon completion of a health assessment and biometric screening; medically-covered spouses/domestic partners can also earn \$250.

**Note:** Both activities must be completed (assessment AND screening) to receive incentive funding.

Visit [relx.staywell.com](http://relx.staywell.com) to learn more and get started!

### Employee Assistance Program (EAP) via Optum

Confidential counseling services for Work/Life challenges including:

- Childcare
- Special needs childcare
- Eldercare
- Substance abuse
- Family management
- Stress, anxiety or depression
- Legal and financial stress

### Legal Plan

Provides you and your dependents cost-effective access to qualified attorneys, and a trusted resource for wills, traffic tickets, real estate matters, and more. For more information call **Hyatt Legal Services at 800-821-6400**

### InfoArmor

Proactive Identity Theft Protection services for RELX employees.

Visit: [www.infoarmor.com/exchange](http://www.infoarmor.com/exchange) or call 855-969-3373

## OTHER RESOURCES



**RELX Benefits Center**  
[relxbenefitscenter.com](http://relxbenefitscenter.com)  
@RELX\_benefits

**Empower**  
[relx401kplans.com](http://relx401kplans.com)  
1-855-880-7333

**Optum**  
[optumbank.com](http://optumbank.com)  
1-800-791-9361

**StayWell @ RELX**  
[relx.staywell.com](http://relx.staywell.com)  
1-800-865-9051

For detailed information about any of the benefits listed or to enroll, visit [relxbenefitscenter.com](http://relxbenefitscenter.com)

# BENEFITS FOR ELIGIBLE LEXISNEXIS L&P AND RISK SOLUTIONS EMPLOYEES

LexisNexis	
Parental Leave	After 6 months of service, eligible employees can take 2 weeks of Paid Leave due to the birth of a child. If you're also eligible for Short-Term Disability (STD), this leave will be applied after STD has been exhausted.
Adoption Leave	After 6 months of service, up to 4 weeks paid leave is available for the primary caregiver upon adoption of a child.
Employee Referral Program	Earn a cash bonus for helping LexisNexis hire talented people. NOTE: There are eligibility requirements and restrictions to this program.
Service Award Program	Recognition and reward for continued service, in 5-year increments.

## TIME OFF FOR ELIGIBLE RELX INC. EMPLOYEES

Paid Time Off																							
Holidays	<p>Employees enjoy a total of 10 paid holidays in 2018, in addition to a Paid Time Off bank. PTO days are accrued per pay period from your date of hire.</p> <table border="1"> <thead> <tr> <th>2018 HOLIDAYS</th> <th>2018 CALENDAR DATE</th> </tr> </thead> <tbody> <tr> <td>New Years Day</td> <td>Monday, January 1</td> </tr> <tr> <td>Martin Luther King Jr. Day</td> <td>Monday, January 15</td> </tr> <tr> <td>Presidents' Day</td> <td>Monday, February 19</td> </tr> <tr> <td>Memorial Day</td> <td>Monday, May 28</td> </tr> <tr> <td>Independence Day</td> <td>Wednesday, July 4</td> </tr> <tr> <td>Labor Day</td> <td>Monday, September 3</td> </tr> <tr> <td>Thanksgiving Day</td> <td>Thursday, November 22</td> </tr> <tr> <td>Day after Thanksgiving Day</td> <td>Friday, November 23</td> </tr> <tr> <td>Day before Christmas</td> <td>Monday, December 24</td> </tr> <tr> <td>Christmas Day</td> <td>Tuesday, December 25</td> </tr> </tbody> </table>	2018 HOLIDAYS	2018 CALENDAR DATE	New Years Day	Monday, January 1	Martin Luther King Jr. Day	Monday, January 15	Presidents' Day	Monday, February 19	Memorial Day	Monday, May 28	Independence Day	Wednesday, July 4	Labor Day	Monday, September 3	Thanksgiving Day	Thursday, November 22	Day after Thanksgiving Day	Friday, November 23	Day before Christmas	Monday, December 24	Christmas Day	Tuesday, December 25
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Paid Time Off (PTO)	<p>The PTO policy includes annual vacation, sick and personal days in one bank from which you may draw for any reason, as long as you have manager approval. For more information, go to the Benefits tab on PeopleHUB. The PTO schedule is as follows:</p> <ul style="list-style-type: none"> <li>0 &lt; 2 years of service = 18 days per year</li> <li>2 - 6 years of service = 23 days per year</li> <li>7 - 19 years of service = 28 days per year</li> <li>20+ years of service = 33 days per year</li> </ul> <p>Buy-up option for 5 more days through paycheck reduction</p>																						
Bereavement	Up to 3 days for an immediate family member																						
Jury Duty	Paid time off for duration of jury duty																						
RE Cares Volunteer Days	2 days per calendar year for volunteer work at a nonprofit organization of your choice Must be coordinated with your manager																						
Military Leave	Paid leave, less military pay received, for entire tour if called to active duty																						



**NOTICE** It is important to understand that this guide is not a legal document. It is meant to provide a general description of some medical plans and other benefits that will be in effect for eligible RELX employees and their eligible dependents as of January 1, 2018. Not all benefit plans are described in this guide. Additionally, this guide does not take the place of the applicable documents, including insurance policies, contracts, official plan texts and Summary Plan Descriptions. Should any questions ever arise about eligibility or the nature and extent of your benefits, the formal language of the respective documents as construed and interpreted by the Company will govern. The Company reserves the right to modify, revoke, suspend, terminate, change, increase, or decrease benefit levels and contribution amounts at any time in the future.