Additional Benefits Plan Options



AccessPoint offers a broad scope of benefit options and coverage levels to meet your employees' needs.

Our benefits plan includes the following products: Dental, Vision, Basic Life and AD&D, Voluntary Life & AD&D, Short Term Disability, Long Term Disability, Hospital Indemnity, Critical Illness, and Accident Insurance.

Below is a brief description of the benefits these products can provide you and your family.

Dental: protect your smile and your health

Guardian® has been an industry leader for Dental Insurance for over 60 years and provides access to one of the nation's largest dental networks. You save money when you use a Guardian in-network dentist, yet still have freedom and coverage to seek care from out-of-network dentists.

Vision: see the value of healthy vision

Did you know that regular vision exams can detect major medical problems, including diabetes, high blood pressure, increased stroke risk, and autoimmune diseases? For just a few dollars a month, you get affordable coverage that saves you time and money. Rich, flexible plans cover your exams and materials like glasses and contacts. Guardian Vision Insurance uses the VSP network of vision providers, one of the largest national independent vision networks.



Basic Life & Voluntary Life Insurance: protect your family and finances

Guardian Life Insurance helps provide financial protection for your family and loved ones. If something were to happen to you, life insurance would provide money so that your family and your loved ones can continue to manage expenses if you were no longer around. Consider your living expenses such as mortgage payments, legal or medical fees, childcare, college education, and debts.



Short Term & Long Term Disability Insurance: because illness and injury could leave you without a paycheck.

Although you may have life and medical insurance, neither one compensates you if you need to be out of work due to an illness or serious injury. That's why Guardian Disability Insurance adds value to any benefits package. It's the perfect complement to your existing benefits and can help cover expenses such as physical therapy, child care, spousal care giving, and travel to treatment centers.



Hospital Indemnity Insurance: helping you focus on recovery — not your finances

A trip to the hospital can really set you back and medical Insurance doesn't cover everything. You are still responsible for copays, deductibles and other out-of-pocket costs. For a few dollars a month, Guardian Hospital Indemnity Insurance can pay you a benefit for hospitalizations and for each day you are admitted, up to 15 days. Payments are made directly to you and can be used for any purpose.



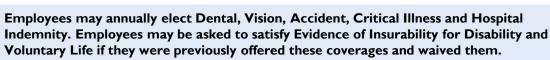
Critical Illness Insurance: helping you focus on recovery — not your finances

Treatment of critical illnesses such as cancer, heart attack and stroke can lead to unexpected expenses that create an additional financial burden. Guardian Critical Illness Insurance can help you pay for travel to treatment centers, ongoing household bills, co-pays for experimental treatment, and everyday expenses like groceries, rent and mortgage.



Accidents happen. Fortunately, we can help with unexpected expenses

Guardian Accident Insurance helps offset the costs associated with both minor and major accidents. For every covered accident, Guardian pays a benefit based on the injury you or your spouse/children sustain and the various treatments and/or services received, regardless of what is covered by medical insurance. Payments are made directly to you and can be used for any purpose — even your everyday expenses like food, rent and utilities.





Products are underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Some products may not be available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Documents are the final arbiter of coverage. Accident Policy Form#GP-1-AC-BEN-12, et al, Critical Illness Policy Form#GP-1-Cl-14, STD/LTD Policy Form#GP-1-STD-15, GP-1-LTD-15, Life Policy Form#GP-1-GPL-14, GP-1-LIFE-15, Dental Policy Form#GP-1-DG2000, et al, Vision Policy Form#GP-1-GVSN-17, Hospital Indemnity Policy Form#GP-1-HI-15; File #2018-56295 exp 03/20



SMILE. THERE'S AN AFFORDABLE WAY TO CARE FOR YOUR TEETH.

Taking care of your teeth can be expensive. That's why the right dental insurance is so important — it not only pays for preventive care that can keep you and your family healthy, but it also helps pay for more extensive, costly and often unexpected expenses, such as fillings, crowns and root canals. Plus, you save money and have the assurance that you are getting the right care when you use one of our in-network dentists.

Why choose Guardian® for your Dental Coverage

We have been providing outstanding dental plans to millions of Americans for more than 50 years. When you enroll in Guardian Dental plans, you have access to one of the nation's largest dental networks, with over 114,000 dental providers at more than 319,000 dental service nationwide, so you know there's always high quality dental care close by.

