

Your 2024 Benefit & Cost Summary

For US Employees

Benefits for a better life

Our benefit program is designed to help you live a better life.

Gallagher provides lots of options to help you protect your finances, your health, your family, and your overall wellbeing. All we need is a commitment on your part to understand how the plan you select works, to take advantage of what it has to offer.


This Benefit & Cost Summary is your starting point to learn about your benefits — whether you're enrolling for the first time, reconsidering your benefits during Annual Enrollment, or checking into specific features of a plan during the year. If you have a question about your benefits, start here and we'll point you in the right direction to find the answers you need.

Your benefits are a valuable part of your total compensation package. Be sure to make the most of them — today and throughout the year.






Navigating this document

Gallagher provides a wide variety of great benefits to support your life. To help you navigate through this guide and easily find the benefits you need, we've included a wayfinding bar at the top of this guide. Simply click the  icon to be brought back to the table of contents where you can be directly linked to the information of your choosing by clicking the section title.

This Benefit & Cost Summary summarizes the Arthur J. Gallagher & Co. benefits program. Complete descriptions of each benefit are available in the actual plan documents. Every effort has been made to ensure this summary accurately describes these benefits. However, if there is a conflict between this information and the plan documents, the plan documents will govern. In addition, participation in the benefits program does not constitute a right to continued employment with the company. Nothing in this guide should be construed as a contract or offer to contract for employment for any specific time or under any particular terms and conditions. While it is the company's intent to continue these programs, we reserve the right to amend or terminate them at any time.



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 This signifies a benefit that is company-provided.





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Eligibility for benefits



Full-time Employees

Full-time employees are eligible to participate in all Gallagher benefits. A full-time employee is anyone regularly scheduled to work 30 or more hours per week and classified as full-time based on job classification.

If you are a full-time employee, most benefits begin on your first day of employment. The following benefits require completion of an eligibility period:

- Short-Term Disability (three months of employment)
- Long-Term Disability (three months of employment)
- Paid Parental Leave (three months of employment)
- Vacation (three months of employment)
- Educational Assistance (six months of employment)
- 401(k) discretionary company match (one year of employment)

Part-time Employees

Employees who are regularly scheduled to work less than 30 hours per week may be eligible for certain benefits*:

- Business Travel Accident Insurance
- Commuter Benefits
- 401(k) Savings and Thrift Plan (if age 21)
- Employee Stock Purchase Plan (must be scheduled to work more than 20 hours a week and more than five months of the year)
- Auto/Home Discount Program
- Resources for Work and Life Program (includes EAP)
- Prorated vacation based on work schedule
- Gallagher Thrive Wellbeing Program

*Under the Affordable Care Act (ACA), employees are eligible for medical plan coverage if they work, on average, at least 30 hours per week on a regular basis.

For medical, dental and vision plans:

Adult children can be covered to age 26, regardless of student status, marital status, residence, or financial dependence on the employee or anyone else.

Dependents

For benefit purposes, your eligible dependents are defined below. Dependent children may be covered by the medical, dental and vision plans until age 26. For specific dependent eligibility information for each plan, see the Dependent Eligibility Chart for all plans on Gallagher One.

- Your legal spouse
- Your domestic partner as defined in the Gallagher Domestic Partner Policy
- Your children, including:
 - Your naturally born children.
 - Your legally adopted child. An adopted child is considered a dependent from the moment the child is placed in the custody of the adoptive parents.
 - A stepchild, foster child or any child for whom you have legal custody, who resides in your household in a regular parent-child relationship and is principally dependent on you for his/her support and maintenance, and is named as an exemption on your most recent federal income tax return (proof may be required).
- Children that you are legal guardians for.

Domestic Partners

An individual who meets the criteria for domestic partnership as outlined in Gallagher's Domestic Partner Policy can be considered a dependent for benefit coverage.

A domestic partnership consists of two people in a same-sex or opposite-sex relationship who:

- Live together and are committed to each other, like a married couple, without being married to each other.
- Submit a notarized Affidavit of Domestic Partnership that meets a set of criteria outlined in Gallagher's Domestic Partner Policy.

The full Domestic Partner Policy and the Affidavit of Domestic Partnership are available on Gallagher One under Benefits.



Making changes to your benefits

Benefit	When You Can Make Changes	Where to Make Changes
Medical Plan		
Dental Plan	Changes can be made during Annual Enrollment and within 31 days of qualified life events.	ajg.com/myHR
Vision Plan		
Health Savings Account	Employee contributions can be stopped or changed at any time. You must re-enroll each year during Annual Enrollment to continue pre-tax contributions via payroll deduction. Employer contributions continue while you are enrolled in an eligible medical plan.	ajg.com/myHR
Flexible Spending Accounts (FSAs)	Changes can be made during Annual Enrollment and within 31 days of qualified life events. You must re-enroll each year during Annual Enrollment to continue setting aside money on a pre-tax basis.	ajg.com/myHR
Legal Services Plan	Changes can only be made during Annual Enrollment.	ajg.com/myHR
Identity Protection	Changes can only be made during Annual Enrollment except in certain circumstances.	ajg.com/myHR
Commuter Benefits	Changes can be made during the plan's monthly enrollment cycles.	wageworks.com 877-924-3967
Auto/Home Insurance	Contact Liberty Mutual for information.	855-839-3656
Group Personal Excess Liability Insurance (GPEL)	Changes can be made yearly during Annual Enrollment.	ajg.com/myHR
Accident Insurance		
Critical Illness Insurance	Changes can be made during Annual Enrollment except in certain circumstances.	ajg.com/myHR
Hospital Indemnity Insurance		
Optional Term Life	Changes can be made at any time but you may be subject to medical underwriting.	800-778-4357
Voluntary Accidental Death & Dismemberment Insurance	Changes can be made yearly during Annual Enrollment and within 31 days of qualified life events.	
401(k) Savings and Thrift Plan	Changes can be made to your contribution amount or investments at any time.	empower.com/ajg 844-465-4455
Employee Stock Purchase Plan	Changes can be made during the enrollment period preceding the beginning of each calendar quarter (January, April, July, October) Contributions can be stopped at any time.	netbenefits.com 800-544-9354

Changing Your Benefits During the Year

Make your elections during your enrollment period carefully because some benefits can only be changed mid-year if you have a qualifying life event such as:

- Marriage
- Birth
- Divorce
- Child adoption or placement for adoption
- Death of a dependent
- Loss of dependent coverage
- Loss of other coverage
- Change in your employment status or that of your spouse
- Significant change in health coverage attributable to your employment or that of your spouse
- A qualified domestic relations order or similar court order
- Entitlement to Medicare or Medicaid

If you experience one of these events and want to change your benefits, you must make the change within 31 days after the event occurs. Changes cannot be made before the event occurs. If you miss the window for making a change, you will need to change your elections during the next Annual Enrollment period.

Benefits requiring a qualified life event to make a change:

- Medical
- Dental
- Vision
- Flexible Spending Accounts

Any benefits not listed above may have different rules around making changes outside of Annual Enrollment. For more information, refer to the individual plan information on Gallagher One.

To make an eligible change due to a qualifying life event:

Go to ajg.com/myHR and click Sign In



Everything you need in one place.

Turn to Gallagher One for HR Information

The Gallagher One Portal is the primary resource for company news and Human Resources information including benefits, office locations and employee directories. You must be on the Gallagher network to access Gallagher One.

Talk to ALEX

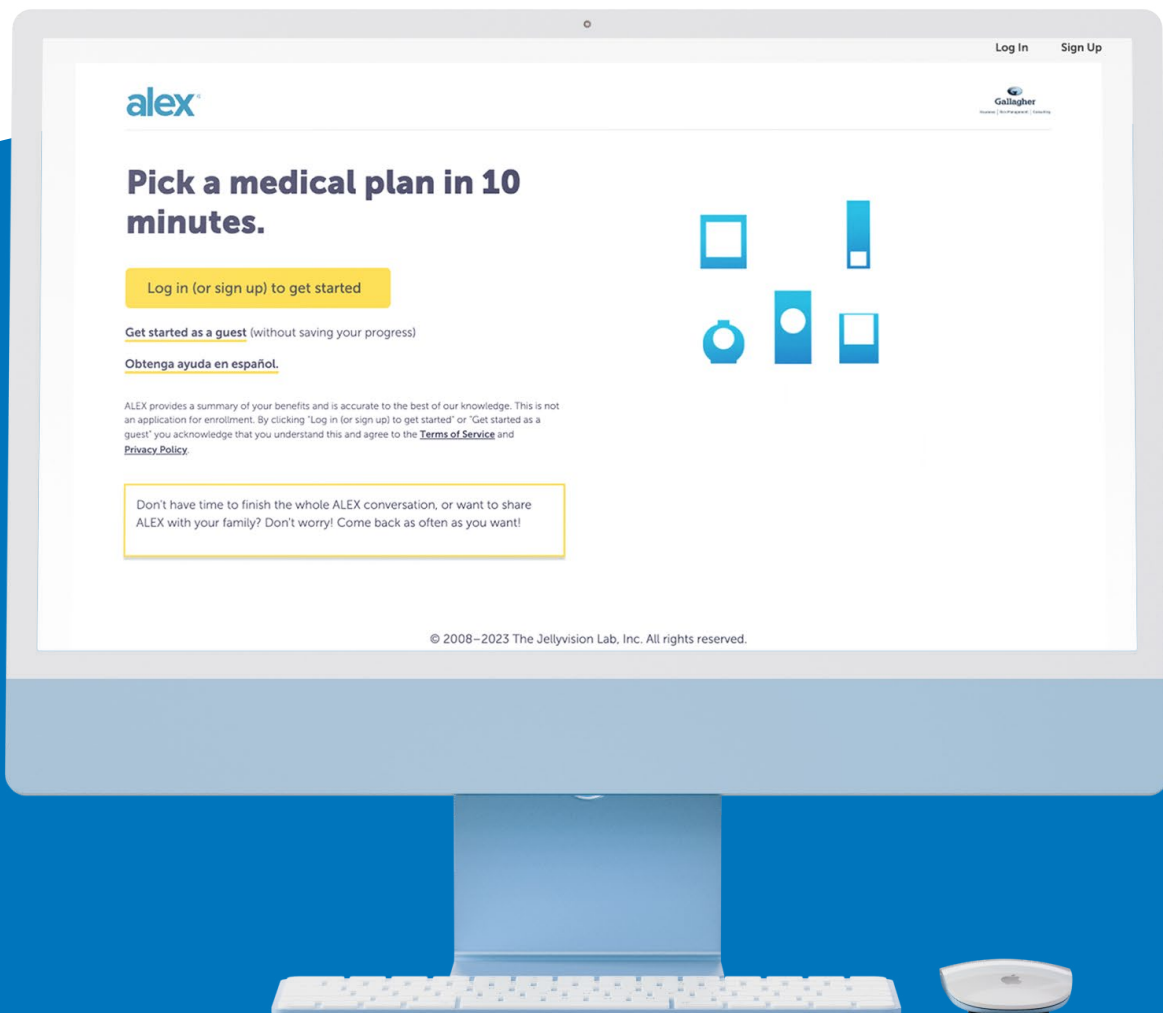
This easy-to-use online tool can help you decide which benefit options are right for you and how to use your benefits throughout the year. Learn more at: start.myalex.com/ajg

Connect with the Employee Resource Center

Get quick access to benefits information, wellbeing news, vendor contacts, employee discounts and more at c2mb.ajg.com/ajgco/home.

