

BENEFITS VOYAGE

Learn more about the benefits of independence.

NO RATE INCREASES ON HEALTH CARE PLANS!

Page 15

INCREASED PAID PARENTAL AND FAMILY CARE LEAVE!

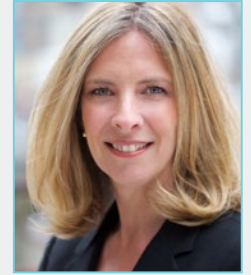
Page 29

HELP FOR PAYING STUDENT LOANS!!

Page 37

WELCOME TO SONY PICTURES' OPEN ENROLLMENT FOR 2021

This past year has been unprecedented in every way. At Sony Pictures we have come together to support each other, and protect and drive our business, in amazing ways in 2020. During this challenging and stressful year our People & Organization Team, with the full support of our CEO Tony Vinciguerra and the entire leadership team, has endeavored to amplify all the benefits and resources Sony Pictures provides to help care for you and your family.



As we head into 2021, we remain committed to maintaining and enhancing the comprehensive benefit plans and programs we offer to support you and your families, while also adding new offerings in areas you care deeply about. At the same time, we will extend the employee contribution rates on our health plans from 2020 through the end of 2021, **resulting in no increase to any of our medical, dental or vision plans.**

PLAN ENHANCEMENTS IN 2021 INCLUDE:

- **Paid Parental and Family Care Leave Enhancement:** We are increasing paid time off for qualifying leaves to 12 weeks, to care for or bond with family members. (We are also changing our provider from Lincoln to Matrix, so be on the lookout for improved service in 2021.)
- **More Annual Dental Exams:** In 2019, we added a third annual cleaning to our dental coverage; this year we will add the exam to go with it.
- **New Vision Coverage Features:** The plan will cover anti-reflective coating, including blue tint, for computer vision glasses (bring on the Teams meetings!).
- **Prescription Drug Copay Assistance Program:** If you take certain specialty medications, you may be eligible for a new program that pays your copay for you, which means you'll get these medications at no charge. (If you qualify, Express Scripts will contact you directly.)
- **Increased Adoption and Surrogacy Reimbursement:** We are increasing the reimbursement from \$10,000 to \$20,000 per adoption or surrogacy.
- **Enhanced Back-Up Care Benefit:** We are increasing the number of days of Bright Horizons Back-Up Care, from 10 to 20 days per year for temporary back-up child and adult/elder care. Bright Horizons also introduced new education and homework help services. See page 36 for details.
- **Added Progyny Fertility Treatment Options:** In 2019, we introduced Progyny to provide valuable fertility options for your family. In 2021, we are expanding the treatment options available under this program to cover donor tissue.
- **Additional Hearing Aid Benefits:** We will enhance coverage for hearing aids in all medical plans for 2021. Please contact your provider for additional details.

NEW OFFERINGS IN 2021 INCLUDE:

- **Tuition.IO:** In 2021, Sony Pictures will offer a new Student Loan Assistance Program. Regular full-time employees who have one year of service with Sony Pictures, earn an annual base salary of \$150,000 or less, and are paying off a student loan will be eligible for \$100 a month toward their loan — up to a \$5,000 lifetime limit!
- **Voluntary Accident Insurance and Hospital Indemnity Coverage:** These employee-paid voluntary insurance plans pay you a cash benefit — CASH! — if you're injured in an accident or are hospitalized — even if it's to deliver a baby. If you're planning on having a baby in 2021, enrolling in this plan may pay for itself. See page 28 for details.

At Sony Pictures we deeply value everything you do, every day, to make us successful. In return, we strive to design benefit plans and programs that support you, and your loved ones where it matters most.

Please Take Care in 2021,

A handwritten signature in black ink, appearing to read 'Stacy Green'.

Stacy Green
Executive Vice President, Chief People Officer



Enroll online at Sony Pictures Benefits Center:
<https://BenefitsCenter.spe.sony.com/>.

Get answers to your questions from
 a Sony Pictures Benefits Center
 Representative: **1-833-9-SONY-01**

ABOUT THIS GUIDE

This is a summary of certain Sony Pictures benefits. Not all employees are eligible for all the benefits described in this guide. When you log in to the Sony Pictures Benefits Center website, you'll see only the benefits available to you.

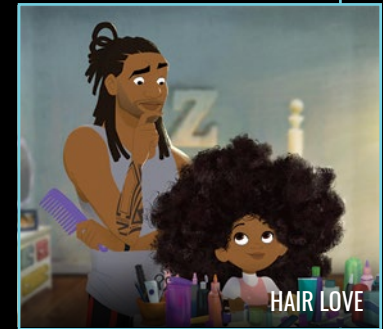


TABLE OF CONTENTS

ENROLLMENT & ELIGIBILITY	4
Bring along your family	
MEDICAL PLANS	8
Medical plans to support your style	
PRESCRIPTION DRUGS	16
The good prescription coverage	
AETNA RESOURCES	18
Live-action extras	
DENTAL COVERAGE	20
Smile for every occasion	
VISION COVERAGE	22
Be visionary	
FLEXIBLE SPENDING ACCOUNTS	24
The art of spending wisely	
LONG-TERM DISABILITY	27
Expect the unexpected	
LEAVE LIFE AD&D	28
Every moment matters	
SONY USA 401(K) PLAN	32
Welcome your retirement	
HEALTH AND WELLNESS	33
Become your own superhero	
LEGAL NOTICES	40
CONTACTS	INSIDE BACK COVER

A copy of the updated Summary Plan Description (SPD) for your Sony Pictures Entertainment Health and Welfare Benefits Plan ("Plan") is posted on <https://benefits.sonypictures.com/>. This important document explains the terms and conditions of your Plan, including eligibility, coverage amounts and exclusions. Please share this with your family members who are also covered under this Plan. If you want a paper version of the SPD, please request one by emailing SPE_Benefits@spe.sony.com

SPIDER-MAN: FAR FROM HOME
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LITTLE WOMEN

BRING ALONG YOUR FAMILY

Find out which dependents you can enroll in Sony Pictures benefits.

LIGHTS! CAMERA! ACTION!

During your enrollment period, you can enroll in or make changes to your current benefits, and enroll in a Flexible Spending Account (FSA) or Health Savings Account (HSA). If you don't take action, your current benefits will carry over to 2021 (except FSA and HSA contribution amounts). If you want an FSA or HSA, you must actively enroll.



ENROLLMENT

NEW EMPLOYEES — Your Sony Pictures benefits coverage is effective on your first day of employment; however, you have 31 days from your date of hire to enroll in benefits. No matter when you enroll within that 31-day window, your benefits will be effective retroactively to your date of hire.

You have 31 days to enroll in health benefits. If you do nothing, Sony Pictures automatically enrolls you — but none of your dependents — in the Sony Consumer Choice medical plan, vision coverage, prescription drug coverage, Basic Life and Accidental Death and Dismemberment (AD&D), and Basic Long-Term Disability. You won't receive dental coverage.

You're locked into your benefit choices until the next open enrollment unless you experience a qualifying change in status or life event.

YOU HAVE 45 DAYS TO ENROLL IN THE 401(K)

You have 45 days from your date of hire to change to or waive the Sony USA 401(k) Plan. You'll get a packet of information from T. Rowe Price, Sony's 401(k) administrator, with details about the plan.

If you don't act within 45 days, you'll be defaulted into the plan with a 6% contribution rate. Contributions will automatically increase 1% annually on the enrollment anniversary date until you reach a contribution rate of 10%.

Find out more at www.rps.troweprice.com, or call 1-877-766-9728.

CURRENT EMPLOYEES — If you don't enroll during open enrollment, your current benefits will carry over to 2021, except for FSA and HSA contribution amounts. If you want to contribute to an FSA or HSA in 2021, you must enroll during open enrollment.

FAMILY STATUS CHANGE — MAKING BENEFIT CHANGES DURING THE YEAR

You may make changes during the year if you have a change in status or qualifying life event. These events may include:

- Marriage or the declaration of a domestic partnership
- Legal separation, divorce or termination of a domestic partnership
- Birth, adoption or getting legal custody of a child
- Death of a dependent or loss of legal custody
- A dependent's loss of eligibility
- Losing other coverage

If you experience one of these events, you must submit your benefits-change request to Sony Pictures Benefits Center within 31 days of the event date to make changes to your coverage. Any change in your benefits must be consistent with your status change.

ENROLLMENT CHECKLIST

- ✓ Review your current benefits, access the enrollment materials at <https://benefits.sonypictures.com/>.
- ✓ Check to see if your doctor is in the Aetna network using Aetna's Custom Docfind at www.aetna.com.
- ✓ "Ask EMMA" at <https://BenefitsCenter.spe.sony.com>, Sony Pictures' online Benefits Advisor, to help you understand which plan is right for you.
- ✓ Review the Summary of Benefits Coverage (SBC) at <https://benefits.sonypictures.com/> for a summary of each plan.
- ✓ Enroll in or waive coverage through Sony Pictures Benefits Center at <https://BenefitsCenter.spe.sony.com> or call 1-833-9-SONY-01.

After you enroll, please print or save your confirmation page. Notify the Sony Pictures Benefits Center immediately if you see a discrepancy between the benefits you elected and withholding from your pay.

If you miss this enrollment window, you must wait until the next open enrollment to make changes. See your plan's Summary Plan Description (SPD) on <https://benefits.sonypictures.com/> for a full list of qualifying life events and change in status rules.



WHO'S ELIGIBLE

Generally, you're eligible for the benefits described in this guide if you're:

- Classified by Sony Pictures as a regular full-time, non-union employee working in the United States; and
- Regularly scheduled to work at least 20 hours per week over a five-day work week.

ELIGIBLE DEPENDENTS

When enrolling dependents for coverage, you must provide each dependent's Social Security number. This is required by the Affordable Care Act so Sony Pictures can properly report your coverage.

Dependents are eligible if they're your:

- Legally married spouse or domestic partner,
- Children up to 26 years old who meet the program's definition of an eligible dependent, regardless of full-time student status, through the end of the month in which they turn 26, or
- Children of any age who became physically or mentally disabled by age 26 and who depend on you for financial support (validation of disability required).

Note: Eligible children are your biological children, stepchildren, legally adopted children, foster children or children of your legally married spouse or your domestic partner, provided that for stepchildren or children of a domestic partner you furnish more than half their support. You may enroll your domestic partner's children only if your domestic partner is enrolled.



PROOF OF DEPENDENT ELIGIBILITY

You must provide proof of eligibility when enrolling a dependent for the first time. Sony Pictures Benefits Center will request copies of appropriate documentation to verify your dependent's eligibility.

DOMESTIC PARTNER

You and your domestic partner must meet these requirements to be eligible for coverage:

A

You're not legally married and are registered domestic partners, or entered into a lawful civil union in the state where you live; or

B

You must meet and attest to all these requirements and complete an affidavit of spousal equivalency (which can be found on <https://benefits.sonypictures.com/>):

- Your domestic partner and you are each other's sole domestic partner, and are emotionally committed to each other for mutual care and support, and intend to remain so indefinitely; and
- You've lived together in the same home for a full six months and intend to remain so indefinitely; and
- You're jointly responsible for each other's financial welfare and basic living expenses (you're financially interdependent); and
- You're both at least age 18 and mentally competent to consent to a contract under the laws of the state in which you live; and
- You're not related by blood closer than would bar marriage under applicable law in effect where you live; and
- You're not legally married to each other and aren't legally married to or separated from anyone else.

DID YOU KNOW?

TAX IMPLICATIONS OF COVERING DOMESTIC PARTNERS

If you enroll your domestic partner or their eligible dependents in Sony Pictures benefits, the IRS requires that you pay federal income tax on the fair-market value of their coverage. This cost is in addition to the employee contribution you must make for their coverage as determined by Sony Pictures.



See your medical plan SPD on www.Benefits.SonyPictures.com for details about domestic partner coverage.



MIAMI OFFICE



CULVER CITY OFFICE



CULVER CITY OFFICE



MEDICAL PLANS TO SUPPORT YOUR STYLE

HAIR LOVE

Comb through these plans to see which one's best for you and your family.

IMPORTANT DEFINITIONS

These terms will help you as you read through this guide.

Deductible	This is the amount you have to pay out-of-pocket before the plan starts to pay.
Coinsurance	Once you meet the deductible, this is the percentage the plan will pay. If the coinsurance is 80%, you'll pay 20% of the cost of care.
Copay	This is a flat amount you pay when you receive care. For example, if your plan has a copay for doctor visits, you pay just that amount and the plan pays the rest. In some medical plans, some kinds of care require copays and other kinds of care require coinsurance.
Annual out-of-pocket maximum	This is the most you'll pay in a plan year. Once you reach this, the plan will cover 100% of your qualified medical care for the rest of the plan year. You won't have to pay any more costs once you meet the out-of-pocket maximum, as long as you stay in-network. This includes the deductible, coinsurance, copays and prescription drug costs.
Employee premiums	The amount taken out of your paycheck to pay for health insurance.

Sony Pictures provides four medical plan options to meet the needs of you and your family:

<p>Aetna Sony Consumer Choice</p>	<p>Aetna Sony PPO</p>	<p>Aetna Sony EPO</p>	<p>Kaiser HMO (Southern California only)</p>
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WHEN YOUR DOCTOR'S NOT IN OUR NETWORK

Health care providers are either in-network or out-of-network. It sounds like a small difference but going out-of-network could throw off your whole health care budget.

In-network doctors partner with Aetna to offer discounted rates to Aetna members like you. You get the discounted rate and your doctor submits your claim to Aetna. What you pay out of pocket for covered expenses counts toward your deductible and out-of-pocket maximum. And, when you stay in-network, you keep health care costs down for you and Sony Pictures, which helps keep everybody's rates down.

Out-of-network doctors don't offer these discounts so you spend more out of pocket — sometimes a lot more. Plus, out-of-network doctors don't file claims for you; you pay up front then file claims yourself.

