

Bioventus Employee Benefits

Benefit Summary: April 5 – December 31, 2021

The following Benefits Guide highlights important elements of the 2021 Bioventus Benefit Plans for U.S. employees and their families. Use this information to align your personal benefit needs to the 2021 benefit offerings.

Eligibility

Unless otherwise stated, you are eligible for the 2021 Bioventus benefits if you are classified as a regular full-time or regular part-time employee working at least 15 hours per week

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TERMS TO KNOW



Bi-Weekly Contribution - The amount you pay out of each paycheck.



Deductible - The amount you pay out-of-pocket when you go to the doctor, a facility or hospital. You must pay the full deductible first before the plan covers non-preventive services.



Copay - A flat fee you may pay for certain services and prescription drugs on some plans.



Coinsurance - A percent of the cost you incur after you have met your deductible.



Out-of-Pocket Maximum - The most you could pay for covered services in the plan year. When you reach the out-of-pocket maximum, the plan pays 100% of your remaining eligible expenses.

Medical – Aetna

Bioventus offers several health plan options that provide you great coverage at a reasonable cost. Coverage options available for each plan are Employee Only, Employee +1 dependent or Family. You should expect to pay a bi-weekly employee contribution out of your paycheck, as well as out-of-pocket costs such as deductible and applicable coinsurance, depending on the plan that you select. Use the Health Savings Account (HSA) or Flexible Spending Account (FSA) to help budget for costs such as deductible, coinsurance, prescriptions and more.

Benefit Network	Choice POS II Purple		Choice POS II Bronze		Choice POS II HDHP with HSA	
	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network
Funding	N/A		N/A		\$750/\$1,500	
Annual Deductible						
Employee	\$500	\$1,000	\$900	\$1,800	\$1,500	\$3,000
Employee + 1	\$1,000	\$2,000	\$1,800	\$3,600	\$3,000	\$6,000
Family	\$1,000	\$2,000	\$1,800	\$3,600	\$3,000	\$6,000
Preventive Care (you pay)	\$0	Not covered	\$0	Not covered	\$0	Not covered
Emergency Room (you pay)	\$200 copay	\$200 copay	\$200 copay	\$200 copay	20% after deductible	20% after deductible
Other Non-preventive Services (you pay)						
Physician/specialist visits	\$25/\$35	40%	\$30/\$50	50%	20%	40%
Hospital (inpatient and outpatient)	20%	40%	30%	50%	20%	40%
Mental health/substance abuse (inpatient and outpatient)	20%	40%	30%	50%	20%	40%
Medical Out-of-Pocket Maximums						
Single	\$2,500	\$4,500	\$3,500	\$7,000	\$3,500	\$7,000
Employee + 1	\$5,000	\$9,000	\$7,000	\$14,000	\$6,850	\$13,700
Family	\$5,000	\$9,000	\$7,000	\$14,000	\$6,850	\$13,700
	Bi-Weekly Pre-tax Employee Contributions		Bi-Weekly Pre-tax Employee Contributions		Bi-Weekly Pre-tax Employee Contributions	
Employee Only	\$92.44		\$57.78		\$32.94	
Employee + 1	\$184.88		\$115.56		\$65.88	
Family	\$346.41		\$202.22		\$106.41	

Prescription Coverage

When you enroll in a medical plan, you will automatically receive prescription drug coverage through Aetna. Your prescription drug costs are based on three different categories of prescription drugs.

	Network Pharmacy (31-day supply)	Mail Order (90-day supply)
Generic	\$10 copay	\$20 copay
Preferred	\$30 copay	\$60 copay
Non-Preferred	\$50 copay	\$100 copay

Note: Prescription copays do not apply to members enrolled in the Choice POS II HDHP. All prescription costs are paid out of pocket until you reach your deductible, upon which prescriptions are then subject to the copays, listed above. For additional information, visit the Benefits area on Bionet.