Check out our provider websites, too!

Go to the Resources section on **page 46** for a complete list of providers and their websites.



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Your **Health**



Medical Plan

Gallagher wants you and your loved ones to stay healthy and feel great. That's why we provide programs and resources to support you no matter your stage of life or individual health needs. There is something for everyone. We even offer great ways to save by using affordable, virtual care to get convenient access to quality doctors.

Gallagher offers three medical plan options — two PPO plans with a Health Savings Account (HSA) and a PPO plan with a Health Care Account (HCA). All three provide coverage through Blue Cross Blue Shield of Illinois (BCBSIL). Each option gives you freedom of choice, flexibility and access to a large provider network.

- The two PPO + HSA plans are bundled with a Health Savings Account to facilitate tax-free savings for medical expenses.
- The PPO + HCA plan option works similarly to the other options, with a few key differences. See how the plans compare on **page 12**.

Finding a provider

1. Call Blue Cross Blue Shield at **800.203.3765**
2. Access the internet directory
 - Visit **bcbsil.com/ajg**
 - Click “Doctors and Hospitals”
 - Select your area of residence under the Provider Finder section

If you do not see your state/location, click on “Members living in all other locations.” (California residents, enter the prefix “GMB” when prompted.)

Additionally, all newly hired or acquired employees are automatically eligible for a wellbeing credit, upon enrollment. The wellbeing credit reduces the cost to purchase Gallagher medical/Rx coverage per pay period. In order to maintain the wellbeing credit, employees are given the opportunity to meet the goals of the *Gallagher Thrive* wellbeing program on a quarterly basis.

Blue Cross Blue Shield of Illinois

bcbsil.com/ajg

800-203-3765

For your cost information, see **page 50**.



How the plan works

Preventive care

For all three plan options, when you receive preventive care from an in-network provider, the service is covered at 100% with a waived deductible.

Coinsurance

Once the deductible is met, coinsurance applies.

For **most in-network services**, you pay 20% and the plan pays 80%. For services received **out of the network**, you pay 40% and the plan pays 60%. You may also receive a bill for out-of-network charges over the amount paid by the plan. Once your out-of-pocket expenses reach the annual maximum, the plan will pay 100% of eligible, in-network expenses.

If You Cover Dependents

Before coinsurance begins to cover medical care...

For the PPO + HSA plans:

- Expenses of all covered family members (even just one) are combined to meet a family deductible. Individual deductibles don't factor in. Multiple family members also combine to meet a family out-of-pocket maximum.
- Once an individual meets the individual out-of-pocket maximum, his or her claims for eligible expenses will be paid by the plan at 100% for the remainder of the calendar year (in-network only).

For the PPO + HCA plans:

- Each covered individual must meet a per-person deductible. Once multiple family members together meet the family deductible, any family member can receive benefits. You meet the out-of-pocket maximum the same way you meet the deductible.

For details, see the If You Have Family Medical Coverage cost snapshot on **Gallagher One**.



Medical Plan Highlights

Most percentages shown are what you pay

	PPO + HSA 1		PPO + HSA 2		PPO + HCA	
	Network ¹	Out-of-Network ¹	Network ¹	Out-of-Network ¹	Network ¹	Out-of-Network ¹
Annual deductible²						
Individual	\$1,600	\$3,000	\$3,000	\$6,000	\$2,500	\$5,000
Family	\$3,200	\$6,000	\$6,000	\$12,000	\$5,000	\$10,000
Gallagher account contribution						
Individual		\$450		\$450		\$450
Family		\$900		\$900		\$900
Coinsurance (office visits, hospital care, urgent care, X-rays, lab tests, etc.)						
	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible
Annual out-of-pocket maximum (includes deductible)						
Individual	\$4,500	\$11,900	\$6,000	\$11,900	\$5,500	\$12,000
Family	\$8,000	\$23,800	\$12,000	\$23,800	\$11,000	\$24,000
You may be subject to balance billing by out-of-network providers even after the out-of-pocket maximum is met.						
Preventive care						
	You pay 0%	You pay 40% after deductible	You pay 0%	You pay 40% after deductible	You pay 0%	You pay 40% after deductible
Inpatient hospital services (pre-authorization required) ³						
	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible
Emergency room (emergency care only)						
		You pay 20% after deductible			You pay \$250 facility copay ⁴ (waived if admitted), 20% after deductible	
Therapy services (outpatient physical, occupational and speech)						
• 30-visit maximum per year	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible
• Excess visits require authorization for medical necessity						
Mental health and substance abuse treatment						
	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible	You pay 40% after deductible

1. The network deductible and out-of-pocket expenses offset the out-of-network deductible and out-of-pocket maximums and vice versa.
2. Under the PPO + HCA plan, you don't need to meet the deductible before prescription drug coverage applies. For the PPO + HSA plans, you pay out-of-pocket for prescription drugs until you meet your deductible.
3. Pre-authorization is required at least one business day before an elective admission and within two business days of an emergency or maternity admission. A \$500 penalty applies if not pre-certified for out-of-network facilities.
4. HCA funds cannot be used to pay for flat dollar copays (e.g., for emergency room, if not admitted, and Telemedicine).

Note: If you're considering an HSA and enrolled in an FSA, see Health Care FSA information in the Financial Wellbeing section of this booklet on **page 25**.

Confused about deductibles and out-of-pocket maximums?

Check out the If You Have Family Medical Coverage cost snapshot on Gallagher One to help you better understand how they work.



Prescription Drug Benefits

All of the plans offered to you by Gallagher include prescription drug coverage. Check out the Performance Drug List to find out if coverage for your prescriptions are provided by your health plan. Your cost for a prescription depends on the type of drug you receive and where you buy it (see the chart below). Prescriptions can be filled at any Prime Advantage network pharmacy, which includes many major chains (excluding CVS and Target) and independent pharmacies. For your convenience, you can use the mail-order service or retail pharmacies in the plan's Extended Supply Network to order long-term prescriptions. Your costs for prescription drugs apply toward your medical out-of-pocket maximum.

Prime Therapeutics

bcbsil.com/ajg

800-203-3765



Type of Drug	Pharmacy (30-Day Supply)	Mail-Order (90-Day Supply or 90-Day Retail)
Generic	You pay 20%, \$7 minimum	You pay 20%, \$14 minimum
Preferred List*	You pay 30%, \$20 minimum	You pay 30%, \$40 minimum
Non-Preferred List*	You pay 40%, \$40 minimum	You pay 40%, \$80 minimum
Outpatient Specialty Drugs	No coverage	You pay 20%

*If you request a brand-name drug when a generic in the same drug category is available (a generic equivalent), it will cost you more. You'll pay the cost difference between the generic and the brand drug, even if your doctor requests "dispense as written." Plus, you'll pay the higher coinsurance level that applies to brand-name prescriptions.

Notes

- With the PPO + HSA 1 and PPO + HSA 2 plans, you must satisfy your medical plan deductible before coverage applies.
- Certain drugs are subject to utilization management programs that may include prior authorization, step therapy or quantity limits, or may be excluded from coverage. Contact Prime Therapeutics to see if any of these programs affect you. Drugs falling under these programs may be subject to change.
- If you use a manufacturer's coupon to help reduce how much you pay for a specialty drug, the actual amount you pay, deductible or coinsurance minus the coupon will be applied to your annual out-of-pocket maximum.





How to Save Money on Your Prescriptions

Prescription drugs can be expensive, especially if you have one or more prescriptions for a long-term condition. There are several ways to save on prescription costs if you understand how the Gallagher prescription drug benefits work. Here are a few helpful hints.

- **Choose generics.** Generic drugs are the least expensive alternative. Ask your doctor if there is a generic option every time you are given a prescription. If a generic is not yet available, ask your doctor to prescribe a medication on the Prime Performance Drug list.
- **Get 90 days of medications by mail or at a retail pharmacy.** You can use mail order for all long-term medications through the Express Scripts mail-order program. Your prescription will be mailed directly to you. Order your prescription online or download a mail-order service benefit brochure and order form at bcbsil.com/ajg.
- **You can also obtain long-term medications at a 90-day retail pharmacy and receive cost savings.** Participating pharmacies can be found on the Blue Cross Blue Shield of Illinois website.
- **Use the pre-tax accounts to pay for your out-of-pocket prescription expenses with tax-free money.** You must enroll to take advantage of this benefit.

How to Find Out Whether Your Drug is Covered

1. Log in to bcbsil.com/ajg and go to “Learn more about your prescription drug benefits.”
2. Select “Performance Drug List.”
3. Search for the drug and dose your doctor has prescribed for you.
4. If your drug is not on the Performance Drug List, it is not covered under the Gallagher medical plan.

If You Use Specialty Drugs

If you use certain outpatient specialty drugs (those that require injection or special handling), you purchase them from Accredo. Accredo has pharmacists and nurses who are trained in specialty drugs and the conditions they are used to treat. In addition to clinical expertise, Accredo Specialty offers these services at no cost to you:

- Toll-free access to specially trained pharmacists 24 hours a day, 7 days a week
- Personalized counseling from a dedicated team of registered nurses and pharmacists
- Fast delivery of your medications
- Refill reminder calls
- Supplies such as syringes and needles

Specialty drugs administered on an inpatient basis are processed under the medical plan.

Why go generic?

Generic drugs are essentially the same as the brand-name drug in safety, strength, quality, performance and intended use. They also meet the same strict approval process by the Food and Drug Administration (FDA), but usually cost much less than brand names.