To be a savvy health care consumer, here are some important reminders:

- Even if a doctor, clinic, lab or hospital "accepts" your insurance, it doesn't mean they're in the Aetna network.
- Don't assume that because your doctor is in-network, the hospital (or lab, imaging center, pharmacy, etc.) is, too.
- Check to see if your doctor is in-network using Aetna's provider search tool at www.aetna.com.


DID YOU KNOW?

REASONABLE AND CUSTOMARY

If you go to an out-of-network provider, they can charge pretty much whatever they want because they haven't negotiated rates with Aetna.

The Sony Aetna plans will only pay what's "reasonable and customary" — the amount Aetna determines is the normal charge for specific health-related care and procedures within a geographic region.

If what your out-of-network provider bills you is higher than Aetna's reasonable and customary rate, you'll be responsible for paying the difference between Aetna's approved rate and the provider's fee.



AETNA MINUTECLINIC: YOUR FREE HEALTH CARE SHORT FEATURE

When you need quality care but can't see your regular doctor, visit your local MinuteClinic at select CVS pharmacies.

They have extended hours, even on nights and weekends. (Note that not all MinuteClinics are open 24/7 even if the CVS pharmacy stays open.) You never need an appointment, and they can treat adults and children 18 months and older. We're also excited to announce that covered MinuteClinic services are free under Sony Pictures' Aetna plans.¹

MinuteClinic nurse practitioners can:

- Diagnose and treat illnesses, injuries and skin conditions
- Provide vaccinations and physicals
- Screen for and monitor chronic conditions

Find your closest location at www.cvs.com/minuteclinic/clinic-locator. You can view wait times and hold your place in line at www.cvs.com/minuteclinic or on the CVS pharmacy app.



¹ If you're enrolled in the Sony Consumer Choice Plan, you must pay the full amount of the non-preventive appointment until you meet the plan's deductible.

SONY CONSUMER CHOICE PLAN WITH HEALTH SAVINGS ACCOUNT

THE SONY CONSUMER CHOICE PLAN IS A PREFERRED-PROVIDER PLAN (PPO) THAT INCLUDES A HEALTH SAVINGS ACCOUNT (HSA).

You may visit any doctor or specialist you choose, in- or out-of-network. You'll have lower monthly premiums than with any of the other plans offered, but you'll also have a higher annual deductible. Many of your prescription drugs are subject to your medical plan deductible so you'll pay 100% of the cost for medications until you reach your combined medical-prescription deductible; however, the plan does cover many preventive drugs at 100%.

The Sony Consumer Choice Plan works in conjunction with an HSA. Review the plan comparison chart on page 14 for more information.

HOW THE DEDUCTIBLE WORKS

The family deductible works different from the standard PPO plan. "Family coverage" is any coverage with more than only you (i.e., employee + children or spouse/partner).

You must meet the family deductible before the plan starts paying any benefits. Remember, until you meet the deductible, you pay 100% of the cost of most health care and prescription drugs.

Once you meet the family in-network deductible, the plan's coinsurance kicks in; you'll pay 20% for all covered in-network medical services and most prescription drugs until you reach the out-of-pocket maximum. Once you hit that, the plan will pay 100% of covered care for the rest of the plan year.

Prescription drugs will be paid at the rates shown on page 16.



EXAMPLE 1

Barbara has medical coverage for herself, her spouse and their two children.

They haven't met the \$2,800 in-network family deductible. As a result, the family will pay 100% of care and prescriptions until they meet the \$2,800 deductible.

Participant	Covered expenses
Barbara	\$1,350
Spouse	\$100
Child 1	\$250
Child 2	\$50
TOTAL	\$1,750

EXAMPLE 2

Barbara's family has met the \$2,800 deductible, so the plan pays 80% of covered care and prescription drugs for the family. This is called coinsurance.

The family also has reached the \$7,500 family in-network out-of-pocket maximum (annual deductible + coinsurance + prescriptions). As a result, the plan will pay 100% of covered in-network care and prescription drugs for the rest of the plan year.

Participant	Covered expenses
Barbara	\$1,500
Spouse	\$4,500
Child 1	\$1,000
Child 2	\$500
TOTAL	\$7,500

HSA

If you enroll in the Sony Consumer Choice Plan, you may enroll in an HSA, which is a tax-deferred account for paying qualified health care expenses. Unused funds roll over year to year. Unlike an FSA, there is no “use it or lose it” penalty.

The HSA is a lot like a regular bank account, but interest your HSA earns is tax-free. If you leave the company, you can take the HSA with you because the account belongs to you. The HSA is not a Sony Pictures-sponsored benefit; it’s an account you own.

Contributions

Sony Pictures contributes tax-free money to your account; you can contribute with deductions from your paycheck. Your contributions are taken out of your paycheck before federal taxes are calculated on your income, so you pay less income tax, too.

The 2021 maximum HSA contribution is \$3,600 for individual coverage, and \$7,200 for family coverage. This includes the Sony Pictures contribution. You can change your contributions during the year and make after-tax contributions, too.

If you’re 55 or older, you can make an additional \$1,000 “catch-up” contribution each year — also free from federal taxes (state taxes may apply).

Sony Pictures’ full HSA contribution for 2021 will be made in January so you’ll be able to use the funds early in the year. As a new employee, you’ll get the prorated HSA funding amount the first calendar quarter after you join the plan and set up your HSA.

2021 HSA Annual Contribution Limits

HSA Type	Sony Pictures’ Contribution	Contribution Limit	Amount You May Contribute
Individual	\$500	\$3,600	\$3,100
Family	\$1,000	\$7,200	\$6,200

Qualifying for an HSA

When you enroll in the Sony Consumer Choice Plan, your HSA is automatically opened for you; however, it’s your responsibility to ensure you’re eligible for the account.

To be eligible, you:

- Must be covered under the Sony Consumer Choice Plan
- Have no other health coverage (except what the IRS allows)
- Aren’t enrolled in Medicare
- Aren’t claimed as a dependent on someone else’s tax return
- Or your spouse doesn’t have a general purpose Health Care FSA or Health Reimbursement Account (HRA); however, you can enroll in a Limited Purpose Health Care FSA (see page 25).

If you’re Medicare eligible or approaching Medicare eligibility, email SPE_Benefits@spe.sony.com.

SETTING UP YOUR HSA

You must set up your HSA before you incur qualified medical expenses you want to pay with HSA funds. The HSA “establishment date” is important because you can’t use the funds to pay medical expenses you incurred before that date.

For example, if you go to the doctor January 5, but don’t open your account until January 30, you can’t pay those January 5 expenses with HSA funds.

PayFlex will automatically open your account when you enroll in the Sony Consumer Choice Plan. They’ll notify you if they need more information for verification purposes.

Make sure your legal name matches your Social Security card and your Sony Pictures file. If it doesn’t, there may be a delay in establishing your HSA.

You can only use your HSA funds on health care for yourself and for your federal tax dependents.

Review the IRS rules on HSAs for more details: www.irs.gov (Publication 969).



SONY PPO PLAN

This plan allows you to visit any health care provider you want, but pays more when you use in-network providers. The PPO Plan’s network is the same as the Consumer Choice Plan.

The plan covers in-network preventive care at 100%. For in-network office visits, you pay a copayment. For other care, you pay 100% of all expenses until you meet the deductible before the plan starts paying. If you cover dependents on your plan, each person must meet the individual deductible until the family deductible is met. You may meet the family deductible by any combination of covered medical expenses you and your covered family members incur.

SONY EPO PLAN

The EPO is an in-network-only PPO with a modest deductible. You may visit any doctor in the Aetna Select EPO network without a referral. You don’t have to choose a primary care physician (PCP), but having a PCP results in a higher level of care continuity.

This plan covers in-network preventive care and certain preventive drugs at 100%. For in-network office visits, you pay a copayment. For other care, you pay 100% of all expenses until you reach the deductible.

Note: This network is slightly different from the Aetna network for the Sony Consumer Choice and PPO plans, so make sure you refer to the EPO network when checking to see if a provider is in the network.

HOW THE DEDUCTIBLE WORKS IN THE PPO/EPO PLAN (EXAMPLES ARE IN-NETWORK)

EXAMPLE 1

Robert and his family are in the Sony PPO Plan. He’s met the \$600 individual deductible, so his plan will begin paying 80% coinsurance for his care; however, the \$1,200 family deductible hasn’t been met, so his spouse and child will continue to pay Aetna’s full negotiated rate for services until the family deductible is met.

Participant	Covered expenses
Robert	\$600
Spouse	\$100
Child	\$200
Total	\$900

EXAMPLE 2

Robert’s family has met the deductible so the plan will pay 80% coinsurance for the whole family until they meet the out-of-pocket maximum. Once they meet that, the plan will pay 100% of covered services for the rest of the plan year.

Participant	Covered expenses
Robert	\$500
Spouse	\$200
Child	\$500
Total	\$1,200

WOMEN'S HEALTH BENEFITS (AETNA)

INCLUSIVE FERTILITY BENEFIT – PROGYNY

Sony Pictures partners with Progyny to offer comprehensive fertility benefits to support every path to parenthood, including single parents, LGBTQ+ individuals and couples, and those who want to preserve their fertility.

Comprehensive coverage

Progyny's Smart Cycle coverage includes IUI, IVF, egg freezing, donor eggs or sperm (**New!**), surrogacy and adoption counseling, and more.

Fertility specialists

Progyny connects you to leading fertility specialists who provide the most advanced, effective fertility treatment. There are no precertification or treatment hurdles; you can find the course of treatment that's best for you.

Personalized support

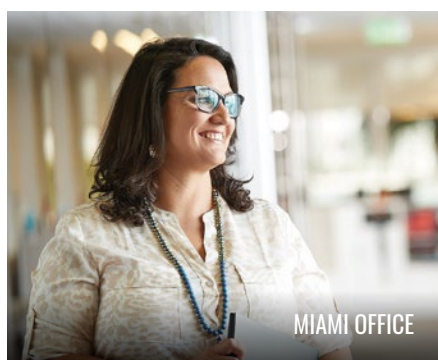
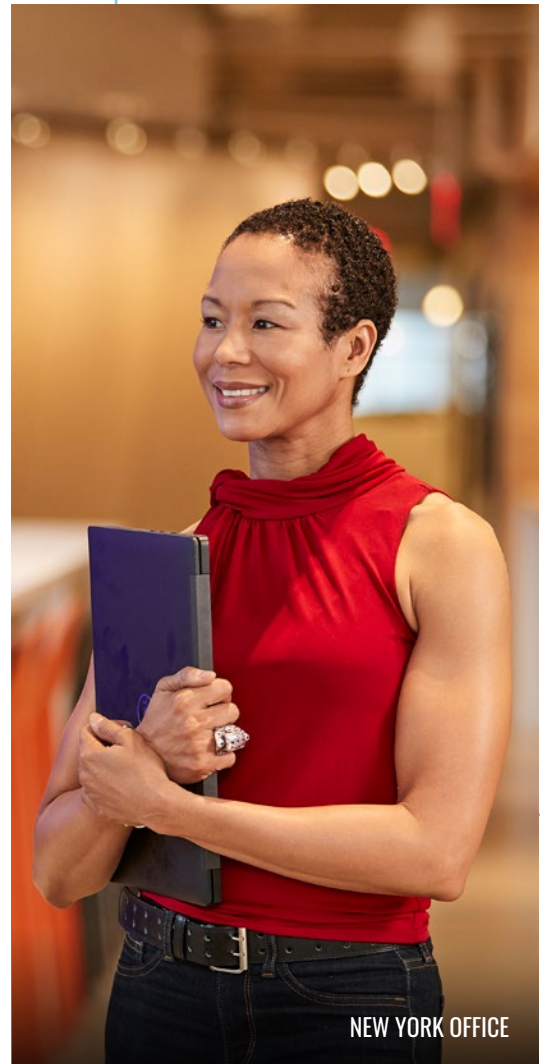
The journey to becoming a parent can be physically, emotionally and financially challenging. Progyny includes unlimited guidance and support throughout your fertility journey from a dedicated patient-care advocate (PCA).

Eligibility

You must be enrolled in a Sony Pictures medical plan with Aetna.

Learn more

For more information, or if you're currently using other fertility services and want to find out about transition of care, visit progyny.com/for-employees or call 1-833-404-2011.



AETNA'S WOMEN'S HEALTH PREVENTION AND EDUCATION

The Aetna Women's Health Program offers many resources and preventive services — including 3D mammograms — to help you stay healthy, including:

- Breast Health Education Center
- Confidential genetic testing for breast and ovarian cancers
- Aetna Maternity Management — Maternity support

Visit www.aetna.com to learn more.

KAISER HMO PLAN (AVAILABLE IN CALIFORNIA ONLY)

You must use health care providers and facilities in the Kaiser network only. You choose a primary care physician (PCP) who will refer you to specialists if necessary. Most services require a copay, and there is no deductible to meet.

For more information, review the "2021 Medical Plans at a Glance" table on page 14.

2021 MEDICAL PLANS AT A GLANCE

This table is an overview of your medical plan options and the coverage available under each plan. For details, see the applicable Summary Plan Description (SPD) or Summary of Benefits and Coverage (SBC) on <https://benefits.sonypictures.com/>.