Health Savings Account (HSA)

- Participants receive annual Bioventus-paid HSA contribution: \$750 EE Only and \$1,500 EE + 1/Family (pro-rated based on enrollment date if after January 1; deposited in equal bi-weekly amounts)
- Contribute pre-tax up to IRS combined annual maximum: \$3,600 EE/\$7,200 EE + 1/Family; additional \$1,000 catch-up contributions allowed for age 55+
- Full balance rolls over from year to year; all funds are yours to keep even if you terminate employment

Dental – Delta Dental of North Carolina

Delta Dental PPO

Annual Deductible	\$50 per person
Preventive and Diagnostic Care	Covered at 100%
Basic Restorative Care	20% after deductible
Major Restorative Care Crowns, bridges, dentures, implants, TMD treatment	50% after deductible
Annual Maximum Benefit	\$1,500 per person per calendar year
Orthodontia (Adult and Child)	50%; deductible is waived
Orthodontia Lifetime Maximum	\$1,000 per person

Bi-Weekly Pre-tax Payroll Deductions

Employee Only	\$5.65
Employee + 1	\$10.98
Family	\$21.07

Flexible Spending Accounts – Interactive Medical Systems

Flexible Spending Accounts (FSAs) administered through Interactive Medical Systems (IMS) let you set aside before-tax money via payroll deductions to pay for eligible out-of-pocket health care expenses throughout the year. You must enroll each year if you wish to contribute. Elections do not automatically carry over from year to year. Eligible expenses depend on the FSA selected. Visit www.irs.gov for details.

	Health Care FSA	Limited Health Care FSA
Eligible	Anyone not enrolled in the Choice POS II HDHP	Choice POS II HDHP participants only
Purpose	Reimburses you for out-of-pocket expenses for eligible medical, prescription drug, dental, and vision expenses incurred by you and your eligible dependents	Reimburses you for dental and vision expenses only
2020 IRS Maximum Contribution	\$2,750	\$2,750

**Your FSA contributions are deducted through regular payroll deductions, in equal amounts throughout the year. The full amount of your Health Care FSA or Limited Health Care FSA is available on January 1, even though you have not fully funded the account.*

Vision – VSP

VSP Vision Plan

	In-network	Out-of-network
Routine Eye Examination (Every 12 months)	Covered in Full (exam and glasses)	Plan pays up to \$50
Eyeglass Frames (Every 12 months)	Up to \$130; 20% off balance over \$130	Up to \$54
Lenses (Every 12 months)	Combined with annual exam	
Single vision		Up to \$25
Lined bifocal		Up to \$40
Lined trifocal		Up to \$55
Lenticular		Up to \$100
Contact Lenses (instead of glasses)	Up to \$130	Up to \$104

Bi-Weekly Pre-tax Payroll Deductions

Employee Only	\$2.15
Employee + 1	\$5.79
Family	\$10.88

TELEMEDICINE THROUGH TELADOC

Don't forget about Teladoc! Teladoc is an easy, convenient, affordable option for quality medical care accessible by phone! Licensed doctors can treat cold and flu symptoms, respiratory infections, sinus problems, ear infections, and more without a visit to the doctor's office!



To get started, register online, on the Teladoc mobile app, or by phone:

1. www.Teladoc.com
2. Call 1-855-Teladoc (835-2362), or
3. Use your mobile phone at www.teladoc.com/mobile.

Life and Accidental Death & Dismemberment (AD&D) Insurance – Cigna

Basic Life and AD&D

All eligible employees receive both basic life and basic AD&D insurance coverage through Cigna equal to two times your base salary, rounded to the next \$1,000, to a maximum amount.

Coverage	Who's Covered	Details
Company-provided insurance		
Basic Life Insurance	You	2x annual base salary up to \$1,000,000
Basic AD&D Insurance	You	2x annual base salary up to \$1,000,000
Supplemental insurance*		
Group Term Life Insurance	You	1x-3x annual compensation, up to the lesser of 3x your annual compensation of \$1,500,000; 5x or \$2,500,000 when combined with basic life
Dependent Life Insurance	Your spouse and dependent children	Option 1: Your spouse: \$10,000 Dependent child(ren): \$5,000 (6 months to 19, or age 23 if full-time student) Option 2: Your spouse: \$20,000 Dependent child(ren): \$5,000 (6 months to 19, or age 23 if full-time student)
Supplemental AD&D	You, your spouse and dependent children	Up to \$500,000 benefits elected in units of \$25,000 for both employee and spouse Up to \$25,000 benefit for child(ren) and elected in units of \$5,000

Supplemental Life

If you want additional coverage, you have the opportunity to purchase supplemental coverage for yourself, your spouse and dependent children.