Blue Cross Blue Shield of Illinois Tools and Resources

Tool	When to Use	How to Access
Provider Finder	Find participating PPO doctors and estimate costs for services.	Call 800-203-3765 or go to bcbsil.com/ajg <i>Florida, Georgia, Oklahoma, Wisconsin, Kansas City, New York City, New Jersey, St. Louis, Maryland, District of Columbia and Northern Virginia area residents: Select your area of residence when searching for a provider.</i>
24/7 Nurseline	Ask a nurse medical questions and get advice on how to handle your health care situation.	Call 800-299-0274
Ovia Health	Provides maternity and family apps to support you through your entire parenthood journey. You get access to enhanced, personalized features such as symptom tracking, unlimited one-on-one coaching with a registered nurse and resources on being a working parent.	Download the Ovia app from the Google Play or Apple App Store. Choose “I have Ovia Health as a benefit” before tapping “Sign up” and select BCBSIL as your health plan
Blue Access for Members	For personal health and claims information.	Call 800-203-3765 or go to bcbsil.com/ajg
Member Rewards	Before you receive a procedure, MRI or CT scan, shop around with a Benefits Value Advisor. You may lower your out-of-pocket cost, as well as receive a Member Rewards cash payment for your efforts.	
Preadmission Review	Pre-authorization is required at least one business day before an elective admission and within two business days of an emergency or maternity admission. A \$500 penalty applies if not pre-certified for out-of-network facilities.	Call 800-203-3765




Health Care Support by Phone with Benefits Value Advisor

To help you get the most of your medical benefits with quality and cost-effective care, use the Benefits Value Advisor. It's a support tool from Blue Cross Blue Shield of Illinois designed to help you make smart choices — and save money. To reach a Benefits Value Advisor, call **800-203-3765** for help with health care services including:

- CAT or CT scans (call requirement)
- MRIs (call requirement)
- Endoscopy/colonoscopy procedures
- Bariatric surgery
- Orthopedic surgery (back/spinal, knee, shoulder, hip/joint replacement)
- And many more

Benefits Value Advisor

 **800-203-3765**



Benefits Value Advisor can also:

- Help you understand your benefits
- Estimate costs for services or procedures
- Schedule appointments
- Provide information on your condition or diagnosis
- Help you take advantage of Member Rewards incentives
- Assist with pre-authorization
- Tell you about online educational tools

Note: You must call a Benefits Value Advisor before you get an outpatient MRI or CT scan (non-emergency) or your benefits will be reduced by \$100.

Member Rewards

for Gallagher medical plan participants

Member Rewards works together with the Benefits Value Advisor to help you become an efficient shopper of health care services. Take the time to shop around before receiving a procedure — and get cash rewards for your efforts. Not only will you be rewarded for shopping, but you may lower your out-of-pocket expenses as well.

- Call the Benefits Value Advisor using the number on your ID card to compare costs and quality for a number of procedures.
- Select a lower-cost, quality provider from the selected in-network list.
- Earn cash rewards after your procedure is completed and verified.

Note: Participation in Member Rewards does not change the requirement to call a Benefits Value Advisor before getting an outpatient non-emergency MRI or CT scan (as explained above).

Digital Weight Management Program through Wondr Health

Lose weight and feel better with Wondr Health

Instead of making you count points, track calories or change your diet to kale smoothies, Wondr Health uses a science-based approach based on the eating patterns that people who don't struggle with their weight use naturally. During the initial 10 weeks of the program, you'll log in to your Wondr Health dashboard to learn tips like:

- Ways to enjoy your favorite foods without going overboard
- How to manage the differences between appetite and hunger
- How to keep thirst from hijacking your weight loss
- The reasons we eat, many have nothing to do with hunger
- How to stop eating around emotions like stress, anger and depression
- How to sleep better, become more physically active, reduce stress and more!

You, your spouse and your covered dependents over age 18 enrolled in the BCBSIL medical plan are eligible for Wondr Health at no cost!

How to join the program

Go to wonderhealth.com/ajg, set up your account and complete information about yourself. Wondr participants are accepted based on predetermined criteria such as health risk factors and participant willingness to meet the program completion requirements. And there are certain medical conditions that must be met. You will be notified via email if you're accepted into the program.

Wondr Health

wonderhealth.com/ajg



Virtual Physical Therapy with Hinge Health

Hinge Health is available to you and your dependents enrolled in a Gallagher medical plan at no cost. Hinge Health can help you with back, knee, hip, shoulder or neck pain through their online program.

Once enrolled, you'll receive the Hinge Health Welcome Kit, which includes a tablet computer and wearable motion sensors that guide you through exercise therapy. You'll also be paired with your personal health coach who will tailor your sessions to you, your schedule and your pace. Best of all, it only takes 45 minutes per week. To apply, contact Hinge Health.

Hinge Health

855-902-2777



Doctor On Demand (Telehealth)

With Doctor On Demand by Included Health you and your family members covered under a Gallagher medical plan will receive easy, stress-free access to board-certified medical doctors through live video visits on your smartphone, tablet or computer. Get prescriptions filled, keep your family in top shape and be prepared for the unexpected—all from the comfort of your own home.

Doctor on Demand

doctorondemand.com/ajg

support@doctorondemand.com

800-997-6196



Get Started

It's fast and easy to register:

1. Download the app from the Google Play or Apple App Store, or visit doctorondemand.com/ajg.
2. Add your insurance information to your account on the app.
3. When you're ready to see a doctor, simply click "See a Medical Doctor Now," type in the symptoms you're experiencing, and you'll be connected with a physician in your state within minutes.

Paying for Service

PPO + HSA plans:

- Pay \$52 for primary and urgent care subject to the deductible.
- After the deductible is met, members pay \$20.

PPO + HCA plan:

- Members pay \$20 copay (cannot use HCA funds).

All medical plans:

- Initial 15 min therapy visit for behavioral health is \$136.
- Behavioral health 50 minute visit: \$188

Top Issues Treated

Providers can diagnose, treat and even write prescriptions for nearly any non-emergency medical condition. The most common issues treated:

- Coughs, colds and sore throats
- Flu
- Pediatric issues
- Nausea and diarrhea
- Rashes and skin issues
- Women's health: UTIs, yeast infections
- Sports injuries
- Travel medicine
- Eye issues

Please note, Doctor On Demand providers are not intended to replace a primary care physician and do not treat chronic conditions (like diabetes) or medical emergencies (such as chest pain; severe burns; or head, neck or back injuries). In addition, Doctor On Demand providers are unable to provide medical certifications for disability claims, leaves of absence or work-related injuries.



Dental Plan

Oral health is an incredibly important part of your overall wellbeing. Gallagher offers two plans designed to keep you smiling. You can choose between the Standard or Enhanced Plan for your dental health care.

You pay a percentage of costs for the dental care you receive depending on whether your dentist is in a Delta Dental network (PPO or Premier) and the type of care you receive: Preventive, Basic, Major or Orthodontia.

No matter the plan, preventive care is covered 100% with no deductible if obtained in-network.

Stay in-network and save money

Your costs will typically be lower if you choose a dentist in the Delta Dental PPO or Premier network. Search for network providers at deltadentalil.com.

Delta Dental of Illinois

 deltadentalil.com

 **800-323-1743**

For cost information see [page 52](#).



Dental Plan Highlights

Percentages shown are what you pay

	Delta Dental PPO Network	Delta Dental Premier Network	Out-of-Network <i>Any other qualified dentist</i>
Standard Plan			
Preventive/diagnostic No deductible	0%	0%	20%
Annual deductible Applies to Basic and Major services only	\$50 per person	\$50 per person	\$75 per person
Basic	40%	40%	50%
Major	50%	50%	50%
Annual benefit maximum	\$1,500 per person	\$1,500 per person	\$1,500 per person
Enhanced Benefits Program	Additional coverage is provided for individuals who have specific health conditions (including pregnancy, diabetes, high-risk cardiac conditions and suppressed immune systems) that can be positively affected by additional oral health care.		N/A
Orthodontia			
• For children under age 19 when treatment begins	50%	50%	50%
• Separate deductible of \$50 applies			
• Lifetime maximum of \$2,000			



Dental Plan Highlights (cont.)

Percentages shown are what you pay

	Delta Dental PPO Network	Delta Dental Premier Network	Out-of-Network <i>Any other qualified dentist</i>
Enhanced Plan			
ToGo Program	You must be covered on the Enhanced Dental Plan for one full calendar year and have at least one dental service in that calendar year before ToGo funds are available.		N/A
Preventive/diagnostic No deductible	0%	0%	20%
Annual deductible Applies to Basic and Major services only	\$50 per person/ \$150 per family	\$50 per person/ \$150 per family	\$75 per person/ \$225 per family
Basic	20%	20%	50%
Major	20%	20%	50%
Annual benefit maximum ToGoSM allows you to carry over qualified unused portions to the next year	\$2,000 per person	\$2,000 per person	\$2,000 per person
Enhanced Benefits Program	Additional cleanings and/or applications of topical fluoride to participants with specific health conditions that put them at risk for oral health disease		N/A
Orthodontia			
• For adults and children	50%	50%	50%
• Separate deductible of \$50 applies			
• Lifetime maximum of \$2,000			

If you see a network dentist, you can simply show your Delta Dental ID card and they will take care of the paperwork for your visit. If your out-of-network dentist requires you to pay upfront for services, you will need to submit a claim form for reimbursement for covered amounts. Claim forms can be found at deltadentalil.com.




Vision Plan

The vision plan, through EyeMed, provides coverage for eye exams, and glasses or contacts. You pay just a \$10 copayment for a network eye exam.

You do not need an ID card to begin receiving network services after the effective date of your enrollment, but watch your mail for a welcome packet from EyeMed.

EyeMed

 eyemedvisioncare.com/locator
(under network, choose "Select")

Pre-Enrollment

866-299-1358

Post-Enrollment

eyemedvisioncare.com/ajg
866-723-0514

For cost information see **page 52**.