From preventive checkups and cleanings, to comprehensive oral care treatments, we have you covered.

Why Going to an In-Network PPO Provider is Important

Your benefit plan offers 100% coverage for Preventive services, but what if you have a more serious condition and need more costly services? Seeking care for those services from an in-network dentist can help! Below is an example:

Average cost of a root canal, associated dental work, and a crown* Cost with no dental insurance Your in-network cost with Guardian Dental Insurance Your estimated savings with Guardian Dental Insurance Insurance \$2,400 \$1,600 \$800

It's Easy to Use Guardian Dental Benefits

- Using an in-network provider helps you <u>save more money</u> and assures <u>quality dental care</u>, however, you still have the freedom to choose any dentist for care.
- Quick and easy claims payment directly to your dentist
- Find a Provider or View Your ID Card any time of day at <u>www.GuardianAnytime.com</u> or by using Guardian's Mobile App

Did you know...?

- I in 5 Americans has untreated cavities¹
- For every \$1 spent on preventive services an estimated \$50 is saved on more complicated procedures²
- Tooth decay is the most common childhood disease impacting sleeping or eating habits, and can contribute to school absences³

OPTIMAL Monthly Rates	
Employee	\$9.09
Employee +	
Spouse	\$18.37
Employee + Child(ren)	\$18.71
Family	\$25.49



*Illustrative example only. See your plan for specific details regarding covered services. 1. "I in 5 Americans Has Untreated Cavities: CDC" HealthDay, May 31, 2015, http://consumer. healthday.com/Article.asp?AID=665246. 2. When Connecting With A Dentist Doesn't Mean An Office Visit -Kaiser Health News, July 25, 2014 3. Center for Disease Control. Guardian's Dental Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY or its subsidiaries. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. Policy Form#GP-I-DG2000, et al.

Guardian Dental Insurance - Optimal Plan



Plan Number: 527756

EMPLOYEE BENEFITS*

	In Network	Out-of-Network
CALENDAR YEAR DEDUCTIBLE		
Individual Deductible (up to 3 per Family)	\$0	\$50
PLAN MAXIMUMS		
Annual Maximum (Applies to Basic and Major Services Only) Lifetime Orthodontia Maximum, per Child	\$1,200 \$1,000	
MAXIMUM ROLLOVER		
Members may roll over unused Annual Max dollars for use in fut	ure years. INCLU	JDED
PREVENTIVE CARE- INCLUDES PREVENTIVE ADVA (Preventive Services do not track to Annual Maximum)		
Cleaning (prophylaxis) – 2 per calendar year	100%	100%
Fluoride Treatments – under age 19	100%	100%
Oral Exams	100%	100%
Sealants	100%	100%
Sealants – under age 16	100%	100%
X-Rays	100%	100%
BASIC CARE		
Fillings – including Posterior Composite (white) Fillings	80%	80%
Anesthesia	80%	80%
Repair & Maintenance of Crowns, Bridges & Dentures	80%	80%
Periodontal Maintenance Services and Surgery	80%	80%
Endodontic Services (Root Canals)	80%	80%
Oral Surgery & Extractions	80%	80%
MAJOR CARE		
Bridges & Dentures	50%	50%
Inlays/Onlays/Crowns & Veneers	50%	50%

DEPENDENT AGE LIMITS

Orthodontia (applicable to dependent children only)

Dependent Age Limits

ORTHODONTIA

19, or 26 if full-time college student

50%

50%

50%

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Single Crowns

Implants

Important Information about Guardian's DentalGuard Indemnity and DentalGuard Preferred PPO Plans: This policy provides dental insurance only. Coverage is limited to those charges that are necessary to prevent, diagnose or treat dental disease, defect, or injury. Deductibles apply. Waiting periods may also apply for some services. The plan does not pay for: oral hygiene services (except as covered under preventive services), orthodontia (unless expressly provided for), cosmetic or experimental treatments, any treatment to the extent benefits are payable by any other payor or for which no charge is made, prosthetic devices unless certain conditions are met, and services ancillary to surgical treatment. The plan limits benefits for diagnostic consultations and for preventive, restorative, endodontic, periodontic and prosthodontic services. The services, exclusions, and limitations listed above do not constitute a contract and are a summary only. The Guardian plan documents are the final arbiter of coverage. Policy Form #GP-1-DG2000, et al.