PLAN FEATURE	SONY CONSUMER CHOICE	SONY PPO	SONY EPO	KAISER HMO (CA ONLY)
Type of plan	PPO	PPO	EPO	HMO
Payroll contribution	Lowest	Highest	Moderate	Moderate
	IN-NETWORK	IN-NETWORK	IN-NETWORK ONLY	IN-NETWORK ONLY
Annual deductible	\$1,400 single ¹ \$2,800 family ¹	\$600 individual \$1,200 family	\$150 individual \$300 family	None
Annual out-of-pocket maximum (includes deductibles, copays & prescriptions)	\$3,750 single \$7,500 family ³	\$4,000 individual \$8,000 family	\$3,000 individual \$6,000 family	\$1,500 individual \$3,000 family
YOU PAY				
Preventive care	0% (free)	0% (free)	0% (free)	0% (free)
Office Visits (primary care)	20% coinsurance ²	\$25 copay	\$20 copay	\$20 copay
Office Visits (specialists)	20% coinsurance ²	\$40 copay	\$35 copay	\$35 copay
Teladoc	\$47 copay ⁴	\$0 (free)	\$0 (free)	N/A
Coverage for most services	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$20 copay
Emergency room	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$150 copay
Inpatient hospital	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$250 per admission
Outpatient testing	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$50 per procedure
Diagnostic X-ray and laboratory	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	No charge
Inpatient mental health & substance use	20% coinsurance ²	20% coinsurance ²	10% coinsurance ²	\$250 per admission
Outpatient services copay/coinsurance	20% coinsurance ²	\$25 office visit copay	\$20 office visit copay	\$20 copay
Physical, occupational and speech therapy ⁵	20% coinsurance ² up to 60 visits per year in- and out-of-network combined ⁵	20% coinsurance ² (other outpatient services); \$40 copay for doctor visit; up to 60 visits per year in- and out-of-network combined ⁵	10% coinsurance ² (other outpatient services); \$35 copay for doctor visit; up to 60 visits per year in- and out-of-network combined ⁵	\$20 copay
OUT-OF-NETWORK				
Annual deductible	\$2,800 single ¹ \$5,600 family ¹	\$1,200 individual \$2,400 family	No Coverage	No Coverage
Your coinsurance after deductible	40%	40%	No Coverage	No Coverage
Annual out-of-pocket limit <i>Note: Any amount over maximum allowable charge is not included.</i>	\$7,500 individual \$15,000 family	\$8,000 individual \$16,000 family	No Coverage	No Coverage
Preventive care; you pay:	20% coinsurance	20% coinsurance	No Coverage	No Coverage

1 Consumer Choice Plan annual deductible includes all health care expenses and prescription drug costs, except for certain preventive medications the plan covers at 100%.

2 After deductible.

3 Family out-of-pocket maximum has an embedded per-member out-of-pocket maximum of \$6,850 for in-network services.

4 Teladoc fees for 2021 will be waived in accordance with IRS guidance.

5 Limit and deductible do not apply to habilitative treatment for autism and developmental delays.

Note: If you meet the in-network deductible in an Aetna plan, it counts toward the out-of-network deductible, and vice versa. Example: If you're in the PPO and meet the \$600 in-network deductible, you've met half of the \$1,200 out-of-network deductible.

YOUR COST FOR 2021 MEDICAL COVERAGE

Below is a breakdown of your cost per month for each plan. How much you pay is based on the benefits you choose, your base salary when you're hired (and each September 1 after that), and who you cover under your plan.

Sony Pictures shares the cost of most of your benefits with you as part of our commitment to offering you the protection you need. Your payroll deductions are generally taken out of your pay on a pre-tax basis, which means you pay less income tax. Consult your tax advisor for details.



Five stars! Medical plan rates won't increase for 2021!

MEDICAL PLAN EMPLOYEE CONTRIBUTION RATES (includes prescription drug coverage)				
BASE SALARY	Under \$60,000	\$60,000 to \$199,999	\$200,000 to \$299,999	\$300,000 and above
EMPLOYEE MONTHLY COST				
SONY CONSUMER CHOICE PPO				
Employee only	\$61	\$61	\$61	\$61
Employee + spouse/partner	\$149	\$175	\$218	\$288
Employee + child(ren)	\$119	\$141	\$172	\$223
Employee + family	\$210	\$248	\$309	\$404
SONY PPO				
Employee only	\$219	\$260	\$302	\$355
Employee + spouse/partner	\$440	\$523	\$615	\$743
Employee + child(ren)	\$352	\$405	\$484	\$551
Employee + family	\$605	\$720	\$848	\$1,019
SONY EPO				
Employee only	\$120	\$135	\$159	\$173
Employee + spouse/partner	\$242	\$279	\$328	\$371
Employee + child(ren)	\$195	\$219	\$262	\$299
Employee + family	\$353	\$399	\$480	\$494
KAISER HMO (CA ONLY)				
Employee only	\$106	\$114	\$144	\$158
Employee + spouse/partner	\$237	\$276	\$319	\$353
Employee + child(ren)	\$202	\$230	\$273	\$345
Employee + family	\$320	\$363	\$434	\$448

THE GOOD PRESCRIPTION COVERAGE

THE GOOD DOCTOR

Be a fan of the prescription drug coverage; it's included with your medical plan.

All Sony Pictures medical plans:

- Offer prescription drug coverage – The benefit depends on the plan you choose and type of drug prescribed
- Cover the full cost of certain contraceptives, tobacco-cessation medications and other preventive drugs as required by the Affordable Care Act (ACA)

KEEPING COSTS DOWN AND QUALITY UP

We're always working with Express Scripts to help keep prescription drug costs down while maintaining access to clinically proven medications. What this means to you is that the formulary — the list of drugs your medical plan will cover — can change; new drugs get added and others get taken off.

If you take regular medications, we encourage you to occasionally review the formulary to make sure the medications you need are still on the list. If your covered drug is removed, talk to your doctor about similar medications your plan does cover.

When the formulary changes and it affects a medication you take, Express Scripts will contact you before the change goes into effect so you have time to work with your doctor to find alternatives.

	SONY CONSUMER CHOICE / SONY PPO / SONY EPO		KAISER HMO (CALIFORNIA ONLY)	
	RETAIL (30-DAY SUPPLY)	MAIL (90-DAY SUPPLY)	RETAIL (30-DAY SUPPLY)	MAIL (90-DAY SUPPLY)
	YOU PAY			
Generic	\$10 copay	\$20 copay	\$10 copay	\$20 copay
Preferred	30% coinsurance \$25 minimum \$75 maximum	30% coinsurance \$55 minimum \$125 maximum	\$20 copay	\$40 copay
Non-Preferred	40% coinsurance \$40 minimum \$100 maximum	40% coinsurance \$70 minimum \$150 maximum	\$20 copay	\$40 copay



CULVER CITY OFFICE

EXPRESS SCRIPTS

You'll receive a separate ID card from Express Scripts.

YOUR COST FOR PRESCRIPTIONS

If you buy a brand name drug (preferred or non-preferred) when a generic is available, you'll pay the coinsurance plus the difference in cost between the brand name and generic drugs, unless your prescription doesn't allow a generic substitution.

MAINTENANCE MEDICATIONS

If you take a maintenance medication to manage a chronic condition, you may fill it three times at a retail pharmacy. On the fourth refill, you must use the mail order service or pay the full cost of your prescription. You also can fill 90-day supplies of your maintenance medication at a CVS pharmacy if you prefer getting your prescriptions at a retail pharmacy.

SONY CONSUMER CHOICE PLAN AND PRESCRIPTIONS

For most prescriptions, you'll pay 100% of the cost of a prescription until you reach the plan's deductible; however, some medications that help you avoid or manage certain illnesses and conditions may be covered at 100%, including those used for prevention or treatment. Conditions that may be covered include:

- Asthma
- Cholesterol
- Diabetes
- High blood pressure
- Heart disease
- Side effects of cancer treatment

For a complete list of covered preventive prescriptions covered at 100%, go to <https://benefits.sonypictures.com/>.



NEW YORK CITY OFFICE

HELPFUL PRESCRIPTION TERMS



BRAND NAME: A drug marketed under a trademark-protected name, like Lipitor or Prozac.

COMPOUND MEDICATION: Medications that are combined, mixed or altered by a licensed pharmacist. The FDA doesn't verify the quality, safety or effectiveness of compound medications; they're not covered under Sony Pictures' plans.

GENERIC DRUG: This is equivalent to the brand name drug in dosage, safety, strength, quality, performance and intended use. By law, the amount of active ingredient in a generic drug must be identical to the brand name product.

NON-PREFERRED DRUGS: These are medications for which you'll pay more under the plan.

PREFERRED DRUGS: These are generic and brand name medications for which you'll pay less under the plan.

EXTRAS FROM AETNA



When life draws outside the lines, Aetna benefits are here to help.



AETNA MEMBER WEBSITE

You can:

- Download and print Aetna forms
- View or print your electronic ID card
- Connect with Aetna Member Services via secure email
- Access the Healthwise Knowledgebase — A to Z health topics in English and Spanish
- Compare the cost of medical procedures at facilities around the country

TELADOC

With Sony Pictures' telemedicine program, you can call a doctor 24/7 for diagnosis and treatment of minor conditions. And it'll probably cost you less than the price of an office visit copay, depending on your plan.

If you're in the Sony PPO or Sony EPO plan, you'll never pay a fee or copay when you visit a Teladoc doctor (see page 14 for details). So, you can visit for free.

With Teladoc, you can get:

- Short-term prescriptions.
- Skin conditions diagnosed by sending a photo.
- Care for a loved one, even if they're not on your plan. Register them on your Teladoc account, then initiate a consultation via three-way call.

And, Teladoc offers behavioral health counseling seven days a week for you and your covered dependents. Therapists provide help with anxiety/stress management, relationships, depression, PTSD and many other issues. It's confidential and convenient.

Call Teladoc at **1-855-Teladoc (1-855-835-2362)**.

TALK TO A REGISTERED NURSE — 24/7

As an Aetna member, you'll have round-the-clock access to a registered nurse with the Informed Health Line at **1-800-556-1555**.

YOUR PERSONAL HEALTH RECORD (PHR)

Your Personal Health Record (PHR) provides a single, secure place to record and store your health information. Each time Aetna processes a new medical claim — like a doctor visit or a lab result — it's automatically added to your record. Access your PHR through the Aetna member website.

AETNA TOOLS & RESOURCES

To find an Aetna-network doctor¹ — or to find out if yours is in the Aetna network — check out Sony's custom provider search tool:

1. Visit www.aetna.com/dsepublic/#/sony
2. Choose the search method: ZIP code, doctor name, specialty, hospital affiliation or provider's gender
3. When prompted for your plan type, choose the network/plan you're interested in:
 - Sony Consumer Choice Plan
 - Sony PPO
 - Sony EPO

BENEFITS AT YOUR FINGERTIPS

AETNA HEALTH APP

- Find a doctor, specialist or facility
- Get estimates for out-of-pocket medical expenses
- View claims, coverage and benefits
- View your ID card

TELADOC APP

- Talk to a doctor 24/7
- Get a prescription if you need it
- Rash diagnosis
- Behavioral health
- Caregiver access
- No copay²

Reminder: You can access Teladoc services for free if you're enrolled in Aetna coverage!²

Register on the Teladoc website now so you're ready to go when you need it most: member.teladoc.com/aetna, **1-855-835-2362**.

AETNA CONCIERGE PROGRAM

The Aetna Concierge program delivers easy access to health resource consultants. It can provide you with information and guidance when you need it.

The program can help with billing, provider, plan design and coverage questions. A concierge can give you the information you need to help you make informed choices as you navigate the health care system.

You can reach Sony Pictures' team of concierges at **1-888-385-1053**.

ASK EMMA, AND OTHER TOOLS



EMMA is Sony Pictures' online virtual assistant. She can help you get the most from your benefits.

EMMA asks you questions to make sure you get — and understand — the benefits information you need. Her plan recommendations are based on your answers. The information you share with EMMA is confidential; it's used only to help you find the health plan that best fits your needs.

Try out EMMA as your benefits advisor in the Sony Pictures Benefits Center: <https://BenefitsCenter.spe.sony.com>.

AETNA PLAN SELECTION AND COST ESTIMATOR

Use Aetna's Plan Selection and Cost Estimator tools to estimate your out-of-pocket health care costs, compare plan offerings and determine which plan best meets your needs and those of your family.

Log in at www.aetna.com.

WILL I GET AN AETNA ID CARD IN THE MAIL?

Enrolling in an Aetna plan for the first time	Yes	If you need a replacement ID card, log in to the Aetna member website to access your electronic ID card or call Aetna to request a card.
Adding a dependent	Yes	
Dropping a dependent	No	

¹ Providers may not show up in the provider search, based on the way they are registered or if they're part of a provider group. If you can't find your doctor, call Aetna.

² The cost for the Sony Consumer Choice Plan Teladoc behavioral health services — once you meet the deductible — are \$190 for the first consultation with a psychiatrist and \$95 for all subsequent consultations with a psychiatrist. Consultations with a master's level therapist are \$85 each. Dermatology consultations are \$75 each.



CARE FOR EVERY SMILE

PETER RABBIT™ 2: THE RUNAWAY
PETER RABBIT AND ALL ASSOCIATED CHARACTERS™ & © FREDERICK WARNE & CO LIMITED.

Teeth come in all shapes and sizes, so take care of them all.

There are two dental plan options to choose from: the High Plan and Standard Plan.

The High and Standard plans use the Delta Dental PPO and Premier networks. You'll receive benefits for services with any dentist, but Delta Dental's PPO network provides you with the deepest discounts on your dental costs. If you can, it's best to find Delta Dental PPO dentists and specialists to minimize your out-of-pocket costs and maximize your benefits.

With the High Plan, you'll pay more out of each paycheck but less when you need care. The Standard Plan is a less generous plan, but your per-paycheck contributions are less. Only the High Plan covers orthodontia, so if you need that benefit, the High Plan is for you.

Like your medical plan, dental coverage also includes preventive care benefits at 100%. Take advantage of this and schedule regular checkups with your dentist.

For more information about the plans, or to view the provider directory, visit www.deltadentalins.com/sony, or call 1-800-471-7059.