Bi-Weekly Payroll Deductions

Age	Voluntary Life EE Rate per \$1,000
0-24	\$0.02
25-29	\$0.03
30-34	\$0.04
35-39	\$0.04
40-44	\$0.06
45-49	\$0.09
50-54	\$0.16
55-59	\$0.26
60-64	\$0.41
65-69	\$0.67
70+	\$1.74

Spouse & Child

\$1.15 bi-weekly for \$10,000 Spouse
\$5,000 Child

\$2.31 bi-weekly for \$20,000 Spouse
\$5,000 Child

Supplemental AD&D

Employee/Spouse	\$0.011
Child	\$0.012

Short and Long Term Disability Insurance – Cigna

Disability benefits through Cigna help protect against loss of income similar to protecting your home, car, possessions, and your health with insurance. This coverage replaces a portion of your income if you are unable to work because of a disabling illness or injury. You will receive disability benefits from Bioventus automatically upon hire. You do not need to take any action. Read below for an overview of the coverage Bioventus provides you.

	Short-term Disability	Long-term disability
Benefits you can receive	100% of pre-disability earnings	60% of pre-disability earnings
Maximum benefit payable	None	Up to \$15,000 per month
Waiting period	6 months	N/A
Benefit duration	13 weeks	Varies depending on the age when your disability begins

State Mandated Disability Plan

Depending on where you live, you may be automatically enrolled in a state mandated temporary disability income plan. Your Bioventus STD and LTD benefit will be offset by any benefits you receive under this program.

401(k) Retirement Savings Plan – Fidelity

- Bioventus matches 100% of the first four percent and 50% of the next two percent of your pre-tax contribution up to the amounts allowable by IRS guidelines. You may also participate in a Roth after tax plan.
- This plan allows for a discretionary company contribution (referred to as the Bioventus Profit Sharing Plan) and if the company's Adjusted Global EBITDA is between 106% and 108% of target for 2021, Bioventus, in its discretion, may make a discretionary contribution to the 401(k) plan.
- Vesting: 25% per year with 100% after 4 years of service.
- All contributions must adhere to IRS maximum contribution guidelines.

Accident Insurance – Aetna

Group Accident insurance provides an additional form of supplemental medical insurance, by paying a lump-sum benefit directly to the insured upon a qualified accidental injury. As a Bioventus employee, you have access to two benefit options, Basic and Premier.

Basic	Premier
\$1,000 Initial Hospital Confinement with limitations*	\$2,000 Initial Hospital Confinement with limitations*

*See policy for complete details and limitations

Bi-Weekly Payroll Deductions

Tier	Basic	Premier
Employee	\$3.12	\$5.92
Employee + Spouse	\$5.60	\$10.64
Employee + Child	\$5.96	\$11.52
Family	\$8.14	\$15.72

These coverages are portable and you will receive a notice regarding this from Aetna when coverage has terminated.

Group Critical Illness – Aetna

Aetna Benefits Group Critical Illness Insurance offers a supplemental medical insurance product designed to pay a lump-sum benefit directly to the insured upon diagnosis of a covered critical illness. Bioventus offers two coverage options, \$5,000 or \$10,000. If you enroll your spouse or dependent, they will be covered at up to 50% of your maximum benefit amount.

Bi-Weekly Payroll Deductions

Age	\$5,000 Coverage Amount				\$10,000 Coverage Amount			
	EE	EE + SP	EE + CH	Family	EE	EE + SP	EE + CH	Family
<20	\$0.36	\$0.58	\$0.36	\$0.58	\$0.70	\$1.16	\$0.70	\$1.16
20-24	\$0.44	\$0.74	\$0.44	\$0.74	\$0.90	\$1.48	\$0.90	\$1.48
25-29	\$0.58	\$0.94	\$0.58	\$0.94	\$1.18	\$1.88	\$1.18	\$1.88
30-34	\$0.78	\$1.22	\$0.78	\$1.22	\$1.56	\$2.44	\$1.56	\$2.44
35-39	\$1.06	\$1.66	\$1.06	\$1.66	\$2.14	\$3.32	\$2.14	\$3.32
40-44	\$1.58	\$2.44	\$1.58	\$2.44	\$3.18	\$4.90	\$3.18	\$4.90
45-49	\$2.46	\$3.74	\$2.46	\$3.74	\$4.90	\$7.48	\$4.90	\$7.48
50-54	\$3.88	\$5.88	\$3.88	\$5.88	\$7.76	\$11.78	\$7.76	\$11.78
55-59	\$5.92	\$8.94	\$5.92	\$8.94	\$11.84	\$17.90	\$11.84	\$17.90
60-64	\$8.56	\$12.90	\$8.56	\$12.90	\$17.12	\$25.80	\$17.12	\$25.80
65-69	\$11.84	\$17.84	\$11.84	\$17.84	\$23.70	\$35.68	\$23.70	\$35.68
70+	\$15.00	\$22.58	\$15.00	\$22.58	\$30.00	\$45.16	\$30.00	\$45.16