50%

50%

50%

GUARDIAN DENTAL INSURANCE - MAXIMUM ROLLOVER

Rollover Dollars...for Your Dental Plan!



Earning Rollover Dollars for Use in Future Years can be Simple!

- 1) Go see the dentist at least once during the plan year.
- 2) Incur less than the plan Threshold of \$600 in paid dental claims. That's it!

With Maximum Rollover, you have more dental benefits available when you need them.

- <u>Promotes Preventive Care:</u> Participants receive rollover dollars in their Maximum Rollover Account if
 they visit the dentist at least once during the year and do not exceed the Threshold.
- **Easy to Track**: Members can look up their Maximum Rollover Account Balance online; They will see their current balance available for use during the current plan year.
- Annual Maximum + Rollover Account Balance = Maximum Dental Coverage: Members accumulate
 Rollover Dollars every year until they reach their Maximum Rollover Account Balance Limit of \$1,250.

Jane's Dental PPO Plan Example: \$1,250 Annual Maximum

YEAR ONE Jane's Maximum Dental Coverage: \$1,200

Jane has \$150 in dental claims (less than this plan's threshold of \$600). Jane receives \$300 Rollover Dollars for use in Year Two.

YEARTWO Jane's Maximum Dental Coverage: \$1,500

Jane has \$250 in dental claims (less than the plan threshold of \$600). This year, Jane also seeks care from only Guardian In-Network PPO Dentists, so Jane receives \$400 Rollover Dollars (members receive more Rollover Dollars when they see only In-Network Dentists).

YEARTHREE Jane's Maximum Dental Coverage: \$1,900

Jane has \$1,450 in dental claims (greater than threshold of \$600).

Since Jane had claims higher than \$600 this year, she does not receive any additional Rollover Dollars.

Jane's claims are higher than the plan's Annual Maximum of \$1,200, so she uses \$250 out of her Maximum Rollover Account to cover her claims.

Jane still has \$450 Rollover Dollars left in her Maximum Rollover Account, so she will have \$1,650 of Maximum Dental Coverage in Year Four.



After your coverage starts, you can check your Max Rollover Account Balance by visiting www.GuardianAnytime.com

Qualifications apply to be eligible for the Maximum Rollover Benefit. Guardian's Dental Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. Information provided in this communication is for informational purposes only. Dental Policy Form #GP-I-DG2000, et al. File #2018-56432 Exp. 03/20



SMILE. THERE'S AN AFFORDABLE WAY TO CARE FOR YOUR TEETH.

Taking care of your teeth can be expensive. That's why the right dental insurance is so important — it not only pays for preventive care that can keep you and your family healthy, but it also helps pay for more extensive, costly and often unexpected expenses, such as fillings, crowns and root canals. Plus, you save money and have the assurance that you are getting the right care when you use one of our in-network dentists.

Why choose Guardian® for your Dental Coverage

We have been providing outstanding dental plans to millions of Americans for more than 50 years. When you enroll in Guardian Dental plans, you have access to one of the nation's largest dental networks, with over 114,000 dental providers at more than 319,000 dental service nationwide, so you know there's always high quality dental care close by.

From preventive checkups and cleanings, to comprehensive oral care treatments, we have you covered.

Why Going to an In-Network PPO Provider is Important

Your benefit plan offers comprehensive coverage for Preventive services, but what if you have a more serious condition and need more costly services? Seeking care for those services from an in-network dentist can help! Below is an example:

Average cost of a root canal, associated dental work, and a crown*

Cost with no dental insurance	Your in-network cost with Guardian Dental Insurance	Your estimated savings with Guardian Dental Insurance
\$2,400	\$1,600	\$800

It's Easy to Use Guardian Dental Benefits

- Using an in-network provider helps you <u>save more money</u> and assures <u>quality dental care</u>, however, you still have the freedom to choose any dentist for care.
- Quick and easy claims payment directly to your dentist
- Find a Provider or View Your ID Card any time of day at <u>www.GuardianAnytime.com</u> or by using Guardian's Mobile App.

Did you know...?