YOUR COST FOR 2021 DENTAL COVERAGE

COVERAGE LEVEL	SONY HIGH PLAN	SONY STANDARD PLAN
	IN-NETWORK	IN-NETWORK
Employee only	\$23	\$9
Employee + Spouse/Partner	\$50	\$19
Employee + child(ren)	\$54	\$21
Employee + family	\$83	\$32



SONY DENTAL PLANS AT A GLANCE

PLAN FEATURE	SONY HIGH PLAN	SONY STANDARD PLAN
	IN-NETWORK	IN-NETWORK
Annual deductible	\$50 per person \$150 per family	\$25 per person \$50 per family
Annual maximum benefit ¹	\$3,000 (includes orthodontia)	\$1,500
YOU PAY		
Preventive and diagnostic services ¹ (exams, routine cleanings, ³ X-rays, etc.)	0% (free) ² (3 cleanings and exams per year — New!)	0% (free) ² (3 cleanings and exams per year — New!)
Basic restorative services (fillings, extractions, root canals, periodontal ³)	10% after deductible	20% after deductible
Major restorative services (crowns, bridges, dentures, implants)	15% after deductible	40% after deductible
Orthodontia (for adults and dependent children)	50% after deductible	Not covered
OUT-OF-NETWORK		
Preventive	0% (free)	0% (free)
Basic	20%	20%
Major	50%	50%
Orthodontia	50%	Not covered

¹ Preventive and diagnostic services don't count toward the annual maximum.

² You don't need to meet the deductible for preventive and diagnostic services to be covered at 100%.

³ Two periodontal cleanings are covered in addition to three covered routine cleanings.

BE VISIONARY

THE BOYS

Make superb eyesight one of your superpowers.

VSP provides the vision plan. You and your family are covered for eye exams, lenses and frames once per calendar year.

If you use an in-network provider, your plan covers your eye exam and glasses (frame and lenses) or contact lenses. You may also be eligible for discounts on additional products or services you buy during the same visit or even later in the same year.

If you use an out-of-network provider, your plan may or may not cover the full cost of your exam, and your glasses or contact lens allowance will vary by selection.

You'll find a list of certified network optometrists and ophthalmologists at www.vsp.com.

There are no changes to the vision rates for 2021.

YOUR COST FOR 2021 VISION COVERAGE

COVERAGE LEVEL	STANDARD PLAN
Employee only	\$6.00
Employee + Spouse/Partner	\$9.75
Employee + Child(ren)	\$9.75
Employee + Family	\$16.00

SONY VISION PLAN AT A GLANCE (IN-NETWORK BENEFITS¹)

PLAN FEATURE	DESCRIPTION	YOUR COPAY	FREQUENCY
WellVision exam	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness 	No copay	
Prescription glasses		\$10	See frames & lenses below
FRAMES & LENSES			
Frames	<ul style="list-style-type: none"> \$200 allowance on a wide selection of frames \$220 allowance on featured frame brands 20% savings on the amount over your allowance Or, \$110 allowance at Costco Optical or Walmart 	No copay Combined with exam	Every calendar year
Lenses ²	<ul style="list-style-type: none"> Single vision, lined bifocal and lined trifocal lenses Polycarbonate lenses for dependent children 		Every calendar year
Contacts (instead of glasses)	<ul style="list-style-type: none"> \$200 allowance for contacts and contact lens exam (fitting and evaluation) 15% off contact lens exam (fitting and evaluation) 		Every calendar year
Extra savings	<p>Glasses and sunglasses</p> <ul style="list-style-type: none"> 30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP provider on the same WellVision exam. Or, 20% savings from any VSP provider within 12 months of your last WellVision exam. <p>Laser vision correction (LASIK)</p> <ul style="list-style-type: none"> Average 15% off the regular price. Or, 5% off the promotional price; discounts only available from contracted facilities. 		

COMPUTER VISION CARE (EMPLOYEE ONLY)

PLAN FEATURE	DESCRIPTION	YOUR COPAY	FREQUENCY
Computer Vision Exam	<ul style="list-style-type: none"> Evaluates your needs related to computer use 	\$0 for exam	Every calendar year
Frames	<ul style="list-style-type: none"> \$90 allowance on a wide selection of frames \$110 allowance on featured frame brands 20% savings on the amount over your allowance 	\$10 for glasses	Every calendar year
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, lined trifocal and occupational lenses New! Anti-reflective coating 	Combined with frames	Every calendar year

¹ Out-of-network benefits are available; contact VSP for details.

² Lens enhancements include UV protection and standard/premium/custom progressive lenses.



THE ART OF SPENDING WISELY

COBRA KAI

Master the skill of setting aside tax-free money for health and dependent care expenses.

USE IT OR LOSE IT

You have until December 31, 2021, to use your FSA funds. Make sure to plan your contributions carefully because you'll lose any unused funds.

Flexible Spending Accounts (FSAs) allow you to set aside money on a pre-tax basis to pay eligible health care and dependent day care expenses. You must choose a contribution amount during the enrollment period to participate in an FSA; the amount you contributed last year doesn't automatically carry over.

We offer three types of FSAs:¹

- Health Care FSA
- Limited Purpose FSA
- Dependent Care FSA

You determine how much to contribute to each account. Your contributions are deducted from your paycheck on a before-tax basis (subject to IRS). FSAs and the HSA are administered by PayFlex.

¹ At the time of printing this guide, the IRS had not announced the 2021 FSA limits. The amounts shown in this guide are the 2020 limits.

HEALTH CARE FSA (GENERAL PURPOSE)

ANNUAL CONTRIBUTION: UP TO \$2,750 EACH YEAR

You may use funds to pay medical and dental plan deductibles, copayments and coinsurance; prescription drugs; vision care expenses, including contacts; orthodontics; medical equipment; and more.

LIMITED PURPOSE HEALTH CARE FSA

ANNUAL CONTRIBUTION: UP TO \$2,750 EACH YEAR

The IRS doesn't allow individuals with HSAs to also have a general purpose Health Care FSA.

If you're enrolled in the Sony Consumer Choice Plan, Sony Pictures offers a Limited Purpose Health Care FSA. You can use it to pay only dental and vision expenses until you meet your medical plan's deductible. Once you do, you can use this FSA for qualified medical expenses, too.

For a complete list of qualified Health Care FSA expenses, see IRS Publication 502, www.irs.gov.



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DEPENDENT CARE FSA

ANNUAL CONTRIBUTION: UP TO \$5,000¹ EACH YEAR

If you pay for dependent care, you may enroll in the Dependent Care FSA to pay qualified dependent day care and elder care expenses.

Qualified caregivers include:

- Licensed child care centers
- Nursery schools and preschools
- In-home care (au pair/nanny) and babysitting
- Elder/senior day care

Qualified dependents include:

- Your children age 12 and younger
- A spouse or dependent of any age who lives with you, relies on you and is physically or mentally unable to care for herself/himself, and is listed as a dependent on your federal income tax return



Consult your tax advisor on whether you should enroll in the Dependent Care FSA or take advantage of the federal dependent care tax credit.



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¹ Highly compensated employees (those who earned more than \$130,000 in 2020) will be limited to \$2,800 annual contribution. **NOTE:** The IRS did not announce the 2021 limits before this guide was printed.

HSA VS. FSA

ELIGIBLE EXPENSES FOR FSA AND HSA

Here are some of the eligible health care expenses the IRS allows you to pay from these tax-favored health care accounts:

- Expenses that count toward the deductible
- Dental care, including braces
- Hearing aids
- Contact lenses and LASIK surgery
- Prescription drugs
- Copays and coinsurance
- Wheelchairs

Check Aetna Navigator at www.aetna.com for more information. There’s even a tool to help you organize medical expenses and HSA withdrawals online.

See IRS Publication 502 for a complete list of qualified health care expenses you can pay with HSA and FSA funds, www.irs.gov.

PAYFLEX ADMINISTERS FSAs AND HSA

You can access your accounts on the PayFlex self-service website. You can set up payment specifications, file claim submissions and see your debit card transactions. You can sign into the website through Aetna Navigator, www.aetna.com, or at www.payflex.com.

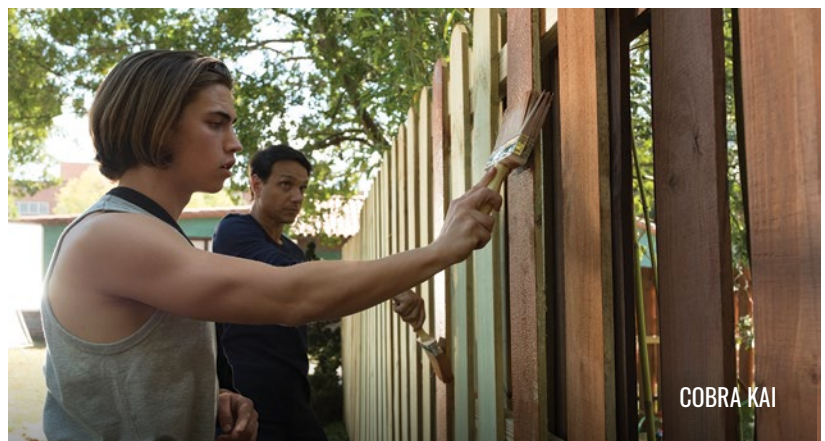
You may use HSA and FSA funds to pay qualified medical expenses for yourself, your spouse and eligible dependents without tax penalty. If you use the funds for non-qualified expenses, penalties may apply.

More information about how and when to submit claims is available at www.aetna.com. You can have FSA and HSA reimbursements deposited directly into your regular bank account.

HSA VS. FSA – WHAT’S THE DIFFERENCE?

The HSA offers more opportunities for tax savings (subject to IRS rules). Plus, the account is yours to keep if you leave the plan or Sony Pictures. Here’s how an HSA compares with a general purpose Health Care FSA.

PLAN FEATURE	HSA	FSA
Sony Consumer Choice Plan required?	Yes	No
Use it or lose it?	No	Yes
Take it with you?	Yes	No
Are contributions taxed?	No (except for certain states)	No (except for certain states)
Is earned interest taxed?	No	Does not earn interest
Are qualified withdrawals taxed?	No	No
Who can contribute?	You and Sony Pictures	You
Contribution limit?	\$3,600 individual \$7,200 family	\$2,750





EXPECT THE UNEXPECTED

THE BROKEN HEARTS GALLERY

Whether your life is more like a rom-com or action film, Long-Term Disability (LTD) may play an important role.

Sony Pictures provides you with basic LTD coverage, administered by Matrix starting January 1, 2021.

LTD pays benefits if an illness or injury prevents you from working for an extended period.

You're automatically enrolled in basic coverage. It pays 60% of your monthly base pay up to \$400,000, for a maximum benefit of \$20,000 (after 180 days of disability).

You're taxed on the premium Sony Pictures pays for you; however, the LTD benefit, should you ever need it, won't be taxed.

You may buy optional coverage, which increases the amount you'd receive to 70% of your monthly base pay. The combined (company-paid and optional coverage) maximum benefit is \$20,000.

You're taxed on the premium Sony Pictures pays for you and your optional premiums; however, the LTD benefit, should you ever need it, won't be taxed.

OPTIONAL LTD EMPLOYEE CONTRIBUTION RATES (MATRIX)

AGE	ADDITIONAL EMPLOYEE LTD MONTHLY COST (PER \$100 OF COVERAGE)
Under 25	\$0.029
25-29	\$0.033
30-34	\$0.037
35-39	\$0.063
40-44	\$0.083
45-49	\$0.137
50-54	\$0.212
55-59	\$0.253
60-64	\$0.253
65-69	\$0.270
70 and older	\$0.362

EVERY MOMENT MATTERS

A BEAUTIFUL DAY IN THE NEIGHBORHOOD

When it's not a beautiful day, we've got your back.

Financial health is just as important as physical health. We all have concerns about how loved ones would get by if something happened to us. Sony Pictures offers you the opportunity to replace concern with solid financial planning to protect your loved ones.

Life insurance provides your beneficiary with a benefit in the event of your death.

Accidental Death and Dismemberment (AD&D) insurance provides an additional benefit if you suffer a serious injury in an accident, or in the event of your death.

The Hospital Indemnity and Accident plans pay you cash if you're hospitalized, or injured and need care.

LEAVES OF ABSENCE

Sony Pictures provides many types of leaves of absence that allow you to take time off when you need it.

Some of these leaves are required by federal and state law. Other leaves, such as a Personal Leave, are offered at the discretion of Sony Pictures.

New! Sony Pictures offers eligible employees 12 weeks of paid time off for qualifying leaves, to care for or bond with family members.

For information about all the types of leave Sony Pictures offers, please see the Leave of Absence policies in the Employee Handbook. Contact Sony Pictures Leave Administration at **1-888-256-4094** or **www.matrixabsence.com** to report a leave.

BASIC LIFE AND AD&D INSURANCE

Sony Pictures provides eligible employees with basic life¹ and AD&D insurance of 1x annual base salary up to a maximum of \$1 million at no cost to you. Coverage is provided by Securian Financial.

IMPUTED INCOME

If you have company-provided employee life insurance coverage of more than \$50,000, the IRS requires that the fair-market value of the premium above \$50,000 be treated as taxable income.

The imputed income amount is shown on your paystub and on your year-end W-2 form. Talk to your tax advisor for more information.

¹ Executive life insurance provided by MetLife; different limits may apply.

CHOOSING YOUR BENEFICIARIES

Choosing who will receive your survivor benefits for life insurance, AD&D and 401(k) is an important decision.



You're required to name your beneficiaries when you enroll. After your first enrollment, you should periodically review your beneficiary elections to make sure their information is up to date. You may change beneficiaries at any time.



A BEAUTIFUL DAY IN THE NEIGHBORHOOD

SUPPLEMENTAL LIFE AND AD&D INSURANCE

You may buy additional life and AD&D insurance coverage beyond the basic benefit.