Vision Plan Coverage

Percentages shown are what you pay

	Network Member Cost	Out-of-Network Reimbursement
Network Information	EyeMed network includes some private practice practitioners and national chains such as Lenscrafters, Sears, Target, Pearle and JCPenney	For a provider not in the EyeMed network, the plan reimburses up to the amount shown below
Exam (covered once every 12 months)	\$10 copay	\$30
Eyeglass lenses	Choose eyeglasses OR contacts once every 12 months	
Single vision	Covered in full	\$25
Bifocal	Covered in full	\$40
Trifocal	Covered in full	\$55
Lenticular	Covered in full	\$55
Standard progressive	\$65	\$40
Premium progressive	\$65 - \$110 copay or 20% discount after \$120 allowance depending on tier	\$40
UV treatment	Covered in full	\$5
Tint	Covered in full	\$5
Standard plastic scratch	Covered in full	\$5
Standard polycarbonate	Covered in full (under age 19); \$40 (age 19 or older)	\$5
Standard anti-reflective coating	57 - \$68 copay or 20% discount depending on tier	NA
Other add-ons and services	20% off retail price	NA
Frames (covered once every 12 months)	\$170 allowance; 20% off balance over \$170	\$85
Contact lenses	Choose eyeglasses OR contacts once every 12 months	
Medically necessary	Covered in full	\$200
Elective: Conventional	\$170 allowance; 15% off balance over \$170	\$136
Elective: Disposable	\$170 allowance	\$136
Fitting and follow-up	Up to \$40; 10% off retail	NA




Your Money

Your Money

Gallagher gives you lots of tools to help manage your money better and make your dollars go further.

No matter your financial goals, we offer tools and programs to fit your needs.

Financial Wellness Program - Company-provided

 ajg.com/mymoneyguide



Expert Financial Advice at Your Fingertips

The My Money Guide program offers unlimited phone consultations with a team of financial coaches and digital tools to help you build a strong foundation and plan for your financial future.

Offered in partnership with Ayco financial counseling, My Money Guide is available to all regular full-time and part-time employees. Take the first step toward a healthier financial future today— get started at ajg.com/mymoneyguide.





Taking Advantage of your Health Savings Account (HSA)

If you're enrolled in either of the Gallagher PPO + HSA plans, you may want to consider using your HSA. It's a valuable account that can save you thousands of dollars on medical expenses now or be used during your retirement.

What is an HSA?

An HSA (Health Savings Account) is a tax-free account you can use to pay for current and future medical expenses. An HSA has **triple tax benefits**:

1. The money goes in tax-free.
2. The money grows tax-free.
3. Your withdrawals for qualified medical expenses — including any earnings — are tax-free.

How does it work?

When you enroll in either of the Gallagher PPO + HSA plans for the first time, your account will be opened automatically with HSA Bank, a national leader in administering HSAs.

Each time you have a qualified expense (care or services that you are allowed to pay for using your HSA), you decide whether to:

1. Pay out of your pocket and let your HSA grow, earning interest for future eligible expenses
2. Pay for certain expenses using a Health Care FSA and let your HSA grow. You can use the FSA to pay for dental and vision expenses until your deductible is met.
3. Use your HSA to pay for eligible medical expenses such as your annual deductible and coinsurance. Your HSA can also help pay for vision care, dental care and prescription drugs.

How much does Gallagher contribute?

Annual contributions from Gallagher are:

- \$450 if enrolled in employee only medical coverage
- \$900 if enrolled in family coverage (family includes one or more covered dependents)

These amounts are prorated for new hires during the year. The amount will be split equally among your 2024 pay periods and go directly into your HSA.

Your HSA is yours forever!

Even if you leave Gallagher, your HSA and the money in it is yours to keep.

Learn more about HSAs at:

- HSA Bank hsabank.com
- Blue Cross Blue Shield of Illinois bcbsil.com/ajg (use the Provider Finder to estimate costs for services)

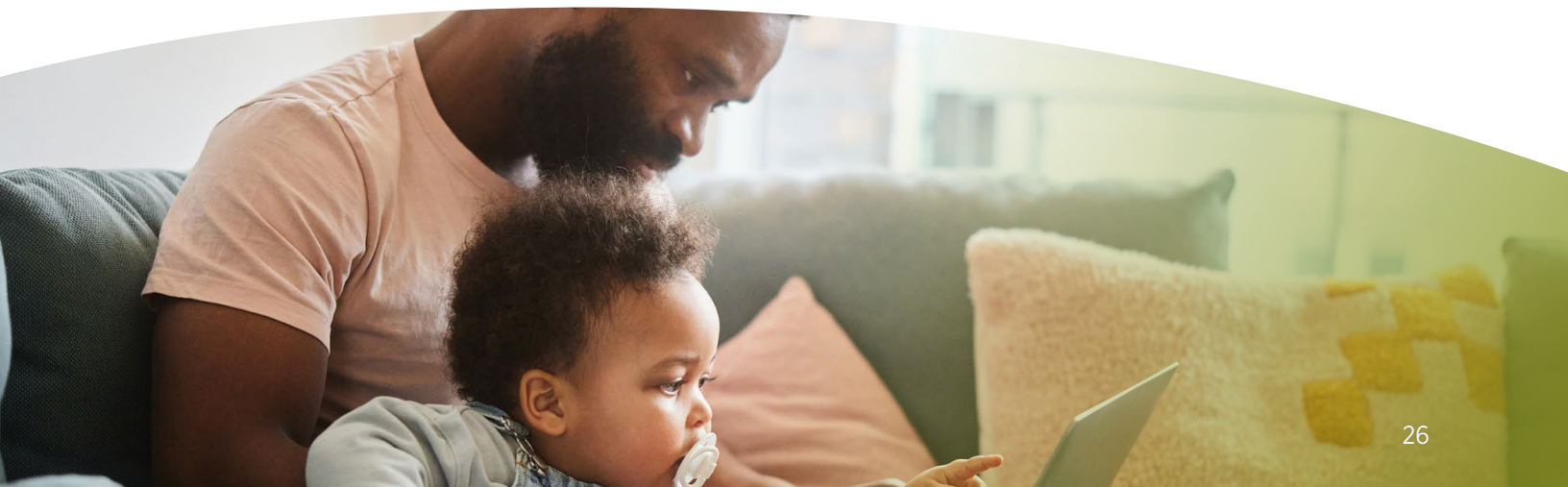
Important Note

If your adult child or domestic partner is not a tax dependent or legal spouse and is enrolled in either of the PPO + HSA plans, HSA funds used to reimburse expenses incurred by that individual may be taxable and incur a tax penalty.



How do the HSA and HCA Compare?

	HSA: Personal Bank Account	HCA: Blue Cross Blue Shield of Illinois Claims Administration Account
Who owns it?	You	Gallagher
Who controls it?	You choose when to use	Automatically used when claim is incurred
Who funds it?	Gallagher and you (optional)	Gallagher
How often is it funded?	Gallagher deposits money every pay period <ul style="list-style-type: none"> • Individual: \$17.31 (up to \$450 annually) • Family: \$36.62 (up to \$900 annually) 	One-time annual contribution in January: <ul style="list-style-type: none"> • Individual: \$450 annually • Family: \$900 annually Employees who enroll on or after 7/1/24 will receive 50% of the annual contribution upon enrollment
Funds available?	Upon deposit into account	January 1 or the effective date of your medical plan enrollment
Is it portable?	Yes, you own it	No, unless you elect COBRA
Annual employee contribution limit?	Limits take into account Gallagher contribution (enroll in myHR for your own contributions): <ul style="list-style-type: none"> • \$3,700 if enrolled in employee only medical coverage • \$7,400 if enrolled in family coverage (family includes one or more covered dependents) (Plus \$1,000 if age 55 or older)	NA; you cannot contribute and are automatically enrolled
What happens if you don't use it?	Unused balances carry over from year to year	Can roll over up to one times annual contribution
Does it earn interest?	Yes	No
FSA permitted?	Limited Health Care FSA only (See Flexible Spending Accounts section for additional information)	Yes
Debit card?	Yes	No






Flexible Spending Accounts (FSAs)

Looking for a way to save money on health care and/or dependent day care? Flexible Spending Accounts (FSAs) save you money by reducing the taxes you pay. Your FSA contributions are deducted from each paycheck before federal, FICA and, in most cases, state taxes are calculated. So in effect, you do not pay taxes on your eligible FSA expenses.

HealthEquity

 wageworks.com/myfsa

 877-924-3967



Here's How an FSA Works

- FSA contributions are taken from your paycheck on a pre-tax basis according to your annual elections.
- When you have an eligible health care or dependent day care expense, you can pay for it with tax-free money.
- The accounts are separate: you pay for health care expenses and dependent day care expenses with separate accounts.
- If you enroll in one of the PPO + HSA plans, your Health Care FSA is a limited-use FSA and can only be used for eligible dental and vision expenses. Once you've met your deductible, you can use your Health Care FSA for eligible medical expenses incurred after the deductible has been met.
- You have until December 31, 2024, to incur expenses for reimbursement and until April 15, 2025 to file claims for reimbursement.



FSA Payment and Reimbursement Options

- **Debit card:** With the HealthEquity debit card, you can pay at the point of purchase at pharmacies and many other authorized retailers and providers. If you are currently enrolled, save your card. Your new election amount will be added to your current card. If you are enrolling for the first time, a debit card will be sent to you automatically. Go to sig-is.org for a list of merchants who accept the card.
- **Direct payment to provider:** You can set up direct online payment to your provider, which can be extremely convenient and a real timesaver — especially with dependent day care.
- **You pay upfront, and then receive reimbursement:**
 - Direct deposit to your personal bank account on record in myHR.
 - Check mailed to you: Submit a reimbursement form and documentation for your expenses. Find claim forms at wageworks.com. After you log in, you'll find them under the Health Care and Dependent Care tabs.

Health Care FSA

While you contribute to your Health Care FSA each pay period, the full amount you elect for 2024 will be available for reimbursement starting January 1.

If you enroll in the PPO + HCA plan, the Health Care FSA allows you to use tax-free money to pay for your annual deductible, coinsurance, copays, prescription drugs, and other medical, vision and dental expenses not covered by your benefit plans.

If you enroll in one of the PPO + HSA plans, you can only use your FSA for dental and vision expenses. In this case, you'll have a Limited Use FSA. Once you've met your medical plan deductible, you can use your FSA for medical expenses incurred after the deductible is met.

The FSA plan year runs from January 1, 2024, to December 31, 2024. Eligible medical expenses must be incurred between that period of time. You have until April 15, 2025, to file a claim for reimbursement. If you don't use all of the funds in your account, you can roll over a limited amount of unused funds to the next plan year, which is determined by the IRS.

Always save your FSA receipts and documentation

If you use your debit card and the expense is not clearly identified as an eligible expense, HealthEquity may ask you to substantiate your claim with additional documentation such as an Explanation of Benefits or receipt. You may also need this documentation in the future for IRS purposes.

What are eligible expenses?

Contact HealthEquity for more information on payment options and find a list of eligible (and ineligible) expenses and worksheets at wageworks.com/myfsa



Amit saves hundreds per year with his FSA.