- I in 5 Americans has untreated cavities¹
- For every \$1 spent on preventive services an estimated \$50 is saved on more complicated procedures²
- Tooth decay is the most common childhood disease impacting sleeping or eating habits, and can contribute to school absences³

VALUE Monthly Rates				
Employee	\$0.00			
Employee + Spouse	\$0.00			
Employee + Child(ren)	\$0.00			
Family	\$0.00			



*Illustrative example only. See your plan for specific details regarding covered services. 1. "1 in 5 Americans Has Untreated Cavities: CDC" HealthDay, May 31, 2015, http://consumer. healthday.com/Article.asp?AID=665246. 2. When Connecting With A Dentist Doesn't Mean An Office Visit -Kaiser Health News, July 25, 2014 3. Center for Disease Control. Guardian's Dental Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY or its subsidiaries. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. Policy Form#GP-1-DG2000, et al.

Guardian Dental Insurance - Value Plan



Plan Number: 527756

EMPLOYEE BENEFITS*	In-Network	Out-of Network
Claim Payments Based On	Fee Schedule	Fee Schedule
CALENDAR YEAR DEDUCTIBLE		
Individual Deductible (up to 3 per Family)	\$0	\$50 Applies to All Services
PLAN MAXIMUMS		
Annual Maximum	\$	51,000
PREVENTIVE CARE – INCLUDES PREVENTIVE ADVA (Preventive Services rendered by In-Network Dentists		and Annual Maximums)
Cleaning (prophylaxis) – 2 per calendar year	100%	100%
Fluoride Treatments – under age 19	100%	100%
Oral Exams	100%	100%
Sealants	100%	100%
Sealants – under age 16	100%	100%
BASIC CARE		
X-rays	80%	50%
Fillings	80%	50%
Periodontal Maintenance	80%	50%
Anesthesia	80%	50%
Repair & Maintenance of Crowns, Bridges and Dentures	80%	50%
MAJOR CARE		
Bridges & Dentures	50%	50%
Periodontal Maintenance Services and Surgery	50%	50%
Endodontic Services (Root Canals)	50%	50%
Oral Surgery	50%	50%
Inlays/Onlays, Crowns and Veneers	50%	50%
Single Crowns	50%	50%
ORTHODONTIA		
Orthodontia	Not Covered	Not Covered
DEPENDENT AGE LIMITS	· 	
Dependent Age Limits	19, or 26 if full-	time college student

^{*}The services, exclusions, and limitations listed above do not constitute a contract and are a summary only. The Guardian plan documents are the final arbiter of coverage. This document is a summary of the major features of the referenced insurance coverage. It is intended for illustrative purposes only and does not constitute a contract. The insurance plan documents, including the policy and certificate, comprise the contract for coverage. The full plan description, including the benefits and all terms, limitations and exclusions that apply will be contained in your insurance certificate. Coverage terms may vary by state and employer-sponsored plan. The premium amounts reflected in this summary are an approximation; if there is a discrepancy Between this amount and the premium deducted from your paycheck, the latter prevails.



Important Information about Guardian's DentalGuard Indemnity and DentalGuard Preferred PPO Plans: This policy provides dental insurance only. Coverage is limited to those charges that are necessary to prevent, diagnose or treat dental disease, defect, or injury. Deductibles apply. Waiting periods may also apply for some services. The plan does not pay for: oral hygiene services (except as covered under preventive services), orthodontia (unless expressly provided for), cosmetic or experimental treatments, any treatment to the extent benefits are payable by any other payor or for which no charge is made, prosthetic devices unless certain conditions are met, and services ancillary to surgical treatment. The plan limits benefits for diagnostic consultations and for preventive, restorative, endodontic, periodontic and prosthodontic services. The services, exclusions, and limitations listed above do not constitute a contract and are a summary only. The Guardian plan documents are the final arbiter of coverage. Policy Form #GP-1-DG2000, et al.

COLLEGE TUITION BENEFIT



Employees enrolled in Guardian Dental through AccessPoint can earn Tuition Rewards that can pay for up to one year's tuition at a SAGE Scholar college. There are over 370 private colleges and universities across the nation in the SAGE college network.

- One Tuition Reward point = \$1 in tuition reduction.
- Addresses a 'Top 5' employee concern saving for college. Help your children, stepchildren, grandchildren, godchildren, nieces, and nephews reduce the cost of college.
- Colleges participate as a way to boost their student recruitment.
- Employees keep their Tuition Rewards, even if they change employment.
- A complete list of schools can be found by visiting the official College Tuition Benefit website at Guardian.CollegeTuitionBenefit.com just click on "Participating Colleges".
- Tuition Rewards can be used at over 375 institutions, with 80% ranked among "America's Best" by US News and World Report in 2016.

