

VOLUNTARY BENEFITS
GUIDE

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Introduction

Welcome to Gallagher vChoice. This unique program allows you to fill in the benefit gaps based on you and your family's individual needs. By carefully selecting and combining competitive insurance companies and providers, Gallagher vChoice offers you choices and convenience not found anywhere else.

Who is eligible?

After completing your employer's probationary period, all active eligible employees are qualified to enroll in Gallagher vChoice. Dependents are also eligible to enroll in certain benefits. Double coverage is not allowed.

When and how do I enroll?

You may enroll when you first become eligible or during annual open enrollment. You may also enroll or change coverage if you have a qualified change in status. These are the only times you are eligible to enroll in Gallagher vChoice.

To enroll, you must log in to the Gallagher vChoice enrollment website and complete your elections. Some benefits require additional forms to be completed before coverage becomes effective. Please see "How to Enroll" for further details.

Generally, changes can only be made at open enrollment. There are a few exceptions:

- · You may enroll a new spouse or new child within one month of the date of marriage or birth/adoption.
- You may terminate your spouse if divorced or legally separated, or he/she dies or becomes disabled for more than one
 month.
- · You must terminate any child who no longer qualifies as a dependent.
- · You may change your coverage if, loss or gain of other coverage has occurred.
- You must terminate coverage if you are transferred to an employment status not eligible to participate in Gallagher vChoice; however, continuation of coverage is available for some policies. Please refer to the policy listings in this guide for more details.
- You may change or terminate coverage if either you or your spouse goes on an unpaid leave of absence.

Changes due to qualifying events must be consistent with the event.

What occurs at open enrollment?

At open enrollment, you can add or delete dependents and enroll in or terminate any coverage. Adding or increasing coverage may require that you submit an Evidence of Insurability form. Once you have been approved for coverage, the insurance company cannot cancel it due to declining health.

If you had a salary change during the prior year, any affected coverage will be automatically adjusted at open enrollment. In addition, costs may change due to a change in rates by the insurance company. Some policies' rates will increase as you age.

Who can I call if I have a question or need help?

Gallagher vChoice is co-sponsored by your employer and Arthur J. Gallagher & Co. A team of Benefit Advocates is available to answer questions and provide help when you need it.

Arthur J. Gallagher & Co. 777 - 108 Ave NE, Suite 200 Bellevue, WA 98004-5120

425.201.9144 Toll Free: 800.542-3737 Fax: 425.454.9622

Email: bac.parametrix@ajg.com

Who pays if I have a claim?

All claims are paid by the underwriting insurance company.

If you need to make a claim, contact your employer to begin the necessary paperwork. A team of Benefit Advocates is also available assist you during the process. To contact a Benefit Advocate, please call 800.542.3737.

Where can I get information about my coverage?

This guide contains general information regarding coverage available through Gallagher vChoice. Detailed information can be found in the Certificates of Coverage. To receive a Certificate of Coverage, please contact your employer.

Important Terms

Eligibility Date

This is the effective date of coverage.

Evidence of Insurability (EOI)

Document used for medical underwriting. You may be required to complete this form if you choose to enroll after your initial eligibility date or you request an amount over the Guarantee Issue.

Guarantee Issue

The amount of coverage you are guaranteed to receive without completing a medical questionnaire.

Principal Sum

The amount of coverage you purchase.

How to Enroll

You may enroll in Gallagher vChoice through the enrollment website. If you have any questions regarding your benefits or enrollment, please contact your employer or a Benefit Advocate.

Enrolling in Gallagher vChoice

- Enrollment Site: <u>www.GallaghervChoiceEnroll.com</u>
- PIN: The last four digits of your Social Security Number followed by the two digit year of your birth.
 Ex: Someone born in 1980 and with a SSN of 123-45-6789 would have the PIN 678980.

Enter in the administrative website address in your Internet browser. On the home page, enter your Social Security and Password (details above) and click on "Log In".

Enrollment Site Login:

Employee ID or Social Security Number Personal Identification Number (PIN)

Log In Forgot Pin?