Each year, Amit ends up paying about \$2,800 out of his pocket for health care for his family. By contributing \$1,800 to a Health Care FSA, he saves about \$540 a year.



Not sure how much to contribute?

Try the calculators at wageworks.com/myfsa.

Dependent Day Care FSA

This account helps you pay for eligible child care or adult day care with tax-free dollars. Reimbursable expenses may include day care and even elder care in or out of your home. The Dependent Day Care FSA is funded each pay period. Only the amounts that have been deducted from your paycheck will be available for reimbursement.




401(k) Savings and Thrift Plan

Let's face it, saving is not always easy with today's demands on your money. But the Gallagher Employees' 401(k) Savings and Thrift plan offers a convenient way to get into the savings routine and save for one of the most important goals of your life — retirement.

Empower

 empower.com/ajg

 **844-465-4455**



Why use the plan?

- Automatic payroll deductions help you set aside money for your future.
- Your pre-tax contributions go into your 401(k) account before taxes are taken out, so more of your money is working for you from now until retirement.
- You can also make after-tax contributions to the plan's Roth account.
- Discretionary match provision can offer company matching contributions on up to 5% of eligible pay each year.
- Five-year vesting schedule (20% per year) to earn full ownership of all company matching contributions in your account.
- One-year wait period for company match eligibility.
- The plan offers solid investment choices geared to meet the needs of retirement investors, including Vanguard Target Funds that simplify investing. You choose one diversified fund that is geared toward your retirement date.
- You'll need more than just Social Security when you retire, so it's best to start saving as soon as you can.



401(k) Savings and Thrift Plan (cont.)

Discretionary Match

To make it even more appealing to start saving, after one year of service, the company has a discretionary match that may give you extra money for retirement if you contribute to the plan. The first 5% of your earnings are matched 100%, based on your contribution percentage. So if you contribute 5% of your earnings, the company may contribute an additional 5% of your earnings on an annual basis.

You always maintain ownership of your contributions, plus any earnings on them. A vesting schedule applies to

the match contributions and earnings on the match. This schedule determines the percentage of your company match account you own if you leave the company.

As you can see in the chart below, when you have five years of service with the company, you own 100% of the match and earnings on the match. This applies regardless of when you start contributing to the plan and how long the match contributions are in your account. After five years, it's all yours.

Years of Service	Vested Percentage
Begins on your date of hire	Percentage of match and match earnings you own
1	20%
2	40%
3	60%
4	80%
5 or more	100%

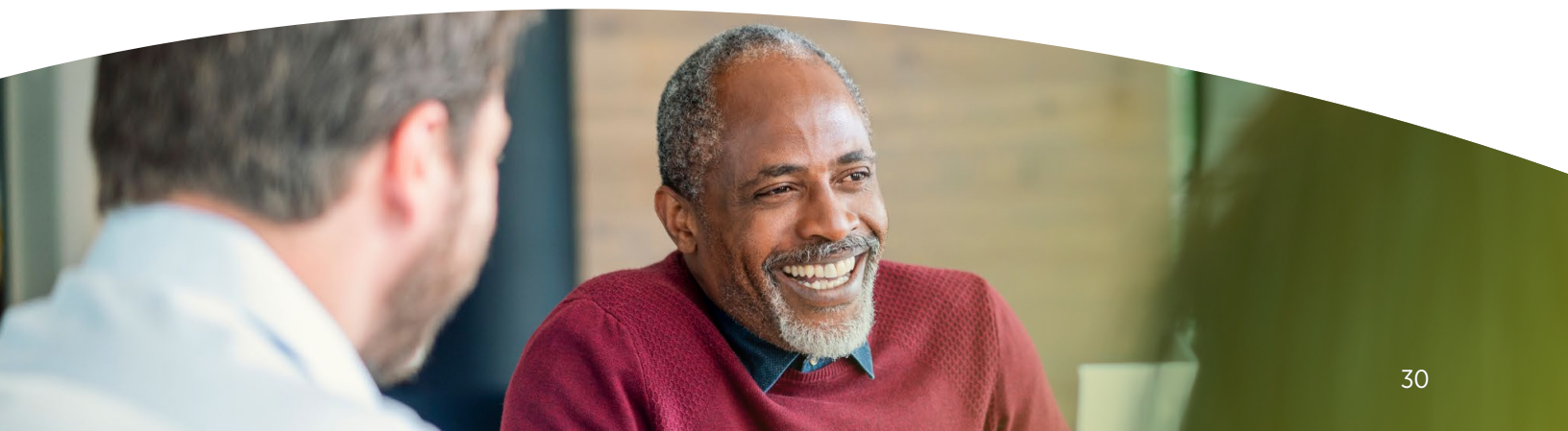
Eligibility

If you are a full-time or regularly scheduled part-time employee over age 21, you are eligible to participate in the 401(k) Savings and Thrift plan on your date of hire.

During your first year of eligibility, the matching contribution (if available) is based on your earnings from your eligibility date through the end of the plan year.

How to Enroll

Newly hired employees will receive a packet from Empower and an email notification from Gallagher when they are able to enroll. After you receive that notification, you can enroll in the plan at any time on the Empower website.





Automatic enrollment in your 401(k)

If you are not contributing to the 401(k) plan after 90 days of employment, or if you are contributing less than 5%, you will be automatically enrolled at 5% of eligible earnings so you can take full advantage of the company match. You will have the opportunity to increase or decrease your contributions before the effective date of the automatic enrollment. Until you make an investment selection, all of your contributions will be invested in one of the Target Date Funds based on your age.

Newly hired/acquired Regular Full-Time and Regular Part-Time employees, who have attained age 21, will have 90 days to make an election in the 401(k) Plan. If you do not make a deferral election within the 90-day window, you will be auto-enrolled at 5%.

Tools you can use

Go to empower.com/ajg for a variety of tools and resources to help you plan for your financial future:

- Retirement calculators
- Investor profile quiz
- Custom portfolios
- Impact of loans and withdrawals

Estimated Cost of Waiting 10 Years to Start Investing:

\$248,713







Employee Stock Purchase Plan

The Employee Stock Purchase Plan (ESPP) allows you to purchase shares of Gallagher stock for less than it would cost on the open market. Gallagher stock trades on the New York Stock Exchange (NYSE). The ticker symbol is AJG. You can become an owner of the company simply by enrolling. You are eligible to participate if you are scheduled to work more than 20 hours a week for more than five months of the year. You can enroll for the next calendar quarter (starting dates January 1, April 1, July 1 and October 1) after your date of hire.

Fidelity

 netbenefits.com

 800-544-9354



How to Enroll

When you become eligible, you will receive enrollment information about the plan from Fidelity, the administrator of our ESPP. This information will explain the online and telephone enrollment process. Your enrollment must be submitted during the enrollment period preceding the beginning of a the quarter. For example, to enroll in the plan for the payroll deduction period that begins in July, your enrollment must be received between June 15 and June 30.

Once you are enrolled, you will remain enrolled at the same contribution rate for each quarterly payroll deduction period, unless you change or stop your deductions. When you enroll in the plan, you decide the amount you want to invest per pay period — from 1% to 15% of your pay, up to a maximum of \$25,000 worth of stock per calendar year. Your ESPP contributions are then deducted from your paycheck on an after-tax basis.

At the end of each calendar quarter, your accumulated contributions will be used to purchase Gallagher stock at a 5% discount off of the current fair market value. For purposes of this plan, fair market value is defined as the lesser of the closing price on the first day or last day of each calendar quarter. You pay no fees for the purchase.

All shares purchased on your behalf are deposited in an individual brokerage account that you own, where they stay until you withdraw or sell them. You can view your account information online at netbenefits.com or call 800-544-9354 for more information. If Gallagher's stock price increases, so will the value of your investment. Overall, a stock investment program can help you benefit from the success of the company. Please keep in mind, however, that stock prices can decrease as well as increase, and it can be risky to have too much of your savings invested in any individual company stock.

Benefits of the Employee Stock Purchase Plan



Convenience

All you need to do is decide how much to invest out of every paycheck, within plan guidelines, and that amount is automatically deducted from your paycheck.



Flexibility

You can change the amount you invest each enrollment period or stop participating at any time. Once stock has been purchased for you, it is yours to hold, sell or transfer.



Cost-Effectiveness

The ESPP gives you the opportunity to invest in Gallagher stock with no brokerage account fee or purchase fee.



Commuter Benefits

The Gallagher commuter benefit program helps you reduce the cost of your daily commute by paying for these expenses with pre-tax money up to IRS limits. By enrolling in the program, you could save up to 35% on your costs. Depending on your tax rate, you could realize savings equal to three free months of transit or parking in one year just by participating in this convenient plan.

Eligible commuting expenses include:

- Mass transit: buses, trains, subways, vanpools, ferries
- Parking: lots, garages, parking facilities near your main work location or transit station.
- Elections are made on a monthly basis. To participate for the following month, your elections need to be made by the 10th of the month.

• For mass transit, you can:

- Order the specific pass, vouchers or tickets for your transit system. You may set up a recurring order or go online by the 10th of each month to make your election for the following month, or
- Use a HealthEquity commuter debit card to purchase tickets from a vending machine or ticket window.


• For parking-related expenses, you can:

- Set up direct payment to your parking facility
- Use a HealthEquity parking card (works like a debit card); or
- Pay upfront and submit your expenses for reimbursement from your account.

Based on your elections, pre-tax deductions will automatically be taken from your paycheck. For the mass transit and parking benefits, the entire deduction will be taken from the second paycheck of the month in which you enroll.

HealthEquity

 [wageworks.com](https://www.wageworks.com)

 877-924-3967





Your **Life**



Your Life

Achieving work/life balance is about living a healthier life. To help you on your journey, we provide leave benefits, PTO, and programs to help you with all of life’s ups and downs.

Educational Assistance Reimbursement

Gallagher strongly encourages employees to pursue additional education and professional designations. Approved job-related courses are reimbursed at 100%. A certificate of completion may be requested to confirm participation in the course. Bonuses are paid for earning professional designations. For more information, go to Gallagher One and review the Educational Assistance and Bonus Awards Policy.

Vacation

Relax and refresh with your well-earned vacation days. For the first calendar year of your employment, vacation days start to accrue at a rate of 0.833 days per month after your 90-day new hire/introductory period. After the first calendar year and completion of the introductory period, the rate of accrual is based on your years of service as of December 31 of the current year, according to the chart below. We encourage you to take the vacation you’ve earned each year.