How It Works

- 2,000 additional Tuition rewards are given annually to those who re-enroll in Guardian's Dental plan shortly
 after renewal (awarded in the 2nd month following the end of your current plan year).
- You must be registered in the College Tuition Rewards database by the last day of your policy year (June 30th) in order to receive Tuition Rewards for that year (retroactive rewards are not available).
- During the 4th renewal, 2,500 additional Bonus Tuition rewards are given to those who remain enrolled in the Guardian program (i.e. total of 4,500 in the 4th year).
- 500 Tuition Rewards are given to each student registered under the dental member. There is no limit to the number of relatives who can be registered. Children must be added before August 24th of the year they enter 11th grade to be eligible to receive Tuition Rewards.



This example shows how the College Tuition Benefit would help a 12-year-old in the family of a Guardian Dental subscriber. If the student attends a participating SAGE Scholar College, the tuition will be reduced by \$17,000, spread evenly over the first four years of attendance.

You Must Go Online to Identify Yourself as a Guardian Member with this Benefit, and to start collecting Tuition Rewards: Visit www.Guardian.CollegeTuitionBenefit.com.

Your username is your Group Plan ID # 527756, and your password is Guardian



KEEP AN EYE ON YOUR VISION HEALTH – AND SAVINGS.

Whether you have perfect vision, or require some type of corrective lenses, preventive eye care is an important part of your overall health.

And as we go through life, having a good vision insurance plan can help you reduce the expensive costs of exams, frames, contact lenses, laser corrective surgery and more.

Regular Eye Exams Can Detect Major Medical Problems

Research shows that regular vision exams can help identify vision issues before they become serious I. Having a vision plan can also benefit your family, and in particular your children, since problems with vision can affect their progress in school. Other conditions that can be detected with regular vision exams include:

- Diabetes
- Autoimmune diseases
- High blood pressure
- High blood pressure
- Increased stroke risk
- Excessive thyroid hormones

Vision Insurance with Guardian

With Guardian vision coverage, you have access to an extensive network of vision specialists and medical professionals. For just a few dollars a month, you and your family can take advantage of affordable coverage that can save you time and money.

A Plan with Real Benefits

- No ID cards needed
- Nationally recognized vision providers
- Nationwide network
- Quick and easy claims payment

See the Value of Healthy Vision

- Two out of three Americans are affected by vision problems.²
- 70% of adults in the U.S. experience some form of digital eye strain due to use of their electronic devices.³
- Nearly 25% of schoolage children have vision problems that can impact learning.⁴

Monthly Rates	S
Employee	\$0.00
Employee + Spouse	\$0.00
Employee + Child(ren)	\$0.00
Family	\$0.00



1. Why Are Eye Exams Important? http://www.allaboutvision.com/eye-exam/importance.htm, 2016. 2. The National Eye Institute, 2014. 3. Voluntary Benefits Magazine, July 2014; 4. American Optometric Association 2014. Guardian's Vision Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. This policy provides vision care limited benefits health insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. Policy Form #GP-1-VSN-96-1 et al.

Guardian Vision Insurance - Education



Plan Number: 527756

Primary Benefits	nary Benefits Plan Option 1					
Exams	\$10					
Materials	\$25					
Child Age Limit	To Age 26					
	In-Network Out-of-Networl Co-Pay Allowance					
EYE EXAMS	Once per calendar year					
Exam	\$10 \$39					
LENSES	Once per calendar year					
Lens – Single Vision	\$25	\$23				
Lens – Bifocal	\$25	\$37				
Lens – Trifocal	\$25	\$49				
Lens – Lenticular	\$25	\$64				
CONTACT LENSES	Once per cale	endar year				
Elective Allowance (in lieu of complete set of glasses)	\$130 maximum	\$100 maximum				
FRAMES	Once every other calendar year					
Allowance	\$130 retail maximum + 20% off balance after \$25 Co-pay After \$25 Co-					

ADDITIONAL FEATURES - VSP CHOICE NETWORK PROVIDERS ONLY

Members receive

- 30% off the retail price of additional pairs of glasses purchased the same day from the same provider that performed the exam
- 20% off any additional pairs of glasses purchased within 12 months of the exam
- 20% off the amount exceeding the copay and allowance on frames purchased
- 15% off providers' professional services for prescription contact lenses.