These coverages are portable and you will receive a notice regarding this from Aetna when coverage has terminated.

Hospital Indemnity – Aetna

Group Hospital Indemnity Insurance provides supplement insurance by paying a benefit payment per day to you to be used in any capacity while admitted to a hospital. As a Bioventus employee, you have access to two benefit options, Basic and Premier.

Basic	Premier
\$1,500 First Day Hospital Confinement, 1 per year *	\$2,000 First Day Hospital Confinement, 1 per year*

*See policy for complete details and limitations

Bi-Weekly Payroll Deductions

Tier	Basic	Premier
Employee	\$8.90	\$11.78
Employee + Spouse	\$19.82	\$26.24
Employee + Child	\$15.26	\$20.16
Family	\$25.22	\$33.34

These coverages are portable and you will receive a notice regarding this from Aetna when coverage has terminated.

Student Debt Assistance

If you have student loans, you may be eligible for this amazing benefit, and extra contribution each month towards your student debt!

- Why? Because we want to help. We understand the impact student loans may have on your life and see how hard you work to pay them off. Signing up is quick and easy. Once your loan eligibility is verified, you'll start receiving an extra contribution of \$100 per month up to a lifetime maximum of \$9,000.

State Paid Family Leave

Employees who live or work in New York, Massachusetts and Washington State will see a payroll deduction for Paid Family Leave. The deduction is required and the amount is regulated by the state. Other states may be added as a result of changes in state laws.

Additional Benefits

Identity, Financial and Privacy Protection Program through Allstate

Bioventus offers additional protection for you and your family's identity, financials and privacy. The Allstate benefit proactively detects and prevents fraud through credit monitoring, password management solutions, and a one-million dollar identity theft insurance policy. For more information on this important benefit, please visit www.myaip.com.

Bi-Weekly Payroll Deductions

Employee Only	\$4.59
Family	\$8.28

Legal Services through ARAG

Through ARAG Legal Services, you have access to legal advice and representation from a wide network of 11,000 qualified attorneys. Features include low monthly costs for a variety of situations.

Bi-Weekly Payroll Deductions

UltimateAdvisor Plus®	\$11.19
UltimateAdvisor®	\$7.27

Business Travel Accident (BTA)

Employees who must travel on business are covered under Bioventus' BTA policy. The BTA provides an additional accidental death benefit of 5x your annual base salary up to \$500,000.

As a Bioventus employee, you are automatically enrolled in this coverage.

Pet Insurance through Nationwide

Bioventus aims to protect all members of your family, including your pets. Pet Insurance is being offered through Nationwide. Two coverage options are available to you, Pet Protection and Pet Protection + Wellness, within these coverage options you may choose either 50, 70 or 90% reimbursement levels (some exclusions may apply). The Wellness offering includes routine care, whereas the Pet Protection option covers unexpected illnesses and accident only. Pet insurance functions similar to medical insurance, with a deductible to be met before coverage begins.

Rates will vary by age, location, and breed. Please visit <http://www.petinsurance.com/bioventus> or call Nationwide at 877-738-7874 for more information and to enroll in the plan. You can enroll in this coverage any time throughout the plan year.

(Continued)

Additional Benefits (cont'd)

Personal Accident Insurance (PAI)

Bioventus provides employees with the option to purchase Personal Accident Insurance through CIGNA. PAI helps protect you and your family from financial loss if an accident results in death or serious injury. You have the option to purchase coverage for yourself, your spouse, and your children. For more information, please visit Bionet.