Length of service as of December 31 of the current year	Vacation days earned per month	Annual vacation earned
First calendar year	After 90 days, 0.833 days per month	
1 - 4 years	0.833	10 days
5 - 14 years	1.25	15 days
15 years or more	1.667	20 days



“We **support** one another, we **believe** in one another, we **acknowledge and respect** the ability of one another”
 –The Gallagher Way



Holidays

Each December, a holiday schedule will be issued for the upcoming year. Based on the day of the week that designated holidays fall on, additional optional days may be available to you. This allows you to observe other religious or ethnic holidays, or any other day of your choice that has not been included in our holiday schedule.

For 2024, one optional day will be granted. This must be scheduled in advance with approval from your manager. One optional day is accrued after six full months have been worked. Refer to the complete vacation/holiday policy on Gallagher One.

For regular employees who work less than five days per week and/or less than a full-time schedule, the optional day will be prorated based on the number of hours worked per week.

Attendance Policy

Gallagher has established guidelines to assist employees who have occasional unscheduled absences. The guidelines address notification procedures, performance expectations and pay during absences. Please see the HR Manual on Gallagher One to become familiar with our attendance policy and your rights under the Family and Medical Leave Act (FMLA).

Paid Parental Leave (PPL)

All new parents can and should take company-provided leave to care for themselves and their children, however their families grow. Gallagher is pleased to offer Paid Parental Leave to all full-time employees who have at least 90 days continuous full-time service. Eligible employees may take up to four (4) weeks of Paid Parental Leave per birth, adoption, or foster placement that takes place on their eligibility date.

Visit the Paid Parental Leave policy (PPL) on Gallagher One for additional details around eligibility and benefits.

2024 Holiday Schedule

New Year's Day	Mon, Jan 1
Martin Luther King, Jr. Day	Mon, Jan 15
President's Day	Mon, Feb 19
Memorial Day	Mon, May 27
Juneteenth	Wed, June 19
Independence Day	Thurs, July 4 Fri, July 5
Labor Day	Mon, Sep 2
Thanksgiving	Thurs, Nov 28 Fri, Nov 29
Christmas	Wed, Dec 25

Charitable Gift Matching Program

The mission of the Gallagher Foundation is to give back to the communities we thrive in, and to share both our corporate and individual success with others. To help each employee be a part of this larger goal, the Gallagher Foundation offers a 100% match of your contributions to eligible not-for-profit charities. There is a minimum match donation requirement of \$50 per charity up to a combined maximum match of \$1,000 per employee per year.

Through the generous matching contributions of the foundation, you can give twice as much to the causes that are important to you. Don't miss out on this unique opportunity to "pay it forward" to the charity of your choice.



Resources for Work and Life Program

Including Employee Assistance Program (EAP) through ComPsych

The Resources for Work and Life program is a no-cost, confidential assistance program to help address any personal issues you and your dependents are facing. This service, staffed by experienced clinicians, is available by phone 24 hours a day, seven days a week. A ComPsych Guidance Consultant will refer you to a local counselor or to resources in your community.

This program is a confidential counseling assessment and referral service for employees and their immediate family members. Your personal information will not be shared with Gallagher.

Call anytime with personal concerns, including:

- Relationships
- Job pressures
- Problems with your children
- Marital conflicts
- Substance abuse
- Grief and loss
- Stress, anxiety or depression

The Resources for Work and Life program can also help with:

- Legal resources: Attorneys are available to provide confidential support with practical, understandable information and assistance.
- Financial resources: Financial professionals are available to discuss your concerns and provide tools and information you need to address your finances.
- Referral resources: Whether you are a new parent, a caregiver for an elder, sending a child off to college, or in one of many other key life situations, you're bound to have questions or need resource referrals. Resources for Work and Life specialists will help you sort out the issues and provide information based on your specific criteria.


Receive up to 10 Free Counseling Sessions

The Resources for Work and Life program provides up to 10 free telephone or in-person counseling sessions for each personal issue that you or any family member experiences. Just call **866-922-5679** for assistance or to set up counseling appointments.


Mental Care Anywhere with Talkspace

Separate from our EAP, Talkspace offers secure and confidential online mental health treatment through phone, video and text features to eligible employees and spouses/domestic partners. Services include one free video visit with a licensed therapist each month.

ComPsych - Company-provided

 [guidanceresources.com](https://www.guidanceresources.com)

(Plan ID: AJG123)

 **866-922-5679**



Talkspace - Company-provided

 [talkspace.com](https://www.talkspace.com)



Service Award Program

Gallagher's Service Award Program is designed to recognize the achievements, dedication and loyalty that employees with long years of service demonstrate.

We award employees who reach anniversary milestones: 1, 3, 5, 10 and every 5 years of service thereafter.

If you reach one of these milestones, you can choose a reward from a brochure, which includes awards ranging from jewelry to accessories for your home or desk. If you have questions about this program, contact the HR Support Team at HRSupport@ajg.com.





Your **Protection**



Your Protection

We help you and your family prepare for the unexpected. From identity theft to disability, we offer company paid and voluntary benefits that will make sure you are financially protected and have peace of mind.


Identity Protection

Data breaches and security threats are all too real. Anyone can face unexpected threats in their digital life. This benefit helps protect against identity theft by monitoring your credit reports and online activity from financial transactions to what you share on social media. It's about protecting the trail of data you leave behind and providing ongoing monitoring to catch fraud at the earliest stage.

In the event of a data breach or identity theft, Allstate Insurance has a dedicated team that will work with you to correct a breach on your behalf. This coverage includes a \$1 million insurance policy that covers fraud-related losses such as stolen bank or 401(k) account funds or fraudulent tax returns. The Family Plan provides coverage for spouses/domestic partners, kids and teens who live with you and depend on you financially. Go to the Identity Protection section of Gallagher One for additional information.

Allstate Identity Protection

 allstateidentityprotection.com

 800-789-2720

For your cost information see page 54.





Life and Accident Insurance

Part of planning for the financial health of your family is to make sure they are taken care of, especially in the event of a death or accident. To help you protect your family, Gallagher offers company-paid Life and Accident Insurance that is fully paid for by the company. You can choose to purchase additional Voluntary Life Insurance for yourself, coverage for your spouse and dependents, and personal accident insurance. For all company-paid and voluntary coverage, dependent children of regular full-time employees are eligible up to age 26.

Gallagher Corporate Benefits (via HR Support)

📞 630-285-3888

✉️ HRSupport@ajg.com



Company-Paid Coverage

Company-Provided Life and AD&D Insurance

Gallagher automatically provides company-provided Life Insurance for you equal to 1 1/2 times your annual earnings, up to \$1 million. Benefits are defined and paid according to plan provisions including, but not limited to, earnings definitions and age based reductions when you are age 70 or older. You also receive Accidental Death and Dismemberment (AD&D) coverage equal to an additional 1 1/2 times your annual earnings, up to \$1 million. This coverage is payable in full or in part in the event of accidental loss of life or limb.

Company-Provided Dependent Life Insurance

Gallagher provides Dependent Life Insurance equal to:

- \$5,000 for your spouse or eligible domestic partner, and/or:
- \$2,500 for each eligible dependent child birth to age 26.

Imputed income

Imputed income is the IRS term for the value of any benefit or service that should be considered income for the purposes of calculating federal taxes. Under current IRS provisions, imputed income applies to the value of employer-provided life insurance coverage greater than \$50,000. If this applies to you, you will see a line item on your paycheck called W2GRP.

Company-Provided Business Travel Accident Insurance

The Business Travel Accident Insurance plan provides another level of financial protection for you when you travel on business for the company. The plan provides a benefit in the event of an accident while you are traveling on business — coverage includes both domestic and overseas travel. The amount of the benefit is five times your earnings — with a minimum of \$250,000 and a maximum of \$1 million.

The coverage also includes Identity Theft Travel Assistance for business travelers whose identity may have been compromised as a result of lost or stolen documents while on a business trip.

You can't take it with you... so make sure it goes to the right people

Check your life insurance beneficiary designations regularly to make sure they are still in line with your wishes. After your core enrollment on myHR, you will be linked to the Prudential site to verify and/or make changes to your beneficiary designations. Be sure to do the same for your 401(k) account at empower.com/ajg and your HSA if you are in a PPO + HSA plan through HSA Bank.

Employee-Paid Coverage Options

Voluntary Accidental Death & Dismemberment Insurance

In addition to the AD&D Insurance provided by Gallagher, you can purchase more AD&D Insurance coverage to meet your personal needs:

- Coverage is available in units of \$10,000, up to \$1 million. Age based reductions apply.
- Dependent coverage:
 - Spouse or eligible domestic partner: 60% of your coverage amount up to \$600,000
 - Children: 20% of your coverage amount up to \$70,000

For your cost information on both coverage options, see **page 53**.

Optional Term Life Insurance

Gallagher is offering a new product with Prudential which will replace the current Group Universal Life Insurance (GUL) option. There is a guaranteed issue opportunity available during Annual Enrollment, which means you can elect any amount of coverage desired up to the guaranteed issue limit without answering any medical questions.

Employees can elect coverage in amounts 1 to 8 times annual earnings to a maximum of \$2.5 million. Employees can enroll for coverage up to the guaranteed issue amount of the lesser of 3x salary or \$600,00 without providing proof of good health.

An employee's spouse can elect coverage in \$10k increments up to a maximum of \$250,000, not to exceed 100% of the employee's optional life amount. Spouses can enroll for coverage up to the guaranteed issue amount of \$30,000 without providing proof of good health.

Dependent Child(ren) from birth to age 26 have a choice of \$5k or \$10k, not to exceed 100% of the employee's optional life amount.






Auto/Home Insurance Discount Program

This employee discount program offers a variety of vehicle insurance and personal property/casualty coverage for homes, condominiums, apartments and landlord dwellings. Contact Liberty Mutual for competitive rate quotes. Deductions will be taken through after-tax payroll deduction.

Please note: The group discount offered through this program is separate from any other personal lines programs and employees are not eligible to earn commission for placing coverage through this program.

Liberty Mutual

 libertymutual.com/ajg

 855-839-3656



Did you know?

Gallagher offers discounts on:

- Pet insurance
- Car rental
- Computer and electronic consumer items


Go to the **Procurement/Sourcing** page on **Gallagher One** for more information.

Group Personal Excess Liability Insurance (GPEL)

You can choose to purchase personal excess liability insurance at group rates on an annual basis. An excess liability policy covers damages for which you or members of your household may be legally responsible after other policy limits are exhausted. The plan is administered by Gallagher Risk Management Services, Inc. and insured by the Chubb Insurance Company.