These discounts only apply to services from an in-network provider.





Lens Options – Member Cost	In-Network	Out-of Network
Solid Tints and Dyes (Pink I and II)	Included	N/A
Solid Tints and Dyes (Except Pink I and II)	\$13	N/A
Plastic Gradient Dye	\$15	N/A
Photochromatic	\$62-\$76	N/A
Ultraviolet Coating	\$14	N/A
Scratch-Resistant Coating	\$15	N/A
Polycarbonate Lenses	\$0 ¹ /\$23-\$28 for adults	N/A
Standard Anti-Reflective (AR) Coating	\$37	N/A
Standard Progressive Lenses	\$50	
Premium Progressives Lenses (Varilux®, etc.)	\$80-\$90	Up to \$67
Custom Progressive Lenses	\$120-\$160	

ADDITIONALVSP CHOICE NETWORK FEATURES (In-Network Only)

Lasik	Average 15% off the provider's Usual & Customary Charges, or 5% off promotional price
Retinal Screening	No more than \$39

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A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS

VSP Vision Plan • Coverage is limited to those charges that are necessary to prevent, diagnose and treat a vision condition. • PROPOSAL MANAGER TO CONFIRM WITH UW THE NUMBER OF YEARS If the member purchases contact lenses they must wait one calendar year/two calendar years to purchase frames. • Members cannot bank unused allowance amounts for future use, they must use their allowance during the same office visit. • The plan does not pay for: • Orthoptics or vision training and any associated supplemental testing. • Medical or surgical treatment of the eye • Eye examination or



corrective eyewear required by an employer as a condition of employment of Lenses and frames furnished under this plan, which are lost of broken (except when services are otherwise available) • The plan limits benefits for blended lenses, oversized lenses, photochromic lenses, coated or laminated lenses, a frame that exceeds plan allowance, cosmetic lenses, U-V protected lenses, and optional cosmetic processes • Medically necessary contact lenses are covered only if needed: (1) after cataract surgery; (2) to correct extreme visual acuity problems that cannot be corrected with eyeglasses; (3) for certain conditions of Anisometropia; or (4) for Keratoconus • The services, exclusions and limitations listed above do not constitute a contract and are a summary only. • Please refer to certificate of coverage for full plan description; plan documents are the final arbiter of coverage. • GP-1-VSN-96-VIS



Protect your paycheck if you are unable to work.

Your income is one of your most valuable assets

No one plans on becoming disabled, but a serious illness or injury can strike anyone at any time, and at any age, taking away your ability to earn a paycheck.

Nearly 25% of Americans will become disabled before they retire¹, so this could happen to you. And disabilities can result not just from accidents, but illnesses such as heart attack, cancer, and stroke.

How long can you live on your savings if you became disabled?

The value of Disability Insurance for you and your family

Disability Insurance should be an integral part of your financial safety net — it provides a steady stream of income to ease the financial stress of a covered illness or injury when you are no longer receiving a paycheck.

For just a few dollars a month, you can help to provide financial security for yourself and those who depend on you. And enrolling for disability insurance at the workplace is simple and cost effective — with convenient payroll deductions.

Disability coverage with Guardian

For over 50 years, Guardian Disability Insurance has helped protect the income, lifestyle, and financial future for millions of Americans, and Guardian is the #I insurance carrier for disability cases.²

Disability Insurance with Guardian is easy

- Affordable group rates
- Extensive **resources** and **support** to help you get back to work and live a productive life.
- Timely and efficient claims review and payment
- File your Claims Telephonically without claim forms
- Guardian will obtain information directly from your doctor
- Guardian will notify you and AccessPoint of your claim status.
- Check your claim status online at GuardianAnytime.com

Be sure to continue following the rules at your place of work for reporting time off. Check with your supervisor for clarification of this procedure.

You might be underestimating your risk of a disabling illness or injury

- More than 50% of disabled Americans are in their working years, from 18-64¹
- A typical female has a 24% chance of becoming disabled for 3 months or longer during her working career¹
- A typical male has a 21% chance of becoming disabled for 3 months or longer during his working career¹
- 95% of disabilities are not covered by Workman's Comp¹

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 pm EST.