Tuition Assistance Program (TAP)

As part of our commitment to your ongoing growth and development, Bioventus allows you to receive up to \$5,250 annually for tuition and other eligible expenses, dependent upon grades earned in approved courses. Regular full-time employees are eligible to participate with prior management approval after six months of employment. For more information about this benefit, please contact your HR representative.

Life Assistance Program (LAP)

The LAP is a free, confidential service you can access by phone or online 24/7. Counselors offer you and members of your household assistance with emotional well-being and life events. The LAP also offers referrals to local professionals, resources for care giving, health and wellness contacts, and help with daily living. This may include help finding caregivers, legal counsel and more. For more information, contact CIGNA Behavioral Health at 1-800-538-3543 or go online at www.cignabehavioral.com/cgi. On the Healthy Rewards page, you can learn about discounts to various health and wellness providers such as smoking cessations, weight management, dieticians and more!

bWell Wellness Program

Well-being is more than just staying in shape – it means paying attention to nutrition, understanding the importance of personal relationships, keeping good financial practices, appreciating the value of your work, and recognizing your purpose. Through our partner, WellRight, you have access to a health assessment, life coaching, company and personal challenges and opportunities to earn rewards. For more information on the program contact us at benefitshelp@bioventusglobal.com.

Discounts and Perks Program

Access thousands of discounts on tickets, hotels, car rentals and more anytime throughout the year! Now available via PerkSpot at <https://Bioventus.perkspot.com>.

Adoption Assistance

Bioventus provides financial assistance towards expenses you may incur if you choose to adopt children. Full-time employees are eligible for this benefit after one year of service. Bioventus will reimburse you for up to 100% of eligible charges which you are required to pay, up to a maximum of \$5,000 for each child adopted per family. Benefits will be paid once the child has been placed in your home for adoption. "Placed" means the date the child becomes a member of your household and not the date of final adoption which, in fact, may be some time after the child has been living with his or her adopting parents. For more information visit Bionet.

Fitness Reimbursement

Bioventus will reimburse employees for certain expenses related to getting and staying active of up to \$90 per quarter. Examples of reimbursable expenses include the following:

- Fitness club fees at approved facilities for regular full-time employees after the employee has completed 21 visits to the facility during that quarter.
An approved facility will consist of any local gym/fitness center with the ability to track your individual attendance and monthly fees.
- Personal trainer fees
- Entrance fees for participating in marathons, triathlons, Tough Mudder competitions, 5k walk/runs and other fitness competitions (proof of participating will be required).

To get reimbursed, complete the Fitness Reimbursement Request form found on Bionet, attach the supporting documentation, and submit the form to an HR representative within 60 days from the end of the quarter which you are requesting reimbursement.

Approval of reimbursable expenses will be at the discretion of the US benefits leader with any exceptions approved by the SVP/Chief Human Resources Officer.

Period audits will be conducted to ensure compliance. Fitness Reimbursement is subject to taxes, which will be handled by the Payroll department.

Contacts

Benefit	Plan Information	Contact
Medical	Aetna	1-855-845-0572 www.aetna.com
Prescriptions	Aetna	1-855-845-0572 www.aetnapharmacy.com/standard
Dental	Delta Dental of North Carolina	1-800-662-8856 www.deltadentalnc.com Group number: 0593-0001
Vision	VSP	1-800-877-7195 www.VSP.com Group number: 30061598
Life/AD&D	Cigna	1-800-362-4462
STD & LTD	Cigna	1-800-362-4462
HSAs	Payflex	1-888-678-8242 www.payflex.com
FSA's	Interactive Medical Systems	www.healthierbenefits.com 1-800-426-8739 ext. 5052
401(k)	Fidelity	1-800-835-5098 www.401k.com
Critical Illness, Accident, Hospital Indemnity	Aetna	1-800-607-3366 myaetnasupplemental.com
Identity, Financial and Privacy Protection Program	Allstate	www.myaip.com
Legal Insurance	ARAG	www.ARAGlegalcenter.com Access Code: 18222bio 1-800-247-4184
HR Team	Phone	Email
Ambre Wachter	919-474-6815	ambre.wachter@bioventus.com
Sharon Dearing	901-341-2942	sharon.dearing@bioventus.com
General Inbox		benefitshelp@bioventusglobal.com