Go to the Group Personal Excess Liability (GPEL) section of Gallagher One for additional information.

Gallagher Risk Management

 ajgpexl@ajg.com



Accident Insurance

Accidents happen, and they can be expensive, even with medical coverage — especially if you're hospitalized or suffer a large or permanent loss. Accident Insurance can help by paying cash benefits directly to you. You're free to use the benefit as you see fit. The benefit amount varies depending on the nature of the accidental injury and your treatment.

You can purchase coverage for you, your spouse or domestic partner, and children. Go to the Accident Insurance section of Gallagher One for additional information.

Accident Insurance is different than Accidental Death & Dismemberment Insurance (AD&D) found on **page 41**. Accident Insurance provides you and your family members with cash benefits for hospitalization and other medical services that you incur as a result of an accidental off-the-job injury. Accidental Death & Dismemberment Insurance provides a lump-sum payment if you die or are dismembered as the result of an accident.

For all your Allstate Benefits

allstatebenefits.com/mybenefits

855-839-3656

For your cost information see **page 53**.



Critical Illness Insurance

Critical Illness Insurance helps provide financial relief from the expenses associated with a serious illness, such as a heart attack, stroke or cancer. Critical Illness benefits are paid as a lump-sum cash benefit when you or a covered family member is diagnosed with a covered illness to give you a financial cushion to help you manage your illness, your way.

Go to the Critical Illness Insurance section of Gallagher One for additional information.

Covered illnesses include:

- Invasive cancer
- Major organ transplant
- Renal failure
- Paralysis of two or more limbs
- Blindness
- ALS (Lou Gehrig's disease)
- Major stroke
- Heart attack
- Carcinoma in situ
- Coronary artery bypass surgery

Hospital Indemnity Insurance

A hospital stay can be financially difficult, especially if money is tight and you're not prepared. Hospital Indemnity coverage will pay you in the event you or a covered family member needs to stay in the hospital. Allstate Benefits pays these benefits directly to you and you can use them however you wish — for medical bills, rent or mortgage, living expenses, etc.

You can purchase coverage for you, your spouse or domestic partner, and children. Go to the Hospital Indemnity Insurance section of Gallagher One for additional information.



Company-Provided Disability Programs

Gallagher’s Company-Provided Short- and Long-Term Disability coverage provides income replacement if you become disabled and cannot work. Disability benefits are made available by Gallagher at no cost to employees. After seven consecutive days of absence, you will receive income replacement benefits for the length of time you are disabled as determined by medical documentation. A doctor’s written certification notice is required to return to work for absences of seven or more scheduled work days due to illness or injury.

Hartford Insurance Group

 abilityadvantage.thehartford.com

 **888-877-0751**



Company-Provided Short-Term Disability Program

If you become disabled after you have 3 consecutive months of full-time service you can receive up to 25 weeks of full and/or half salary based on your length of service. The chart below shows the maximum number of weeks you may be paid. Benefits begin after a seven-day waiting period. Disability benefits are reduced by other income such as state disability.

Length of Service	Weeks of 100% Disability Benefit	Weeks of 50% Disability Benefit
0 to less than 3 months	0	0
3 months to less than 1 year	0	25
1 to less than 2 years	2	23
2 to less than 3 years	4	21
3 to less than 4 years	7	18
4 to less than 5 years	11	14
5 or more years	13	12

Company-Provided Long-Term Disability Insurance

If you are still disabled after six months, you may become eligible for long-term disability benefits. Long-term disability benefits begin after 180 days of disability and continue until you recover or reach age 65*, whichever occurs first. You can receive up to 60% of your salary or \$15,000 a month, whichever is less. Benefits are reduced by other income, such as Social Security payments. The Long-Term Disability plan is insured through Hartford Insurance Group and the insurance policy controls benefit eligibility.

Imputed income

Imputed income applies to the value of the company-paid long-term disability premium and will be shown as a taxable amount on your paycheck. By doing this, the value of your long-term disability benefit, if received, is greatly increased because you will not have to pay income tax on it.

*If you are disabled at age 63 or later, you may be eligible to receive long-term disability (LTD) benefits for a period of time. Please see plan documents for more information.



Resources and Contacts

The quickest way to find answers to your benefit questions is to go directly to the source. This resource list includes web addresses and phone numbers for the administrators of each of our benefit plans. Also included are the Gallagher plan numbers, which the administrators may request when you call. Having this information available will enhance the level of customer service vendors provide to you.

Click on the **boldface** websites to go to provider websites.

Find even more information about your benefits by using these on Gallagher One.

Benefit	Provider	Website/Email	Phone #	Plan #
Medical Plan	Blue Cross Blue Shield of Illinois	bcbsil.com/ajg	800-203-3765	See your ID card
Prescription Drugs	Prime Therapeutics	bcbsil.com/ajg	800-203-3765 Specialty 877-627-6337	
Nurseline	Blue Cross Blue Shield of Illinois		800-299-0274	
Telehealth	Doctor On Demand by Included Health	doctorondemand.com/ajg	800-997-6196	
Dental Plan	Delta Dental of Illinois	deltadentalil.com	800-323-1743	20211
Vision Plan	EyeMed	eyedoclocator.eyemedvisioncare.com/member (under network, choose "Select") eyemedvisioncare.com/ajg (post-enrollment)	866-299-1358 (pre-enrollment) 866-723-0514 (post-enrollment)	9736612



Resources and Contacts (cont.)

Benefit	Provider	Website/Email	Phone #	Plan #
Resources for Work Life and EAP Program	ComPsych	guidanceresources.com	866-922-5679	AJG123
Company-Provided Mental Health Therapy Program	Talkspace	talkspace.com		
Health Savings Account	HSA Bank	hsabank.com	800-357-6246	
Flexible Spending Plan	HealthEquity	wageworks.com	877-924-3967	
401(k) Savings and Thrift Plan	Empower	empower.com/ajg	844-465-4455	
Employee Stock Purchase Plan	Fidelity	netbenefits.com	800-544-9354	
Commuter Benefits	HealthEquity	wageworks.com	877-924-3967	
Family Medical Leave (FMLA)	Hartford Insurance Group	abilityadvantage.thehartford.com	888-877-0751	
Paid Parental Leave				
Identity Protection Program	Allstate Identity Protection	allstate.com	800-789-2720	
Optional Term Life	Prudential		800-778-4357	
Voluntary Accidental Death & Dismemberment				
Auto/Home Insurance Discount Program	Liberty Mutual	libertymutual.com/ajg	855-839-3656	115924
Group Personal Excess Liability Insurance	Chubb	ajgpexl@ajg.com	914-697-6108	
Legal Services Plan	MetLife Legal Plans	legalplans.com	800-821-6400	
Accident Insurance	Allstate Benefits	allstatebenefits.com/mybenefits		
Critical Illness Insurance				
Hospital Indemnity Insurance				
Company-Provided Disability Plans	Hartford Insurance Group	abilityadvantage.thehartford.com	888-877-0751	
Benefits Value Advisor/Member Rewards	Blue Cross Blue Shield of Illinois	bcbsil.com/ajg	800-203-3765	
Gallagher Thrive Wellbeing Program	Virgin Pulse	GallagherThrive.com		



Definitions

Automatic enrollment

Commonly used in 401(k) plans, including the Gallagher Employees' 401(k) Savings and Thrift plan, to encourage participants to save for retirement. In the Gallagher plan, if you are not contributing to the 401(k) plan on your one-year anniversary of employment, or if you are contributing less than 5%, you will be automatically enrolled at 5% of eligible earnings to help jump-start your savings for retirement. You can still change your election to increase or decrease your contributions at any time.

Beneficiary

The person or persons you name to receive benefits in the event of your death. You can change your beneficiary designations at any time.

Primary beneficiary

The entire death benefit will be paid in equal shares to the primary beneficiary or beneficiaries who survive you.

Contingent beneficiary

If no primary beneficiary survives you, the entire death benefit will be paid to the contingent beneficiaries. A contingent beneficiary will only receive a benefit if ALL primary beneficiaries predecease the participant.

Coinsurance

The percentage of a covered expense that you must pay after you meet your deductible, but before you reach the annual out-of-pocket maximum. The remaining percentage is paid by the health plan.

Copayment

The per-service fee you pay each time you use a telehealth provider through Doctor on Demand or emergency room facility (fee waived if admitted).

Deductible

The amount you must pay each year before the plan begins to pay benefits.

Domestic partnership

Two people whose non-marital relationship has been recognized as legally binding by a state or local government, or who have submitted a notarized Affidavit of Domestic Partnership that meets a set of criteria outlined in Gallagher's Domestic Partner Policy. A relationship that is recognized under a marriage statute does not fall under the Gallagher definition of domestic partner.

Evidence of Insurability (EOI)

Proof of good health that is required to purchase certain types and/or levels of insurance.

Formulary

A preferred list of prescription drugs established by pharmacy benefit managers for health plans. The formulary contains those drugs that are covered under the plan.

Full-time employee

An employee who is scheduled to work 30 or more hours per week and is classified as full-time according to Human Resources records.

Guaranteed issue

The ability to purchase life insurance without proving you are in good health.

Health Care Account (HCA)

A Blue Cross Blue Shield of Illinois claims administration account used to help offset deductible and other out-of-pocket medical expenses. Also known as a Health Reimbursement Account, this account is funded by Gallagher. You cannot make your own contributions or use funds in this account to pay for flat dollar copays. This account is only available to those enrolled in the PPO + HCA plan.

Health Care Flexible Spending Account (FSA)

An employer-sponsored health care account that allows employees to set aside pre-tax funds through payroll deduction to cover the cost of qualified medical expenses. Employees do not have to be enrolled in a Gallagher medical plan to participate in the Health Care FSA.

Employees who are enrolled in Gallagher's PPO + HSA 1 or PPO + HSA 2 medical plan may only use their Health Care FSA as a "limited purpose FSA" until they have met their medical plan deductible. This means that they can use their Health Care FSA for dental and vision expenses and those medical/Rx expenses incurred after the deductible has been met.

Definitions (cont.)

Health Savings Account (HSA)

A tax-free account you can use to pay for current and future medical expenses. An HSA has triple tax benefits: the money goes in tax-free, the money grows tax-free and your withdrawals for qualified medical expenses — including any earnings — are tax-free. You save from 25% to 40% for every dollar you contribute, depending on your tax bracket. This account is only available to those enrolled in either the PPO + HSA 1 or PPO + HSA 2 plans.