Refer to your plan number: 527857



¹ Council for Disability Awareness, 2015 http://www.disabilitycanhappen.org/chances_disability/. ² LIMRA 2015 Group Disability Sales and Inforce Survey (excludes reserve buyouts). Guardian's Disability Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. This policy provides disability income insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. Short-term Disability Policy Form #GP-1-STD07-1.0, et al.

Guardian Short Term Disability Insurance: Up to \$500 per Week

Plan Design Provisions	Employee Coverage*			
Weekly Benefit	60% to \$500			
Maximum Payment Period	26 Weeks			
Benefits Begin	8 th Day, Accident or Illness			
Definition of Disability	Own Job			
Pre-Existing Limitation	There are No Pre-Existing Limitations; if you waive coverage at your initial enrollment opportunity and later decide to elect it, evidence of insurability is required.			
Rehabilitation Benefit	When deemed appropriate, participation is mandatory, 110% Enhanced Benefit			
Return to Work	Zero Day Residual; Part time Earnings Calculation: Greater of direct reduction or proportionate loss			
Integration Method	Direct Offset, Full Family (benefits reduced by other group disability benefits, plus insured and dependent Social Security benefits			
Minimum Weekly Benefit	Greater of 10% of your Gross Weekly Benefit or \$25			
Earnings Definition	Standard Annual Base Earnings, Including Average Commissions			
Maternity Benefits	Included			
Coverage Type	Non-Occupational			
	Sample Premiums			

Sample Premiums									
Weekly Benefit	\$100	\$150	\$200	\$250	\$300	\$350	\$400	\$450	\$500
Monthly Premium	\$4.60	\$6.90	\$9.20	\$11.50	\$13.80	\$16.10	\$18.40	\$20.70	\$23.00
Weekly Premium	\$1.07	\$1.60	\$2.13	\$2.66	\$3.19	\$3.72	\$4.25	\$4.78	\$5.31

To Calculate Your Estimated Weekly Short Term Disability Benefit:

Your Annual Earnings: \$	Divide by 52 = \$	_ Multiply by 60%:	\$)
-	•		

Compare the amount in the circle to the \$500 benefit maximum. Your estimated Weekly Short Term Disability Benefit is the lesser of \$500 or the amount on this line. You will use the amount in the circle to complete your premium calculation below if it is less than \$500. If it is more than \$500, use \$500 in the calculation below.

To Calculate Your Estimated Weekly Short Term Disability Premium:

Your Weekly STD Benefit \$_	(the lesse	er of the amount in the circle or \$500)
Divide by 10 = \$	Multiply by \$0.46 = \$	This is your Monthly Premium.

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STD SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS • We do not pay benefits for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces) committing a felony or taking part in any riot or other civil disorder; intentionally injuring themselves or attempting suicide while sane or insane; or for the voluntary use of any poison, chemical, prescription or non-prescription drug or controlled substance unless it has been prescribed by a doctor and is used as prescribed. • We do not pay benefits during any period in which a covered person is confined to a correctional facility; an employee is not under the care of a doctor; an employee is receiving treatment outside of the U.S. or Canada; the employee's loss of earnings is not solely due to disability. • In order to be eligible for coverage; employees must be legally working (a) in the United States or (b) outside the United States, for a U.S. based employer in a country or region approved by Guardian. Subject to state specific variations. • This policy provides disability income insurance only. It does not provide "basic hospital," "basic medical," or "major medical" insurance as defined by the New York State Insurance Department. • Please refer to certificate of coverage for full plan description; plan documents are the final arbiter of coverage.



Protect your paycheck if you are unable to work.

Your income is one of your most valuable assets

No one plans on becoming disabled, but a serious illness or injury can strike anyone at any time, and at any age, taking away your ability to earn a paycheck.

Nearly 25% of Americans will become disabled before they retire¹, so this *could* happen to you. And disabilities can result not just from accidents, but illnesses such as heart attack, cancer, and stroke.

How long can you live on your savings if you became disabled?

The value of Disability Insurance for you and your family

Disability Insurance should be an integral part of your financial safety net — it provides a steady stream of income to ease the financial stress of a covered illness or injury when you are no longer receiving a paycheck.