Click "Next" to begin the enrollment process. Fill in the requested information on each screen, clicking Gallagher VChoice "Next" once complete. Elections and/or changes will not be finalized until Welcome! you have reached the end of all coverage options, We are pleased to offer you a comprehensive benefits package. You'll be able to review your options, make informed selections and build a benefits portfolio that fits your unique needs. PIN has been signed, and you receive your Summary of Benefits confirmation. ©Arthur J. Gallagher & Co.

Term Life Insurance

As your lifestyle, family and income changes, so does your need for life insurance. Now is a good time to review your life insurance protection and make sure it has kept pace with inflation and your changing needs. You have the opportunity to enroll in a special voluntary life plan sponsored by your employer and underwritten by UNUM.

Benefits

You may elect term life insurance coverage in an amount between 1 to 5 times your annual earnings up to \$500,000 (individual options are listed on the Gallagher vChoice enrollment website). Your spouse/domestic partner may enroll in coverage up to 50% of the approved employee amount. You may elect \$10,000 of coverage for each of your eligible children (coverage is reduced to \$1,000 for children between birth to 6 months old).

If you (or your spouse/domestic partner) would like to increase the term life insurance coverage, you must wait until the next open enrollment period to do so. You may also be required to submit a medical Evidence of Insurability form to UNUM for approval.

Benefits are paid to your designated beneficiary in the event you die from any cause (except as noted in the Exclusions and Limitations below). If you enroll your spouse/domestic partner or child, you will automatically be the beneficiary of your spouse/domestic partner's or child's coverage.

Eligibility

Term life insurance is available to:

- Employee
- Spouse/Domestic Partner
- Children to age 26 (includes your natural offspring, adopted children, stepchildren, domestic partner's dependents and foster children)

You must enroll in employee term life coverage in order to enroll your spouse/domestic partner and/or dependents.

Please note: Dependent Coverage: Insurance coverage is not allowed if that dependent is totally disabled on the date that insurance would otherwise be effective. This means you may not enroll or increase coverage if your dependent meets the definition of "Totally Disabled".

If your eligible dependent is totally disabled, your dependent's coverage will begin on the first of the month following the date your eligible dependent no longer is totally disabled. This provision does not apply to a newborn child while dependent insurance is in effect

"Totally disabled" means that, as a result of an injury, a sickness or a disorder, your dependent is confined in a hospital or similar institution; is unable to perform two or more activities of daily living (ADLs) because of a physical or mental incapacity resulting from an injury or a sickness; is cognitively impaired; or has a life threatening condition.

Exclusions and Limitations

As is permitted under the Age Discrimination and Employment Act, your maximum allowable coverage will be reduced to:

- 65% of your coverage amount at age 70
- 50% of your coverage amount at age 75

Continuation of Coverage

Continuation of coverage options are available should you wish to continue term life insurance when you would otherwise lose coverage (i.e., your employment terminates). Please see your employer for details.

Guaranteed Coverage

Your coverage may be guaranteed if you enroll during your initial open enrollment period or within 31 days of first becoming benefit eligible. Guarantee Issue is only available during the initial enrollment period. Spouse/domestic partner Guarantee Issue amounts are 50% of the employee amounts and \$10,000 per child.

PLEASE NOTE: You will be billed your election amount up to the Guarantee Issue beginning on your eligibility date. Any amount you elect in excess of the Guarantee Issue will be effective the first day of the month following approval from underwriting.

If you are electing an amount above the Guarantee Issue you must complete the Evidence of Insurability form. If you or your family wishes to enroll more than 31 days after you become eligible, you must wait until the next open enrollment. Guarantee Issue coverage will not be available to you at that time and you must complete an Evidence of Insurability form.

For current participants: Please be aware that if you are declined due to adverse health for any amounts above the Guarantee Issue, you will be locked at Guarantee Issue regardless of any future salary changes.

Important Notes

Waiver of Premium

If you become totally disabled before age 60 and your disability lasts at least 9 months, you may be eligible for a Waiver of Premium. You must complete the Waiver of Premium application. If the application is approved, your coverage will continue, at no cost to you, as long as you are under age 65 and continue to remain disabled. Please see your employer for further information.