High-deductible health plan

A medical plan that meets requirements set by the IRS for a minimum deductible amount and a maximum out-of-pocket limit for in-network services. Participants in plans that meet these requirements (like the PPO + HSA plans) can open a Health Savings Account (HSA).

Imputed income

Imputed income is the IRS term for the value of any benefit or service that should be considered income for the purposes of calculating federal taxes. Under current IRS provisions, imputed income applies to the value of employer-provided life insurance coverage greater than \$50,000 and may apply to employer-paid long-term disability premiums. It may also apply to benefit coverage provided for a domestic partner who is not a tax dependent.

Out-of-network providers

Providers (e.g., doctors, hospitals) that are not part of your plan's network of providers.

Out-of-pocket maximum

The limit the medical plan puts on the amount of money you have to pay each year out of your pocket for eligible medical expenses. Once you reach the limit, the plan will pay 100% of your eligible expenses for the rest of the year (in-network only). Amounts you pay for prescription drugs, deductibles and coinsurance apply toward your in-network out-of-pocket maximum. You may be subject to balance billing by out-of-network providers even after the out-of-network out-of-pocket maximum is met.

Part-time employee

An employee who is scheduled to work 30 hours per week and is classified as part-time according to Human Resources records.

Tobacco surcharge

An additional medical plan payroll contribution that is charged to an employee based on his/her tobacco use. An alternative standard activities will be available through the Gallagher Thrive Wellbeing program to all employees who identify themselves as a tobacco user. For detailed information on the tobacco surcharge and alternative standard, please review the Tobacco Surcharge Policy.

Wellbeing Credit

An additional component of the medical plan payroll contribution that can be earned on a quarterly basis through participation in the Gallagher Thrive Wellbeing Program.





2024 Benefits: Employee Cost Summary

Your medical plan payroll contribution is made up of:

1. Base rate (the starting contribution amount)
2. Wellbeing credit (if applicable)
3. Tobacco surcharge (if applicable)

My Money Guide

Receive one-on-one financial coaching to help you select benefits and manage your personal finances. Take the first step toward a healthier financial future by visiting ajg.com/mymoneyguide today!

Medical/Rx Plan – Base Rate

Depends on the plan you choose, how many dependents you want to cover, and your annual earnings.

Bi-weekly deduction (pre-tax)		PPO + HSA 1 – Base Rates			
2024 Annual Earnings	Employee Only	Employee & Child(ren)	Employee & Spouse	Employee & Family	
Less than \$25,000	\$100.75	\$168.00	\$201.75	\$336.50	
\$25,000 - \$49,999	\$110.75	\$182.25	\$221.75	\$364.50	
\$50,000 - \$74,999	\$114.75	\$195.50	\$230.25	\$392.50	
\$75,000 - \$99,999	\$122.75	\$211.50	\$247.50	\$418.25	
\$100,000 - \$124,999	\$130.50	\$222.25	\$261.75	\$447.00	
\$125,000 and over	\$149.00	\$259.75	\$300.25	\$516.25	

Bi-weekly deduction (pre-tax)		PPO + HSA 2 – Base Rates			
2024 Annual Earnings	Employee Only	Employee & Child(ren)	Employee & Spouse	Employee & Family	
Less than \$25,000	\$65.00	\$97.50	\$130.00	\$198.00	
\$25,000 - \$49,999	\$74.75	\$112.00	\$147.50	\$224.50	
\$50,000 - \$74,999	\$79.00	\$124.75	\$157.00	\$252.75	
\$75,000 - \$99,999	\$87.75	\$141.25	\$173.75	\$278.75	
\$100,000 - \$124,999	\$94.75	\$151.50	\$187.50	\$307.00	
\$125,000 and over	\$113.25	\$189.25	\$226.50	\$376.50	



Medical/Rx Plan – Base Rate (cont.)

Bi-weekly deduction (pre-tax)	PPO + HCA – Base Rates				
	2024 Annual Earnings	Employee Only	Employee & Child(ren)	Employee & Spouse	Employee & Family
Less than \$25,000		\$76.50	\$121.25	\$152.75	\$257.00
\$25,000 - \$49,999		\$85.75	\$135.25	\$172.50	\$283.75
\$50,000 - \$74,999		\$90.75	\$148.50	\$182.25	\$311.75
\$75,000 - \$99,999		\$98.75	\$164.50	\$198.50	\$338.00
\$100,000 - \$124,999		\$106.50	\$175.00	\$212.75	\$367.00
\$125,000 and over		\$125.25	\$212.50	\$251.00	\$436.00

Medical/Rx Plan – Wellbeing Credit

Bi-weekly deduction

Subtract the “employee” amount from your base rate if you plan on completing the required activities in the Gallagher Thrive Wellbeing Program each quarter.

Met Program Requirements	Employee Only	Employee & Child(ren)	Employee & Spouse	Employee & Family
Employee	\$23.08	\$23.08	\$23.08	\$23.08

Medical/Rx Plan – Tobacco Surcharge

Bi-weekly deduction

Add this amount to your base rate if you are a tobacco user. Information about determining your status as a tobacco user is available on Gallagher One. If applicable, this surcharge will automatically be applied to your medical plan rates beginning as soon as administratively feasible in April 2024 and prorated for the remainder of the year (annual maximum: \$1,500).

Employee Only	Employee & Child(ren)	Employee & Spouse	Employee & Family
\$78.95	\$78.95	\$78.95	\$78.95

Ask ALEX

This easy-to-use online tool can help you decide which benefit options are right for you and how to use your benefits throughout the year. Learn more at start.myalex.com/ajg





Standard Dental Plan

Bi-weekly deduction (pre-tax)

2024 Annual Earnings	Employee Only	Employee & Child(ren)	Employee & Spouse	Employee & Family
Less than \$25,000	\$6.50	\$10.50	\$11.50	\$20.00
\$25,000 - \$49,999	\$6.75	\$11.00	\$11.75	\$23.50
\$50,000 - \$74,999	\$7.00	\$11.50	\$13.25	\$24.50
\$75,000 - \$99,999	\$7.50	\$13.25	\$14.00	\$26.75
\$100,000 - \$124,999	\$7.75	\$14.00	\$14.75	\$28.25
\$125,000 and over	\$8.50	\$17.00	\$18.50	\$34.25

Enhanced Dental Plan

Bi-weekly deduction (pre-tax)

2024 Annual Earnings	Employee Only	Employee & Child(ren)	Employee & Spouse	Employee & Family
Less than \$25,000	\$10.50	\$18.50	\$20.00	\$34.50
\$25,000 - \$49,999	\$10.75	\$19.00	\$20.50	\$38.25
\$50,000 - \$74,999	\$11.25	\$19.50	\$21.00	\$39.50
\$75,000 - \$99,999	\$11.75	\$20.50	\$22.25	\$41.50
\$100,000 - \$124,999	\$12.50	\$21.50	\$23.25	\$43.00
\$125,000 and over	\$13.50	\$24.75	\$26.75	\$49.00

Vision Plan

Bi-weekly deduction (pre-tax)

Employee Only	Employee & Child(ren)	Employee & Spouse	Employee & Family
\$3.90	\$7.85	\$7.45	\$11.51



Optional Term Life

Cost per \$1,000 per month (after-tax)

Optional Term Life - Employee/Spouse	
Age	Monthly Rate / \$1,000 Covered Volume
Under 25	\$0.044
25-29	\$0.044
30-34	\$0.058
35-39	\$0.066
40-44	\$0.088
45-49	\$0.132
50-54	\$0.191
55-59	\$0.322
60-64	\$0.558
65-69	\$0.932
70-74	\$1.423
75+	\$2.060

Optional Term Life - Child(ren)
Monthly Rate / \$1,000 Covered Volume
\$0.152

Group Personal Excess Liability (GPEL)	
Plan Options	Bi-Weekly Premium Deduction
\$2 Million/\$1 Million	\$33.35
\$2 Million/\$2 Million	\$39.50
\$5 Million/\$1 Million	\$56.15
\$5 Million/\$2 Million	\$62.31
\$10 Million/\$1 Million	\$84.85
\$10 Million/\$2 Million	\$91.00

Voluntary AD&D

Cost per \$1,000 per pay period (pre-tax)

Employee Only	Employee & Family
\$0.006	\$0.011

Accident Insurance

Bi-weekly deduction (after-tax)

Employee Only	Employee & Child(ren)	Employee & Spouse	Family
\$2.58	\$3.88	\$4.12	\$6.42



Hospital Indemnity Insurance

Bi-weekly deduction (after-tax)

Employee Only	Employee & Child(ren)	Employee & Spouse	Family
\$7.20	\$9.54	\$14.58	\$16.56

Critical Illness Insurance

Bi-weekly deduction (after-tax)

Age	Plan 1 - \$10,000		Plan 2 - \$20,000		Plan 3 - \$30,000	
	Employee Only, Employee + Child(ren)	Employee + Spouse, Family	Employee Only, Employee + Child(ren)	Employee + Spouse, Family	Employee Only, Employee + Child(ren)	Employee + Spouse, Family
18 - 24	\$1.14	\$2.28	\$1.76	\$3.50	\$2.36	\$4.72
25 - 29	\$1.44	\$2.86	\$2.34	\$4.68	\$3.24	\$6.48
30 - 34	\$1.74	\$3.48	\$3.00	\$6.00	\$4.26	\$8.52
35 - 39	\$2.46	\$4.90	\$4.44	\$8.88	\$6.42	\$12.86
40 - 44	\$3.30	\$6.58	\$6.14	\$12.28	\$8.98	\$17.98
45 - 49	\$4.74	\$9.46	\$9.00	\$18.00	\$13.26	\$26.54
50 - 54	\$6.58	\$13.14	\$12.68	\$25.36	\$18.80	\$37.60
55 - 59	\$8.74	\$17.48	\$17.02	\$34.04	\$25.30	\$50.60
60 - 64	\$12.90	\$25.78	\$25.32	\$50.64	\$37.72	\$75.46
65 - 69	\$18.10	\$36.20	\$35.74	\$71.44	\$53.34	\$106.70
70 - 74	\$24.74	\$49.48	\$49.00	\$98.00	\$73.26	\$146.52
75 - 79	\$30.98	\$61.96	\$61.52	\$123.02	\$92.04	\$184.08
80 +	\$44.92	\$89.84	\$89.38	\$178.76	\$133.84	\$267.70

Identity Protection Program

Bi-weekly deduction (after-tax)

Employee Only	Employee + Child(ren) Employee + Spouse Family
\$3.90	\$7.36

Legal Services Plan

Bi-weekly deduction (after-tax)

Employee & Family Members
\$8.54