Supplemental life insurance coverage:

- **Employee** – 1–8x annual base salary up to a maximum of \$1.5 million. Age reductions apply.¹
- **Spouse/partner**² – \$10,000, \$25,000, \$50,000, \$100,000 or \$250,000
- **Child** – \$10,000 or \$20,000

Supplemental AD&D insurance coverage:

- **Employee** – 1–8x annual base salary up to a maximum of \$1.5 million.¹
- **Family** – Spouse/partner, up to a maximum of \$750,000; child maximum of \$100,000:
 - Spouse/partner (with children): 40%³
 - Spouse/partner (no children): 50%³
 - Each child (with spouse/partner): 10%³
 - Each child (no spouse/partner): 25%³

EVIDENCE OF INSURABILITY (EOI)

EOI — proof that you are healthy — is sometimes required for higher levels of supplemental coverage.

CURRENT EMPLOYEES – Securian will allow you to enroll in or increase your supplemental life insurance 1x your salary during open enrollment without submitting EOI as long as your increase is under the guaranteed issue limit of 5x your salary or \$1 million, whichever is less. You can enroll in or increase your spouse/partner coverage by one increment up to the guaranteed issue of \$50,000.

SUPPLEMENTAL LIFE INSURANCE: EMPLOYEE CONTRIBUTION Rates per \$1,000/month (Rates increase with age)

AGE	EMPLOYEE	SPOUSE/PARTNER
Under 25	\$0.029	\$0.050
25-29	\$0.035	\$0.060
30-34	\$0.046	\$0.080
35-39	\$0.053	\$0.090
40-44	\$0.058	\$0.100
45-49	\$0.087	\$0.150
50-54	\$0.133	\$0.230
55-59	\$0.250	\$0.430
60-64	\$0.382	\$0.660
65-69	\$0.734	\$1.270
70 and older	\$1.190	\$2.060
Supplemental Child Life	\$10,000 coverage: \$0.20 per month \$20,000 coverage: \$0.40 per month	

SUPPLEMENTAL AD&D: EMPLOYEE CONTRIBUTION Rates per \$1,000/month

Employee only	\$0.011
Employee and family	\$0.023

BUSINESS TRAVEL ACCIDENT PLAN (CIGNA)

Sony Pictures provides you with Business Travel Accident (BTA) insurance when you travel on company business at least 100 miles away from your home. In the event of your death, the plan pays your beneficiary 3x your annual base salary to a maximum benefit of \$1 million. It also provides coverage if you're injured in a covered accident.



¹ At age 65, basic and supplemental employee life and AD&D coverage decreases to 65% of the amount in effect before age 65.

² If your spouse/partner/child is eligible for coverage as an employee, they cannot be covered as a dependent. A child may be covered by only one parent if both parents are Sony Pictures employees. Children are eligible from live birth to age 26.

³ Supplemental spouse/partner and child AD&D coverage is a percentage of the employee's supplemental AD&D amount.

NEW! ACCIDENT AND HOSPITAL INDEMNITY PLANS

We're offering two new voluntary benefit plans, provided by Aetna, in 2021: An accident plan and a hospital indemnity plan. Because the plans are "voluntary," you pay 100% of the premiums with after-tax dollars. And because the premiums are deducted after-tax, any benefits the plans pay to you are tax-free.

You may enroll yourself and your covered dependents during Open Enrollment; you must keep the plan for the entire year unless you have a qualifying change in status. For more information, visit [SPEVoluntaryBenefits.com](https://www.aetna.com/SPEVoluntaryBenefits.com) or call **1-855-721-2399**.

VOLUNTARY ACCIDENT PLAN

Accidents are just that — accidents. You can't plan for them. But, you can protect yourself financially as much as possible. This plan will pay you benefits if you're hurt in an accident and:

- Have to visit the emergency room or urgent care
- Require follow-up visits, physical therapy, etc.
- Are hospitalized (hospital-stay limit is 365 days)

BONUS! The plan also pays \$75 when you get preventive care and screenings.

ACCIDENT PLAN RATES	
Tier	Rate
Employee	\$10.58
Employee + spouse	\$19.18
Employee + child	\$20.54
Family	\$28.31

VOLUNTARY HOSPITAL PLAN

When you're in the hospital, you can't work, so wouldn't it be nice to get "paid" for your hospital stay? The plan pays benefits for admission and a daily benefit for a covered hospital stay when you have a planned or unplanned hospital stay for an illness, injury, surgery or having a baby. You can use the benefits to help pay out-of-pocket medical costs or personal expenses.

If you're hospitalized for rehabilitation and observation, mental health conditions including substance use disorders, and for many other reasons, this plan will pay you benefits, giving you extra cash when you need it most.

BONUS! The plan also pays \$75 when you get preventive care and screenings.

HOSPITAL INDEMNITY PLAN RATES	
Tier	Rate
Employee	\$14.51
Employee + spouse	\$31.97
Employee + child	\$25.37
Family	\$42.21

Example: Tyler enrolled himself and his son, Jake, in the Accident Plan. Jake injured himself at soccer practice and went to the emergency room. They took X-rays and diagnosed a broken ankle. After Jake's ankle healed, he had six physical therapy visits.

ACCIDENT PLAN PAYOUT	
Emergency room	\$225
X-ray	\$50
Fracture (closed)	\$3,000
Appliances	\$100
Physical therapy: 6 sessions x \$50	\$300
Total benefit payment to Tyler	\$3,675

Example: Jada is pregnant and due in early 2021. In March, she's admitted to the hospital and stays one night before delivering a healthy baby boy the next morning. After two nights in the hospital, she and her baby, Alexander, go home.

HOSPITAL INDEMNITY PLAN PAYOUT	
Hospital admission	\$1,000
Hospital stay: \$100 per day x 2 days	\$200
Newborn benefit	\$100
Total benefit payment to Jada	\$1,300

These plans don't count as minimum essential coverage under the Affordable Care Act. They supplement health insurance but are not a substitute for major medical coverage.



WELCOME YOUR RETIREMENT

THE GOLDBERGS

Embrace the 401(k) Plan and sensible saving with open arms.

Visit www.rps.trowprice.com to manage your account, or call the Sony Savings Plans Service Center at **1-877-SONY-SAVE (1-877-766-9728)** 7 a.m. to 10 p.m. Eastern time, Monday – Friday.

¹ Eligible pay includes base salary, overtime and bonus, and are eligible for company-matching contributions. In 2020, the IRS limits the amount of pay you can contribute to the plan to \$19,500 in pre-tax and/or Roth contributions. Combined employee pre-tax, Roth and after-tax contributions under the plan may not be more than 50% of eligible compensation or the plan's annual deferral limit (\$42,625), whichever is lower. In addition, the employer matching contributions may not be more than the plan's annual limit (\$12,375). If you're age 50 or older, you can contribute \$6,500 in pre-tax and/or Roth catch-up contributions in addition to the \$42,625. These limits may change annually. If you reach any limits, your contributions to the plan will stop and excess contributions will be returned to you.

SONY USA 401(K) PLAN

Everyone strives for a comfortable retirement. The Sony USA 401(k) Plan is the ideal way to achieve retirement dreams by investing money now so you can enjoy the benefits later. The plan offers several great features, including:

- The opportunity to save a significant portion of your income — up to 50% of your eligible pay¹ pre-tax, after-tax and/or Roth dollars (combined), up to the annual IRS limits. You may make a carryover election, which allows you to make after-tax contributions after you reach the IRS pre-tax limit. You can also elect to automatically increase your contributions each year.
- Free money — Sony Pictures will immediately match 100% of the first 3% of your eligible pay, then 50% of the next 3% you contribute. Pre-tax, after-tax and Roth dollars are eligible for match; however catch-up contributions are not.
- The opportunity to make catch-up contributions. If you're 50 or older in 2021, you may make catch-up contributions of up to \$6,500.
- A range of investment options to choose from, including a series of 10 target retirement date funds, 12 core funds and a self-directed brokerage account.
- For information about the funds, go to www.rps.trowprice.com or call **1-877-SONY-SAVE (1-877-766-9728)**. If you don't select an investment option or are auto-enrolled, any contributions will be invested in the Sony Target Date Fund closest to your estimated retirement age (generally at age 65).
- You can change your contribution percentage, automatic increases or investment elections at any time. You also may designate or update your beneficiary at any time.



BECOME YOUR OWN SUPERHERO

SPIDER-MAN: FAR FROM HOME
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You don't need spidey-sense to make the most of these great benefits.

FOR YOU

EMPLOYEE ASSISTANCE PROGRAM (EAP)

To help manage competing demands and stress of today's fast-paced world, Sony Pictures partners with ComPsych Corporation to bring all employees and their dependents GuidanceResources. It's your one stop for expert information on the issues that matter most to you.

EAP provides:

- Eight visits per issue per year for counseling, addiction, stress, etc.
- Timely articles, HelpSheets, tutorials, streaming videos and self-assessments
- "Ask the Expert" personal responses to your questions
- Searches for child care, elder care, attorney and financial planner

Call **1-855-327-7669 (1-855-EAP-SONY)** or click **www.guidanceresources.com** (Web ID: EAPSONY) to access services, 24/7. The information shared with GuidanceResources counselors (and outside resources) is confidential.

FOR YOU

ON-THE-LOT OR VIRTUAL AETNA NURSE ADVOCATE

When you need health care advice, contact our Aetna Nurse Advocate.

Think of her as your personal benefits advisor — ready to answer your questions or connect you to the appropriate resources. She's also a professional nurse so she can help you navigate the health care maze.

Contact MaeDel at **1-310-244-6636**, or email, **MartinM7@aetna.com**.

ON-THE-LOT OR VIRTUAL EMPLOYEE ASSISTANCE COUNSELING

Sony Pictures has an on-the-lot employee assistance counselor in Culver City. In addition to counseling, you can get referrals, resources, support and information on many work-life issues.

Wendy Talley is available 9 a.m. – 2 p.m., Tuesday and Wednesday in Morita 1202.

Email **wtalley@compsych-us.com**.

ON-THE-LOT OR VIRTUAL NUTRITIONIST

Whether you need to turn your lifestyle around or just want some motivation to make healthier choices, getting advice from a registered dietitian is a good place to start. You can meet with a registered dietitian free of charge.

You can get information about how proper nutrition can help medical diagnoses, weight management, proper meal planning and more.

Email **Medgate_Medical@spe.sony.com**, or call **1-310-244-5560** to make an appointment. Located at Robert Young 1000.

ON-THE-LOT PHYSICAL THERAPY

A licensed physical therapist is available three times a week. Email **Medgate_Medical@spe.sony.com** or call **1-310-244-5560** to make an appointment. Located at Robert Young 1000.

CIGNA MEDICAL BENEFITS ABROAD (MBA)

Sony Pictures offers a benefit of up to \$200,000 per calendar year if you have an accident or illness while you're traveling on company business outside your home country or the country in which you live. **www.cignaenvoy.com** or call **1-800-441-2668** (Policy Number 02428A).

INTERNATIONAL SOS

Provides medical and travel assistance, and security services to those traveling internationally on company business. For more information, contact International SOS at **1-800-523-6586** (US) or **www.internationalsos.com** (Member Number 11BCPA000212).

FOR YOUR FAMILY

TELADOC MEDICAL EXPERTS (FORMERLY BEST DOCTORS)

Teladoc Medical Experts offers three important services to help you and your family members make medical decisions with confidence:

- **In-Depth Medical Review** — It's like getting a second opinion, only better. Through a patented process called InterConsultation, Teladoc Medical Experts reviews your medical records and creates a comprehensive report, either confirming what you've been told or recommending a change.
- **Ask the Expert** — Discuss your concerns and get answers to basic questions about a diagnosis, treatment options or a health condition. They will also help you determine what questions to ask your doctor.
- **Find a Doctor** – If you need to find an in-network specialist in your area, Teladoc Medical Experts can help. They have a database of more than 53,000 medical experts in more than 450 specialties worldwide.

Go to [Teladoc.com/MedicalExperts](https://www.teladoc.com/MedicalExperts) or call **1-800-Teladoc (835-2362)**.

Teladoc Medical Experts is available to all eligible employees and their dependents enrolled in Sony Pictures' benefit plans. It's 100% confidential and provided at no cost to you.

SUPPORT FOR FAMILIES THAT HAVE CHILDREN WITH SPECIAL NEEDS

Rethink Benefits is a comprehensive program that supports our employees who have loved ones with developmental disabilities. It's a web-based, mobile-friendly program created by some of the nation's leaders in developmental disabilities. Sony Pictures offers this benefit at no cost to you.

Caretakers of loved ones with special needs suffer higher rates of depression and anxiety than usual. That's why it's time to "rethink" how we care for and support employees in this role.

Rethink Benefits focuses only on families who have children with special needs, so its services are specialized beyond what health plans and EAPs typically offer, including:

- Up to 14 hours of telephonic clinical consultation available 24/7
- Strategies and tips on issues from problem behaviors to working with the child's school
- Video-based training for parents

You can download the Rethink Benefits app for free. Use it to schedule consultations, message a learning-and-behavior expert, watch training videos and webinars, and download worksheets, flashcards and other resources. Search "Rethink Benefits" in the App Store or Google Play.

To enroll, visit <http://spe.rethinkbenefits.com> (enrollment code: spe), or call **1-800-714-9285**.



FOR YOUR FAMILY

MILK STORK

Milk Stork provides traveling mothers everything they need to ship their breast milk home quickly and safely. Sony Pictures will cover the cost of shipping milk for mothers traveling on business. To enroll, go to www.milkstork.com/sonypictures.

BACK-UP CHILD AND ADULT CARE

For a small copay, Bright Horizons Back-Up Care provides back-up care for your children, adult and elder family members during a lapse or breakdown in normal care arrangements.