Accelerated Benefits

If a doctor certifies you are terminally ill and not expected to live more than 12 months, you may request up to 75% of your life insurance amount be paid to you. Please see your employer for further information.

Accidental Death & Dismemberment

This benefit covers you against accidents occurring on or off the job, in or away from home, with no geographical limits. Accidental Death & Dismemberment insurance is offered through The Standard.

Benefits

You may purchase coverage for yourself in multiples of \$100,000 up to \$500,000 (not to exceed 10 times your annual earnings).

If a covered loss occurs while insured under this plan, benefits are payable to you, if living. Benefits payable because of loss of your life or coma will be paid to the Beneficiary you name.

The amount payable is a percentage of the AD&D Insurance Benefits or the Dependents AD&D Insurance Benefits in effect on the date of the accident and is determined by the Loss suffered as shown in the following table:

Lo	Percentage Payable	
a.	Life	100%
b.	One Hand or One Foot	50%
C.	Sight in one eye, speech, or hearing in both ears	50%
d.	Two or more of the Loses listed in b. and c. above	100%
e.	Thumb and index finger of the same hand	*25%
f.	Quadriplegia	**100%
g.	Hemiplegia	**50%
h.	Paraplegia	**75%
i.	Uniplegia	**25%
j.	Coma	***1%

^{*} No AD&D Insurance Benefits will be paid for Loss of thumb and index finger of the same hand if an AD&D Insurance Benefit is payable for the Loss of that entire hand.

No more than 100% of your AD&D Insurance Benefit will be paid for all Losses resulting from one accident.

Additional Benefits

- Seat Belt Benefit
- Air Bag Benefit
- Repatriation Benefit
- Career Adjustment Benefit
- Child Care Benefit
- Higher Education Benefit

Guaranteed Coverage

Accidental Death & Dismemberment coverage is offered on a guaranteed issue basis – no medical questions must be answered in order to enroll in coverage.

^{**} No AD&D Insurance Benefit will be paid for loss of function of a hand or foot if an AD&D Insurance Benefit is payable for Quadriplegia, Hemiplegia, Uniplegia or Paraplegia involving that same hand or foot.

^{***}Per month of the remainder of the AD&D Insurance Benefit payable for Loss of life after reduction by any AD&D Insurance Benefit paid for any other Loss as a result of the same accident. Payments for coma will not exceed a maximum of 12 months.

Eligibility

AD&D insurance is available to:

Employee

Coverage will end when employment terminates.

Active Work Requirement

If you are incapable of Active Work because of Sickness, Injury or Pregnancy on the day before the scheduled effective date of your insurance or an increase in your insurance or increase in your insurance will not become effective until the date after you complete one full day of Active Work as an eligible Member.

Additional Features

Repatriation Benefit - provides coverage for unexpected hardship during employee travel, both for business and leisure.
 If an insured employee's death occurs while traveling more than 200 miles from the employee's residence, The Standard helps cover the expenses incurred when transporting the remains back home.

The Standard's Family Benefits Package extends financial assistance to eligible family members in the event of an employee's accidental death for which AD&D insurance benefits are payable:

- Career Adjustment Benefit pays for qualifying tuition expenses incurred by an employee's eligible children.
- Child Care Benefit pays for qualifying tuition expenses incurred by an employee's spouse for training aimed at obtaining employment or increasing earnings.
- Higher Education Benefit pays for qualifying child care costs incurred by an employee's spouse in order to work or obtain training aimed at securing employment or increasing earnings.

Exclusions

No AD&D Insurance Benefits are payable if the accident or Loss is caused or contributed to by any of the following:

- 1. War or act of War. War means declared or undeclared war, whether civil or international, and any substantial armed conflict between organized forces of a military nature
- 2. Suicide or other intentionally self-inflicted Injury, while sane or insane.
- 3. Committing or attempting to commit an assault or felony, or actively participating in a violent disorder or riot. Actively participating does not include being at the scene of a violent disorder or riot while performing official duties.
- 4. The voluntary use or consumption of any poison, chemical compound, alcohol or drug, unless used or consumed according to the directions of a Physician.
- 5. Sickness or Pregnancy existing at the time of the accident or exposure.
- 6. Heart attack or stroke.
- 7. Medical or surgical treatment or diagnostic procedure for any of the above.
- 8. Boarding, leaving, or being in or on any kind of aircraft. However, this exclusion will not apply if the person who suffers the Loss is a fare paying passenger on a commercial aircraft.