You can use Bright Horizons Back-Up Care any time you need to be at work but your family member needs help or support. You can book care up to 30 days in advance, or book same day or next day care when:

- A regular caregiver is unavailable or in need of respite
- A child is mildly ill and cannot attend school or child care
- School/child care programs are closed for vacation, in-service days or holidays
- An adult/elder relative is unexpectedly ill or recovering from medical treatment

Eligible employees receive up to 20 **(New!)** days of temporary back-up child and adult/elder care each calendar year at subsidized rates. Center-based care is \$15 per child or \$25 per family; in-home care is \$6 per hour.

ELDER CARE

Get the caregiving guidance you need with a personal touch. Introducing Bright Horizons Elder Care, an expansion of your Bright Horizons.

Access Bright Horizons to:

- Navigate the care journey for your loved one
- Work with an experienced Care Coach
- Coordinate care online
- Schedule on-site care assessments
- Access legal help, financial guidance and verified referrals

FAMILY CARE SOLUTIONS

- Jump ahead on Bright Horizons' child care center waiting list
- Take advantage of tuition discounts at Bright Horizons partner centers
- Get free access to Sittercity's premium database of sitters, virtual sitting, pet care and housekeepers
- Get discounted local placement services for trained, screened nannies

NEW! EDUCATION AND HOMEWORK HELP

- Find caregivers who can manage small-group learning pods through Sittercity
- Broad online tutoring and academic enrichment programs through Varsity Tutors
 - 20% discount on most programs, including tutoring and small-group classes
- Premium academic and test prep for all ages through Revolution Prep
 - 20% off hourly tutoring rates
 - 33% off interactive math adventure program
- Award winning digital learning for preschoolers through MarcoPolo Learning, including STEAM and literacy curriculum
 - 65% off annual app subscriptions

For more information on these Bright Horizon services, visit <https://clients.brighthouse.com/sonypictures> (username: SPE; password: Benefits4You) and click the Additional Family Support Tab, or call **1-877-BH-CARES**.

ADOPTION AND SURROGACY ASSISTANCE

Sony Pictures recognizes there are many ways to have a child. The adoption and surrogacy assistance program will reimburse eligible employees up to \$20,000 **(New!)** per adopted child or successful surrogacy. Reimbursable expenses include state-licensed adoption agency fees, legal costs and medical expenses.

For more information, see the Sony Pictures Employee Handbook or contact Progyny at progyny.com/for-employees, or **1-833-404-2011**.



FOR YOUR FINANCIAL WELLNESS

EDASSIST

If you've thought about going back to school to feel better equipped to perform your job, Sony Pictures wants to help.

We've established a tuition reimbursement program. If you're eligible, Sony Pictures will reimburse you for certain tuition costs and course-related expenses after you successfully complete approved courses.

Tuition costs are reimbursed up to \$5,250 per calendar year for undergraduate courses, extension courses and certification programs; up to \$9,000 per calendar year for graduate level courses.

EdAssist is Sony Pictures' tuition reimbursement administrator. You can reach EdAssist at <https://tuition.spe.sony.com> or at 1-855-853-5017.

Reimbursements for tuition and student loan assistance may have tax implications. You should talk to your tax advisor.

NEW! STUDENT LOAN ASSISTANCE

If you're paying student loans, Sony Pictures will help you reduce your debt by paying \$100 toward your loan each month, up to a lifetime maximum of \$5,000.

To qualify, you must:

- Be a regular full-time employee and completed one year of service;
- Make less than \$150,000 (base salary) a year;
- Be current on your payments; and
- Have the loan in your name.

Other free perks include a repayment-strategy tool, refinancing options for you and your family members, access to college payment options, and a student loan cost calculator and coaching.

To learn more, visit sonypictures.tuition.io or call 1-855-353-9395.



FOR YOUR FINANCIAL WELLNESS

IDENTITY PROTECTION

To help protect you from identity theft, Sony Pictures offers Allstate Identity Protection (formerly InfoArmor) at no cost to you (you may buy coverage for your family). Allstate Identity Protection's \$1 million ID theft insurance can help you get your life back in order if your identity is stolen.

You'll be automatically enrolled in this coverage. Sony Pictures doesn't provide your personal information to Allstate Identity Protection for this coverage.

You also may enroll in Allstate Identity Protection's enhanced ID protection called Identity Protection Pro Plus.¹ It's a monitoring service that alerts you at the first sign of fraudulent or suspicious activity.

Allstate Identity Protection Pro Plus will monitor your:

- Identify and credit
- Financial transactions
- Social media representation
- Dark web breaches

Plus, the dark web monitoring tool doubles as a secure vault for the information in your wallet, allowing you to replace lost or stolen items.

Sony Pictures also pays for this coverage but you must choose it as a new hire or during open enrollment. For more information on Allstate Identity Protection, go to www.myaip.com, or call **1-800-789-2720**.

COMMUTER BENEFITS

Sony Pictures encourages employees to take advantage of public transportation whenever possible. Commuter Benefits allow you to pay for certain work-related transportation expenses on a pre-tax basis.

Parking: Pay for eligible work-related parking expenses, including:

- The cost of parking at or near your worksite.
- The cost of parking at a location from which you commute to work, either by mass transit or a qualifying commercial or non-commercial vehicle or carpool.

Transit: Buy passes or vouchers to cover the cost of mass transit to and from work. Eligible expenses include subway, train, bus and vanpool costs.

The IRS sets the monthly reimbursement rates, which are adjusted periodically for inflation. Visit www.irs.gov for more information or go to www.payflex.com.

¹ If you enroll in the additional Identity Protection Pro Plus benefit, you consent to have Sony Pictures provide Allstate Identity Protection with certain personal information, including your address, Social Security number and date of birth, which Allstate Identity Protection requires to provide the monitoring service. You'll be able to review the amenities offered through Identity Protection Pro Plus and provide additional personal information to Allstate Identity Protection to customize your monitoring service.

METLIFE LEGAL PLAN

Legal matters — planned and unplanned — are part of life. Enrolling in the MetLife Legal Plan (formerly Hyatt Legal) gives you the financial and emotional peace of mind to know you'll be covered for expected and unexpected legal events.

The MetLife Legal Plan provides you, your spouse and dependents with fully covered legal services from a network of experienced attorneys.

Services include:

- Estate planning, wills, powers of attorney and trusts
- Sale and purchase of a primary home, including refinancing
- Tenant or landlord issues when you're the tenant
- Traffic offenses (except DUIs)
- Consumer protection
- Immigration assistance
- Defense in civil lawsuits

There are no annual limits on covered services. Complex legal services are available at an additional cost. Certain services may be excluded.

Coverage for you and your family

MetLife Legal Plan monthly contribution: \$16.50

Parents Plus – Coverage for your parents

Through the MetLife Legal Plan you may buy up to a plan that provides your parents and parents-in-law access to legal help, from estate planning to elder care matters and identity theft issues.

MetLife Legal Plan buy-up monthly contribution: \$22.50

Once you're enrolled, go to info.legalplans.com or download the MetLife Legal Plan mobile app. You can also call the MetLife Legal Plan at **1-800-821-6400**, 8 a.m. to 8 p.m. Eastern time, Monday – Friday.

Enrollment is for the entire year. You can change your election during the next open enrollment.

EMPLOYEE STOCK PURCHASE PLAN (ESPP)

Through the Employee Stock Purchase Plan (ESPP), you can buy Sony American Depositary Receipt (ADR) common stock through convenient after-tax payroll deductions.

Sony ADR stock is traded on the New York Stock Exchange (ticker symbol SNE) in U.S. dollars.

For more information, call the plan administrator, Computershare, at **1-800-621-3777**, or go to www.computershare.com. You can find the enrollment forms on mySPE.

FOR YOUR PET

INSIDE RX PETS

Sony Pictures partners with Inside Rx Pets, a prescription savings program, at no cost or obligation for you.

If you're a pet parent, you can get discounts on brand name and generic human medications prescribed for pets.

Inside Rx Pets provides you with:

- 15% average savings on the cost of brand medications
- Easy access to 40,000 participating retail pharmacies nationwide

You can download your savings card and find participating pharmacies at <https://insiderxpets.com>.

PET INSURANCE

My Pet Protection and My Pet Protection with Wellness from Nationwide help you provide your pets with the best care possible. Both plans reimburse 90% on vet bills including accidents, illnesses and hereditary conditions.¹

My Pet Protection suite of pet insurance includes plans specifically designed for employees and gives you superior protection. It features:

- 90% back on vet bills¹
- One set price, regardless of the pet's age
- A wellness plan option that includes spay/neuter,² preventive dental cleaning and more

For more information or to get a free quote, call **1-877-738-7874** and mention "bSwift Specials" to get your preferred pricing.

¹ Some exclusions may apply. Certain coverages may be subject to pre-existing exclusion. See policy documents for a complete list of exclusions.

² Spay/neuter coverage is available only with My Pet Protection with Wellness.

LEGAL NOTICES

SUMMARY OF BENEFITS AND COVERAGE

The health benefits available to you represent a significant component of your Sony Pictures Total Rewards package, in addition to your compensation, and provides important protection for you and your family in the case of illness or injury. Your Sony Pictures plan offers a series of health coverage options. Choosing a health coverage option is an important decision.

To help you make an informed choice, your plan makes available a Summary of Benefits and Coverage (SBC) to help you compare your options. The SBC is available on Sony Pictures Benefits Center at <https://BenefitsCenter.spe.sony.com> under the Forms and Documents section and at spe_benefits@spe.sony.com. You can also request a paper copy, free of charge, by contacting a Sony Pictures Benefits Center Representative at **1-888-9-SONY-01**. If you have dependents in your household who are enrolled in the Sony Pictures plan, please share this information with them. Be aware that any SBC provided to you will be deemed to have been provided to your dependents unless the plan is advised of a different address.

MEDICARE PART D PRESCRIPTION DRUG COVERAGE

Important Notice for Medicare-Eligible Employees and Covered Dependents

Sony Pictures Entertainment (Sony Pictures) is required to provide the notice that follows to all Medicare-eligible plan participants. The purpose of the notice is to provide you with a statement of assurance that while you are enrolled in Sony EPO, Sony PPO, Sony Consumer Choice or Kaiser HMO, the prescription drug coverage you have under any of these Sony Pictures medical plans is "Creditable Coverage." This means that, on average, your Sony Pictures coverage is at least as good as the standard Medicare prescription drug coverage. (For more information on Creditable Coverage, you can refer to the "Creditable Coverage" section of the notice below.)

Medicare prescription drug coverage is optional, and you may find that you have all the coverage you need with Sony Pictures. If you decide in a subsequent year that you want to enroll in a Medicare prescription drug plan, this notice will serve as confirmation to Medicare that you had Creditable Coverage in the interim. As a result, you will not have to pay a late penalty on your Medicare prescription drug plan monthly premium if you decide to enroll during a subsequent annual enrollment window. Note, however, that if you opt out (choose the "No Coverage" option) with Sony Pictures, you do not have Creditable Coverage and may be subject to a future premium penalty if you subsequently enroll in a Medicare prescription drug plan. The notice that follows explains the effect of having Creditable and non-Creditable Coverage.

IMPORTANT NOTICE FROM SONY PICTURES ABOUT YOUR PRESCRIPTION DRUG COVERAGE AND MEDICARE

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Sony Pictures and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare prescription drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important facts you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare.

You can get this coverage if you join a Medicare prescription drug plan or join a Medicare Advantage plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some

plans may also offer more coverage for a higher monthly premium.

2. Sony Pictures determined that the prescription drug coverage offered by Sony Pictures is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is considered Creditable Coverage.

Because your existing coverage is, on average, at least as good as standard Medicare prescription drug coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare prescription drug plan.

WHEN CAN YOU JOIN A MEDICARE DRUG PLAN?

You can join a Medicare prescription drug plan when you first become eligible for Medicare and each year from October 15 through December 7. However, if you lose creditable prescription drug coverage through no fault of your own, you will be eligible for a two-month Special Enrollment Period (SEP) to join a Medicare drug plan.

WHAT HAPPENS TO YOUR CURRENT COVERAGE IF YOU DECIDE TO JOIN A MEDICARE DRUG PLAN?

If you decide to join a Medicare prescription drug plan, your current Sony Pictures coverage is not affected.

If you decide to join a Medicare prescription drug plan and drop your Sony Pictures prescription drug and medical coverage, be aware that you and your dependents may not be able to get this coverage back. Please remember that your Sony Pictures prescription drug coverage is bundled with your medical plan option. Therefore, there is no separate employee contribution for prescription drug coverage. If you want to keep your Sony Pictures coverage and you want to avoid duplicate premiums, you should NOT enroll in Medicare prescription drug coverage for 2021.

Please contact us for more information about what happens to your coverage if you enroll in a Medicare prescription drug plan.

WHEN WILL YOU PAY A HIGHER PREMIUM (PENALTY) TO JOIN A MEDICARE DRUG PLAN?

You should know that if you drop or lose your coverage with Sony Pictures and don't join a Medicare prescription drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare prescription drug plan later. If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go 19 months without Creditable Coverage, your premium may consistently be at least 19% higher than the base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

FOR MORE INFORMATION ABOUT THIS NOTICE OR YOUR CURRENT PRESCRIPTION DRUG COVERAGE

If you have questions, call a Sony Pictures Benefits Center representative toll-free at **1-833-9-SONY-01**.

NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare prescription drug plan, and if this coverage through Sony Pictures changes. You also may request a copy of this notice at any time from a Sony Pictures Benefits Center representative toll-free at **1-833-9-SONY-01**.

FOR MORE INFORMATION ABOUT YOUR OPTIONS UNDER MEDICARE PRESCRIPTION DRUG COVERAGE

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for the telephone number) for personalized help

- Call **1-800-MEDICARE (1-800-633-4227)**. TTY users should call **1-877-486-2048**

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the Web at www.socialsecurity.gov, or call **1-800-772-1213** (TTY **1-800-325-0778**).

REMEMBER: KEEP THIS CREDITABLE COVERAGE NOTICE.

If you decide to join one of the Medicare prescription drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained Creditable Coverage and whether or not you are required to pay a higher premium (a penalty).