Long Term Care

Long-term care is the assistance received when someone needs help with two or more activities of daily living – such as dressing, eating, moving around, bathing and toileting – or when someone suffers a severe cognitive impairment such as a stroke or Alzheimer's. Most people don't think about long-term care until it affects someone close to them. With more than 13 million people in the United States needing long-term care today, the importance of planning ahead and being prepared is critical. The long term care benefit is offered through UNUM.

Benefits

There are several different long term care plans available. Please see the Gallagher vChoice enrollment website for your coverage levels.

	PLAN 1	PLAN 2	PLAN 3	PLAN 4
Benefit Duration	3 Years	3 Years	6 Years	3 Years
Facility Benefit Amount (per month)	\$3,000	\$3,000	\$6,000	\$4,000
Assisted Living Facility Percent	100%	100%	100%	100%
Lifetime Maximum ¹	\$108,000	\$108,000	\$432,000	\$144,000
Professional Home & Community Care ²	50%	50%	50%	50%
Total Choice Home Care ³	N/A	50%	N/A	N/A
Inflation Protection ⁴	N/A	N/A	N/A	Yes

- 1 The Lifetime Maximum is the maximum benefit dollar amount UNUM will pay over the life of your coverage. This dollar amount is based on the Facility Benefit Amount and Benefit Duration.
- Professional Home and Community Care means qualified long term care services provided for at least one hour or more per day by/through a licensed home health care agency, a licensed home health care professional or in an adult day care facility.
- Total Choice Home Care means qualified long term care services provided by anyone including a family member, by/through a licensed home health care agency, a licensed home health care professional, in an adult day care facility or by an informal caregiver.
- 4 Inflation Protection will defend your policy against rising prices. The facility benefit amount will increase, on a compounding basis, each year on your policy's anniversary. Increases will be automatic and will occur regardless of your health and whether or not you are eligible for or receiving benefit payments. Your premium will not increase due to these automatic increases. Any remaining lifetime maximum benefit amount will also increase by the same percentage.

Eligibility

Long Term Care is available to: Employees must work 30 hours or more per week to be eligible for LTC.

- Employee
- Spouse/Domestic Partner
- Adult children (includes your own natural offspring, adopted children, stepchildren, domestic partner's dependents and foster children)
- · Adult siblings, in-laws, parents and grandparents

Exclusions and Limitations

Exclusions and limitations vary based on different plans available. For specific plan details, please see the Plan Description section of the Long Term Care Benefit and Cost Summary. To receive a Benefit and Cost Summary, please contact your employer or a Benefit Specialist at 800.542.3737.

Continuation of Coverage

Continuation of coverage options are available should you wish to continue long term care insurance when you would otherwise lose coverage (i.e., your employment terminates). Please see your employer for details.

Guaranteed Coverage

Guaranteed coverage is available to employees only if you enroll when you are first eligible. If you choose to enroll at a later date, you will need to submit a health questionnaire and the coverage is not guaranteed.

Your spouse/domestic partner, adult children, adult siblings, in-laws, parents and grandparents must complete an additional application through UNUM in order to enroll in coverage.

The intent of this outline is to briefly highlight key features of your plan and is not to replace your insurance contract, certificate or booklet. We have compiled information into summary form to outline answers to questions we most commonly receive. If this benefit outline does not address your specific benefit needs, you should contact the insurance carrier or refer to their contract, certificate or booklet for more specific information and limitations. The information provided in the enclosed material is for comparative and informational purposes only. Actual claims paid are subject to the terms and conditions of the individual carriers' contracts. Please review the carriers' contracts for more detailed information on the plans being offered. The descriptions in this brochure are HIGHLIGHTS only. Should any conflict arise between this brochure and the contracts underwritten by the insurance companies, the contracts will govern in all cases.