Date: October 1, 2020
Name of Sender: Sony Pictures Entertainment
Contact Office: People & Organization - Total Rewards
Address: 10202 West Washington Boulevard, Culver City, CA 90232
Phone Number: **1-310-244-4000**

NOTIFICATION OF YOUR RIGHTS TO PLAN MODIFICATION, TERMINATION, AND INTERPRETATION

Sony Pictures reserves the right in its sole and absolute discretion to amend, modify, or terminate any or all employee benefit plans at any time and for any reason. This means that Sony Pictures may decide to change the design of the prescription drug benefit so that it no longer constitutes Creditable Coverage. If this happens, we will notify you of the change and of your options at that time.

In addition, Sony Pictures reserves the sole and absolute discretionary right to interpret and apply the terms of the medical plan and to render final and binding decisions about the plan and its coverage. In the event of a conflict between this notice and the terms of the plan, the terms of the plan will govern in all cases.

Act of 1985 ["COBRA"] – requiring that most employers sponsoring group health

plans offer employees and their families the opportunity for a temporary extension of health coverage (called "Continuation Coverage") at group rates in certain instances where coverage under the plan would otherwise end (called "qualifying events"). For additional information about your rights and obligations under the Plan and under federal law, you should review the Plan's Summary Plan Description or contact the plan administrator.

SPECIAL ENROLLMENT PERIODS

If you decline enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this Plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage).

However, you must request enrollment within 31 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.

If you decline enrollment for yourself or for an eligible dependent (including your spouse) while Medicaid coverage or coverage under a state children's health insurance program is in effect, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage. However, you must request enrollment within 60 days after you or your dependents' coverage ends under Medicaid or a state health insurance program.

If you or your dependents (including your spouse) become eligible for a state premium assistance subsidy from Medicaid or through a state children's health insurance program with respect to coverage under this plan, you may be able to enroll yourself and your dependents in this plan. However, you must request enrollment within 60 days after your or your dependents' determination of eligibility for such assistance.

To request special enrollment or obtain more information, contact a Sony Pictures Benefits Center representative toll-free at

1-833-9-SONY-01. Individuals who have questions about HIPAA may contact The Centers for Medicare & Medicaid Services (CMS) toll-free at **1-877-267-2323**. The CMS website also provides answers to your questions about the provisions of HIPAA, which can be found at the following Internet address: <http://www.cms.hhs.gov/HIPAAGenInfo/>. Individuals may also contact CMS directly, by mail, at:

The Centers for Medicare & Medicaid Services, 7500 Security Boulevard
Baltimore, MD 21244

HIPAA PRIVACY STATEMENT

Sony Pictures maintains the privacy and security of your personal health information in compliance with HIPAA. All policies regarding the HIPAA Privacy and Security regulations may be found in Sony Pictures' HIPAA Privacy Notice which describes our legal duties and privacy practices relating to how medical information about you may be used and/or distributed. You can get a copy of the Privacy Notice, for no charge, on Sony Pictures Benefits Center or on www.Benefits.SonyPictures.com. **You can request a paper copy at no charge by calling 1-310-244-7062.**

PATIENT PROTECTION NOTICE

The Kaiser Permanente HMO generally requires the designation of a primary care provider. You have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members. Until you make this designation, Kaiser Permanente will designate one for you. For information on how to select a primary care provider, and for a list of the participating primary care providers, contact Kaiser at **1-800-464-4000**.

For children, you may designate a pediatrician as the primary care provider. You do not need prior authorization from Kaiser or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact Kaiser at **1-800-464-4000**.

WOMEN'S HEALTH AND CANCER RIGHTS ACT OF 1998 ("WHCRA")

Your health care plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services, including all stages of reconstruction and surgery to achieve symmetry between breasts, prostheses, and complications resulting from a mastectomy (including lymphedema). These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under the plan. Call your health care provider at **1-888-385-1053**, Aetna or Kaiser at **1-800-464-4000**, for more information.

NEWBORNS' AND MOTHERS' HEALTH PROTECTION ACT OF 1996

Group health plans and health insurance issuers generally may not, under Federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours for any vaginal delivery, or less than 96 hours following a cesarean section. However, Federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than the 48 hours (or 96 hours as applicable). In any case, plans and issuers may not under Federal law require that the provider obtain authorization from the plan or issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours).

SONY PICTURES GROUP BENEFIT PLAN ANNUAL SUMMARY REPORT

The 2019 Summary Annual Reports (SARs) summarize the financial information for Sony Pictures' Benefits Plans as required by the Employee Retirement Income Security Act (ERISA) of 1974, as amended. To view the reports, go to mySPE>Resources>Benefits. If you are unable to access the SAR document, please contact People & Organization (P&O) at **1-310-244-4748**. You can also contact P&O by email at SPE_Benefits@spe.sony.com.

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available. If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call **1-866-444-EBSA (3272)**.

To see if any other states have added a premium assistance program since July 31, 2020, or for more information on special enrollment rights, contact either:

U.S. Department of Labor Employee Benefits Security
www.dol.gov/agencies/ebsa
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services
www.cms.hhs.gov
1-877-267-2323,
Menu Option 4, Ext. 61565

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2020. Contact your state for more information on eligibility.

ALABAMA – Medicaid

Website: <http://myalhipp.com/>
Phone: 1-855-692-5447

ALASKA – Medicaid

The AK Health Insurance Premium Payment Program
Website: <http://myakhipp.com/>
Phone: 1-866-251-4861
Email: CustomerService@MyAKHIPP.com
Medicaid Eligibility: <http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx>

ARKANSAS – Medicaid

Website: <http://myarhipp.com/>
Phone: 1-855-MyARHIPP (1-855-692-7447)

CALIFORNIA – Medicaid

Website: https://www.dhcs.ca.gov/services/Pages/TPLRD_CAU_cont.aspx
Phone: 1-888-452-8609

COLORADO – Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+)

Health First Colorado Website: <https://www.healthfirstcolorado.com/>
Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711
CHP+ Website: <https://www.colorado.gov/pacific/hcpf/child-health-plan-plus>
CHP+ Customer Service: 1-800-359-1991/ State Relay 711
Health Insurance Buy-In Program (HIBI): <https://www.colorado.gov/pacific/hcpf/health-insurance-buy-program>
HIBI Customer Service: 1-855-692-6442

FLORIDA – Medicaid

Website: <https://www.flmedicaidprecovery.com/flmedicaidprecovery.com/hipp/index.html>
Phone: 1-877-357-3268

GEORGIA – Medicaid

Website: <https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp>
Phone: 1-678-564-1162 ext 2131

INDIANA – Medicaid

Healthy Indiana Plan for low-income adults 19-64
Website: <http://www.in.gov/fssa/hip/>
Phone: 1-877-438-4479

All other Medicaid

Website: <https://www.in.gov/medicaid/>
Phone 1-800-457-4584

IOWA – Medicaid and CHIP (Hawki)

Medicaid Website: <https://dhs.iowa.gov/ime/members>
Medicaid Phone: 1-800-338-8366
Hawki Website: <http://dhs.iowa.gov/Hawki>
Hawki Phone: 1-800-257-8563

KANSAS – Medicaid

Website: <http://www.kdheks.gov/hcf/default.htm>
Phone: 1-800-792-4884

KENTUCKY – Medicaid

Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: <https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx>
Phone: 1-855-459-6328
Email: KIHIPP.PROGRAM@ky.gov
KCHIP Website: <https://kidshealth.ky.gov/Pages/index.aspx>
Phone: 1-877-524-4718
Kentucky Medicaid Website: <https://chfs.ky.gov>

LOUISIANA – Medicaid

Website: www.medicicaid.la.gov or www.ldh.la.gov/lahipp

Phone: 1-888-342-6207 (Medicaid hotline) or 1-855-618-5488 (LaHIPP)

MAINE – Medicaid

Enrollment Website: <https://www.maine.gov/dhhs/ofi/applications-forms>
Phone: 1-800-442-6003
TTY: Maine relay 711
Private Health Insurance Premium Webpage: <https://www.maine.gov/dhhs/ofi/applications-forms>
Phone: 1-800-977-6740
TTY: Maine relay 711

MASSACHUSETTS – Medicaid and CHIP

Website: <http://www.mass.gov/eohhs/gov/departments/masshealth/>
Phone: 1-800-862-4840

MINNESOTA – Medicaid

Website: <https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/other-insurance.jsp>
Phone: 1-800-657-3739

MISSOURI – Medicaid

Website: <http://www.dss.mo.gov/mhd/participants/pages/hipp.htm>
Phone: 1-573-751-2005

MONTANA – Medicaid

Website: <http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP>
Phone: 1-800-694-3084

NEBRASKA – Medicaid

Website: <http://www.ACCESSNebraska.ne.gov>
Phone: 1-855-632-7633
Lincoln: 1-402-473-7000
Omaha: 1-402-595-1178

NEVADA – Medicaid

Medicaid Website: <http://www.medicicaid.nv.gov>
Medicaid Phone: 1-877-638-3472

NEW HAMPSHIRE – Medicaid

Website: <https://www.dhhs.nh.gov/oii/hipp.htm>
Phone: 1-844-275-3447
HIPP program: 1-800-852-3345, ext 5218

NEW JERSEY – Medicaid and CHIP

Medicaid Website: <http://www.state.nj.us/humanservices/dmahs/clients/medicaid/>
Medicaid Phone: 1-800-356-1561
CHIP Website: <http://www.njfamilycare.org/index.html>
CHIP Phone: 1-800-701-0710

NEW YORK – Medicaid

Website: https://www.health.ny.gov/health_care/medicaid/
Phone: 1-800-541-2831

NORTH CAROLINA – Medicaid

Website: <https://medicaid.ncdhhs.gov/>
Phone: 919-855-4100

NORTH DAKOTA – Medicaid

Website: <http://www.nd.gov/dhs/services/medicalserv/medicaid/>
Phone: 1-844-854-4825

OKLAHOMA – Medicaid and CHIP

Website: <http://www.insureoklahoma.org>
Phone: 1-888-365-3742

OREGON – Medicaid

Website: <http://healthcare.oregon.gov/Pages/index.aspx>
Phone: 1-800-699-9075

PENNSYLVANIA – Medicaid

Website: <https://www.dhs.pa.gov/providers/Providers/Pages/Medical/HIPP-Program.aspx>
Phone: 1-800-692-7462

RHODE ISLAND – Medicaid

Website: <http://www.eohhs.ri.gov/>
Phone: 1-855-697-4347, or 401-462-0311 (Direct Rlite Share Line)

SOUTH CAROLINA – Medicaid

Website: <https://www.scdhhs.gov>
Phone: 1-888-549-0820

SOUTH DAKOTA – Medicaid

Website: <http://dss.sd.gov>
Phone: 1-888-828-0059

TEXAS – Medicaid

Website: <http://gethipptexas.com/>
Phone: 1-800-440-0493

UTAH – Medicaid and CHIP

Medicaid Website: <https://medicaid.utah.gov/>
CHIP Website: <http://health.utah.gov/chip>
Phone: 1-877-543-7669

VERMONT – Medicaid

Website: <http://www.greenmountaincare.org/>
Phone: 1-800-250-8427

VIRGINIA – Medicaid and CHIP

Website: <https://www.coverva.org/hipp/>
Medicaid Phone: 1-800-432-5924
CHIP Phone: 1-855-242-8282

WASHINGTON – Medicaid

Website: <https://www.hca.wa.gov/>
Phone: 1-800-562-3022

WEST VIRGINIA – Medicaid

Website: <http://mywvhipp.com/>
Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447)

WISCONSIN – Medicaid and CHIP

Website: <https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm>
Phone: 1-800-362-3002

WYOMING – Medicaid

Website: <https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/>
Phone: 1-800-251-1269

QUICK REFERENCE GUIDE

BEING HEALTHY AT HOME AND AWAY

BENEFITS BUDGETING TOOL

Aetna's Plan Selection and Cost Estimator tools can help you estimate your out-of-pocket health care costs.

PREVENTIVE CARE

Our medical and dental plans provide preventive care at no cost to you.

 www.aetna.com – Sony Consumer Choice, PPO, EPO
www.kp.org – Kaiser HMO
www.deltadentalins.com/sony – Delta Dental plans



SUPPORT FOR WOMEN'S HEALTH

Aetna's Women's Health Program provides resources and preventive services like Breast Health Education Center, maternity support and more.

 www.aetna.com



ON-THE-LOT/VIRTUAL NUTRITIONIST

Meet with a registered dietitian **free** of charge.

 Medgate_Medical@spe.sony.com
 1-310-244-5560

ON-THE-LOT PHYSICAL THERAPY

A licensed physical therapist is conveniently available three times a week, by appointment only.

 Medgate_Medical@spe.sony.com
 1-310-244-5560

EMPLOYEE ASSISTANCE PROGRAM (EAP)

Confidential counseling, consultations and referrals.

 www.guidanceresources.com (Web ID: EAPSONY)
 1-855-327-7669

ON-THE-LOT/VIRTUAL EMPLOYEE ASSISTANCE COUNSELOR

Sony Pictures has an on-the-lot counselor in Culver City who offers employees clinical counseling and access to confidential referrals, resources, support and information on a variety of work-life solutions.

 wtalley@compsych-us.com

CONVENIENT CARE

HEALTH CARE WHEN YOU NEED IT

MinuteClinics are open extended hours — even nights and weekends — in select CVS pharmacies to provide many health care services — and there's an app for that.

Free visits for Aetna EPO and PPO, and for the Consumer Choice Plan after deductible.

 www.cvs.com/minuteclinic

VIRTUAL DOCTOR


With Teladoc, you can talk to board-certified doctor 24/7 over your phone or computer for diagnosis and treatment of minor conditions. Teladoc is free for Aetna EPO and PPO, and for the Consumer Choice Plan after the deductible. Services include behavioral health and dermatology.

 1-855-TELADOC (1-855-835-2362)

HEALTH CARE ADVICE AND SUPPORT



ONLINE ADVICE 24/7

With the Informed Health Line, you can talk to trained nurses 24/7 about medical conditions, treatment options and other health concerns.

 1-800-556-1555



AETNA NURSE ADVOCATE

When you need health care guidance, our Nurse Advocate can help.

 MartinM7@aetna.com
 1-310-244-6636


SECOND OPINIONS, MEDICAL REVIEWS, HELP FINDING A DOCTOR

Teladoc Medical Experts offers all three services — it's confidential and there's no cost to you.

 Teladoc.com/MedicalExperts
 1-800-Teladoc (835-2362)

YOUR MEDICAL 'PERSONAL ASSISTANT'

The Aetna Concierge Program can help with billing, provider, plan design and coverage questions.

 1-888-385-1053

FLEXIBLE SPENDING ACCOUNTS

SET ASIDE \$\$ FOR HEALTH CARE

With a Health Care Flexible Spending Account, you can set aside pre-tax dollars to spend on health care.

 www.payflex.com

DEPENDENT CARE FSA

Set aside up to \$5,000 of your pre-tax income to pay for dependent care.


 www.payflex.com

PLANNING FOR A FAMILY

FERTILITY BENEFITS

Fertility treatment and egg freezing through Progyny.


 www.progyny.com

 1-833-404-2011

ADOPTION REIMBURSEMENT

New! Reimburses up to \$20,000 per child.


 www.progyny.com

 1-833-404-2011

SURROGACY REIMBURSEMENT

New! Reimburses up to \$20,000 per successful surrogacy.


 www.progyny.com

 1-833-404-2011

AETNA MATERNITY MANAGEMENT

Aetna Maternity Management Program is with you every step of your way.

 www.aetna.com

 1-800-cradle1 (1-800-272-3531)

EXPECTANT MOTHER'S PARKING


Available in Culver City parking structures and the Thalberg parking lot. If you need an accommodation, reach out to your Business Partner. Quarterly Maternity/Parental Leave of Absence information sessions — check mySPE for details.

SUPPORT FOR KIDS, BIG AND SMALL

PARENTAL LEAVE

New! Twelve weeks paid parental leave for eligible employees.


 www.matrixabsence.com

 1-888-256-4094

EMPLOYEE ASSISTANCE PROGRAM (EAP)


Confidential counseling, consultations and referrals.


 www.guidanceresources.com (Web ID: EAPSONY)

 1-855-327-7669

BASSINET RENTAL DISCOUNT

SNOO – Smart Sleeper bassinet for newborns. 10% off rental.

 <https://snoo.rentals/sony> (enter code: SONYEMPLOYEE)

 1-855-424-6323

RETURNING TO WORK AND BEYOND

Wellness/Lactation Rooms available for nursing moms. Go to mySPE to find locations.

BREAST MILK SHIPPING

Milk Stork ships your breast milk home when you travel for business.

 www.milkstork.com/sonypictures

SUPPORT FOR PARENTS OF CHILDREN WITH EMOTIONAL/BEHAVIORAL NEEDS

Rethink offers web-based, mobile-friendly support and information.

 parentsupport.rethinkbenefits.com (code: Sony)

NURSING SUPPORT

Breast pump, lactation support from Aetna and Kaiser plans.

BRIGHT HORIZONS FAMILY SUPPORT

- Find sitters, nannies, housekeepers and more
- Discounted tutoring for SAT/ACT, standardized tests and general help

BACK-UP CARE

New! Up to 20 days a year of child care at subsidized rates of \$6/hour for in-home care or \$15-\$25 for center-based care.

 clients.brighthorizons.com/sonypictures

(username: SPE; password: Benefits4You)

 1-877-BH-CARES (1-877-242-2737)

VACCINATIONS


Protect your dependents — and yourself. Most age-appropriate vaccines are preventive care so are available at no cost.

 www.aetna.com

ORTHODONTIC CARE

Delta Dental High Plan only.


 www.deltadentalins.com/sony

 1-800-471-7059


LIFE INSURANCE

Financial protection for your loved ones in the event of your death.

 www.lifebenefits.com

 1-866-293-6047

EXECUTIVE LIFE INSURANCE THROUGH METLIFE


 1-800-756-0124

CARING FOR A PARENT

CAREGIVER LEAVE


New! Twelve weeks paid caregiver leave for eligible employees.

 www.matrixabsence.com

 1-888-256-4094

BACK-UP CARE

New! Up to 20 days a year of elder care at subsidized rates of \$6/hour.


 www.careadvantage.com (Username SPE; password Backup)

 1-877-BH-CARES (1-877-242-2737)

LEGAL HELP FOR YOUR PARENTS

Add your parents and parents-in-law to MetLife Legal Plan.


 info.legalplans.com

 1-800-821-6400

EAP

Companion services, home health care and caregiver support.

 www.guidanceresources.com (Web ID: EAPSONY)


 1-855-327-7669

EMOTIONAL HEALTH

EAP

Free, confidential virtual or in-person counseling for stress, depression, anger, grief and more.

 www.guidanceresources.com (Web ID: EAPSONY)

 1-855-327-7669

TRAVEL AND COMMUTING BENEFITS

TRAVEL PROTECTION

Sony Pictures' travel accident insurance pays benefits in the event of your death while you're traveling for business.


 www.cignaenvoy.com

MEDICAL BENEFITS OVERSEAS

Cigna Medical Benefits Abroad (MBA) protects you if you have an accident or illness while traveling abroad on business.

 www.cignaenvoy.com


(ID: 02428AMBA; password: Cigna1)

 1-800-441-2668

EMERGENCY HELP ABROAD

International SOS provides medical, travel and security services.

 www.internationalsos.com

 1-800-523-6586

SAVE ON COMMUTING COSTS

Pay for commuting expenses — transit, carpool or parking — with pre-tax payroll deductions from your paycheck.

 www.payflex.com

MANAGING FINANCES, PLANNING FOR THE FUTURE

RETIREMENT

Sony's USA 401(k) Plan can help you save and invest money now for your retirement.


 www.rps.troweprice.com

 1-877-SONY-SAVE (1-877-766-9728)

TUITION REIMBURSEMENT

Sony Pictures reimburses eligible employees for certain tuition-related costs through EdAssist.


 <https://spe.edassist.com>

 1-855-853-5017

HEALTH SAVINGS ACCOUNT (HSA)

Available with the Sony Consumer Choice medical plan; you can use the tax-free money to pay health care expenses.


 www.payflex.com

 1-888-678-8242

LEGAL SERVICES PLAN

Estate planning, wills, trusts, refinancing your home and more.


 www.legalplans.com

 1-800-821-6400

IDENTITY THEFT PROTECTION

Protect yourself from the financial and emotional devastation ID theft can cause; provided by Sony Pictures and Allstate Identity Protection.


 www.myaip.com

 1-800-789-2720

NEW! ACCIDENT AND HOSPITAL INDEMNITY

These plans pay you a benefit if you're injured or hospitalized.


 SPEVoluntaryBenefits.com

 1-855-721-2399

LONG-TERM DISABILITY

If you can't work because of a long-term illness or injury, LTD replaces 60% of your monthly base pay.


 www.matrixabsence.com

 1-888-256-4094

OWN A PIECE OF SONY

You can buy Sony stock (SNE) through the Employee Stock Purchase Plan (ESPP) with payroll deductions.


 www.computershare.com

 1-800-621-3777

NEW! STUDENT LOAN ASSISTANCE

Let Sony Pictures help you pay off your student loan debt.

 sonypictures.tuition.io

 1-855-353-9395

CARING FOR YOUR FUR BABIES


INSIDERX PETS PROGRAM

Save on human prescriptions for your pets.

 <https://insiderxpets.com/?source=sony>

PET INSURANCE

Up to 15% discount on Nationwide pet insurance. Mention "bswift Specials" when you call.

 1-877-738-7874

CONTACTS

BENEFIT	PROVIDER	PHONE NUMBER	WEBSITE
Sony Pictures Benefits Center	Sony Pictures	1-833-9-SONY-01	https://benefitscenter.spe.sony.com
Benefits Information	SPE Benefits	N/A	https://benefits.sonypictures.com/ Email: SPE_Benefits@spe.sony.com
Medical	<ul style="list-style-type: none"> • Sony Consumer Choice • Sony PPO • Sony EPO • Kaiser HMO 	Aetna	1-888-385-1053 www.aetna.com
	Family Planning	Kaiser Permanente	1-800-464-4000 www.kp.org
	Medical Plan Comparison Tools	Progyny	1-833-404-2011 www.progyny.com/for-employees
		Sony Pictures	N/A
Prescription Drugs	Prescription Drugs	Express Scripts	1-800-716-2773 www.express-scripts.com/sonypics
		Kaiser (Sony Plans)	1-800-464-4000 www.kp.org
Aetna Resources	Telephone Counseling	Teladoc	1-855-835-2362 www.teladoc.com/Aetna Mobile: www.teladoc.com/mobile
	24/7 Nurseline	Aetna	1-800-556-1555
Dental	<ul style="list-style-type: none"> • Sony Standard Plan • Sony High Plan 	Delta Dental	1-800-471-7059 www.deltadentalins.com/sony
Vision	Vision Coverage	Vision Service Plan	1-800-877-7195 www.vsp.com
Flexible Spending Accounts	<ul style="list-style-type: none"> • Flexible Spending Accounts (FSAs) • Health Savings Account (HSA) • Commuter Benefits 	Payflex	1-888-678-8242 www.payflex.com
Leave/ Long Term Disability	Leaves of Absence/Disability	Lincoln (through 12/31/20)	1-800-530-6506 www.mylincolnportal.com
		Matrix (starting 1/1/21)	1-888-256-4094 www.matrixabsence.com
Leave/Life/ AD&D	Executive Life Insurance	MetLife	1-800-756-0124 mybenefits.metlife.com
401(k)	Financial Wellness: • Sony USA 401(k) Plan • Employee Stock Purchase Plan (ESPP)	T. Rowe Price	1-877-766-9728 www.rps.troweprice.com
		ComputerShare	1-800-621-3777 www.computershare.com
Health and Wellness	Employee Assistance Program (EAP)	ComPsych by GuidanceResources	1-855-327-7669 www.guidanceresources.com (Web ID: EAPSONY)
	On-the-Lot Nurse Advocate	MaeDel Martin	1-310-244-6636 Email: MartinM7@aetna.com
	On-the-Lot Employee Assistance Counselor	Wendy Talley	Email: wtalley@compsych-us.com
	On-the-Lot Nutritionist	Medical Center	1-310-244-5560 Email: Medgate_Medical@spe.sony.com
	On-the-Lot Physical Therapy	Medical Center	1-310-244-5560 Email: Medgate_Medical@spe.sony.com
	Medical Benefits Abroad (MBA)	Cigna	1-800-441-2668 CignaEnvoy.com
	Business Travel Benefits Information	International SOS	1-800-523-6586 (US) 1-215-942-8226 www.internationalsos.com (Member Number 11BCPA000212)
	Second Opinion Service	Teladoc	1-800-Teladoc www.Teladoc.com/MedicalExperts
	Behavior Coaching Assistance	Rethink	1-800-714-9285 http://spe.rethinkbenefits.com
	Breast Milk Shipping	Milk Stork	1-877-242-1306 www.milkstork.com/sonypictures
	Backup Child Care, Elder Care	Bright Horizons	1-877-242-2937 https://clients.brighthorizons.com/sonypictures First time users: User name: SPE Password: Benefits4You
	Tuition Assistance	EdAssist	1-855-853-5017 http://spe.edassist.com
	ID Theft Protection	Allstate Identity Protection	1-800-789-2720 www.myaip.com
	Legal Services	MetLife Legal	1-800-821-6400 info.legalplans.com

Pet Insurance

Pet Prescriptions

Student Loans

Accident Plan

Hospital Indemnity

Nationwide

Inside Rx

Tuition.IO

Aetna

Aetna

1-877-738-7874

N/A

1-855-353-9395

1-855-721-2399

1-855-721-2399

<https://benefitscenter.spe.sony.com>

<https://insiderxpets.com/?source=sony>

sonypictures.tuition.io

<http://SPEVoluntaryBenefits.com>

<http://SPEVoluntaryBenefits.com>



ONE DAY AT A TIME

This is a summary of certain Sony Pictures benefits. Not all employees may be eligible for the benefits described herein. When an employee logs in to Sony Pictures Benefits Center through mySPE or <https://benefitscenter.spe.sony.com> they will only see the benefits available to them. For any questions or to speak to a benefits representative, call 1-833-9-SONY-01.

This Benefits Guide provides summary information on certain Sony Pictures Entertainment benefits. The benefits are governed by the official plan documents (which may include underlying contracts). This guide is not intended to amend or revise any official plan document or change the terms of any plan in any way. This guide is believed to be accurate as of the print date; however, it is subject to change without notice. In the event of any inconsistency between the plan documents and the information in this guide, the terms of the plan documents, as interpreted by the plan administrator in its sole discretion, control in all cases. Sony Pictures reserves the right to amend, suspend, or terminate these benefits plans or programs at any time for any reason. This guide is intended for distribution only to employees eligible for Sony Pictures benefits plans and programs described herein. If you inadvertently receive this Benefits Guide or information about benefit programs that are inapplicable to you, receipt of this guide or other benefit information shall not be deemed to constitute a waiver of any applicable eligibility requirements. This guide is for information purposes only and is neither an offer of any payment of benefits nor a guarantee of continued employment or payment of any future benefits. Nothing contained in this guide alters the at-will nature of employment of Sony Pictures' at-will employees. To the extent eligible employees are employed by Sony Pictures pursuant to a written employment agreement, nothing in this guide alters any provisions therein, including, but not limited to, the duration, term, or termination provisions of the agreement.