For just a few dollars a month, you can help to provide financial security for yourself and those who depend on you. And enrolling for disability insurance at the workplace is simple and cost effective — with convenient payroll deductions.

Disability coverage with Guardian

For over 50 years, Guardian Disability Insurance has helped protect the income, lifestyle, and financial future for millions of Americans, and Guardian is the #1 insurance carrier for disability cases.²

Disability Insurance with Guardian is easy

- Affordable group rates
- Extensive **resources** and **support** to help you get back to work and live a productive life.
- Timely and efficient claims review and payment
- Guardian will notify you and AccessPoint of your claim status.
- Check your claim status online at GuardianAnytime.com

Be sure to continue following the rules at your place of work for reporting time off. Check with your supervisor for clarification of this procedure.

You might be underestimating your risk of a disabling illness or injury

- More than 50% of disabled Americans are in their working years, from 18-64¹
- A typical female has a 24% chance of becoming disabled for 3 months or longer during her working career¹
- A typical male has a 21% chance of becoming disabled for 3 months or longer during his working career¹
- 95% of disabilities are not covered by Workman's Comp¹

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 pm EST.

Refer to your plan number: 527857



¹ Council for Disability Awareness, 2015 http://www.disabilitycanhappen.org/chances_disability/. ²LIMRA 2015 Group Disability Sales and Inforce Survey (excludes reserve buyouts). Guardian's Disability Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. This policy provides disability income insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. Short-term Disability Policy Form #GP-1-STD07-1.0, et al.

Guardian Long Term Disability Insurance: \$5,000 per Month for 2 Years (180 Day Elim)

Plan Design Provisions	Employee Coverage*	
Monthly Benefit	60% to \$5,000	
Definition of Disability	Own Occupation	
Maximum Payment Period	2 Years	
Benefits Begin	180 th Day, Accident or Illness	
Pre-Existing Condition Exclusion	3 Month Lookback Period/12 Month Exclusion	
Evidence of Insurability	Not applicable as a New Hire; Late Entrants Subject to Evidence of Insurability	
Rehabilitation Benefit	When deemed appropriate, participation is mandatory, 110% Enhanced Benefit	
Return to Work & Part Time	Zero Day Residual; Greater of Direct Reduction or Proportionate Loss;	
Earnings Offset	Includes 12 Month Work Incentive	
Integration Method	Direct Offset Family - benefits reduced by other group disability benefits plus insured	
	and dependent Social Security benefits; includes offset with salary continuation	
Salary Continuation	Direct Offset, up to 100% of Pre-Disability Earnings	
Minimum Benefit	Greater of 10% or \$100	
Mental Health & Substance Abuse	24 Month Combined Limit	
Earnings Definition	Standard Annual Base Earnings, Including Average Commissions	
Coverage Type	24 Hour	
Survivor Benefit	3 Month, Lump Sum Payment of Gross Benefit Amount	

Long Term Disability: Estimated Monthly & Weekly Premiums									
Monthly Benefit	\$1,000	\$1,500	\$2,000	\$2,500	\$3,000	\$3,500	\$4,000	\$4,500	\$5,000
Monthly Premium	\$2.33	\$3.50	\$4.67	\$5.83	\$7.00	\$8.17	\$9.33	\$10.50	\$11.67
Weekly Premium	\$0.54	\$0.81	\$1.08	\$1.35	\$1.62	\$1.89	\$2.16	\$2.43	\$2.70

To Calculate Your Estima	ted Monthly Earnings:				
Your Annual Earnings: \$	Divide by 12 = \$				
Compare the amount in the circle to the \$8,333, which is the maximum earnings covered under this plan. If the amount in the circle is less than \$8,333, you will use this amount as your Monthly Earnings in the calculation below. If it is greater than \$8,333, use \$8,333 in the calculation below.					
To Calculate Your Estima	ted Monthly Long Term Disabili	ty Premium:			
Your Monthly Earnings: \$	(the lesser of the amo	ount in the circle or \$8,333)			
Divide by 100 = \$	Multiply by \$0.14 = \$	This is your Monthly Premium.			
To Calculate Your Estima	ted Monthly Benefit:				
Your Annual Earnings: \$ Benefit.	Divide by I2 = \$	Multiplied by .60 = \$	This is your Monthly		

LTD SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS • We limit the duration of payments for long term disabilities caused by mental or emotional conditions, or alcohol or drug abuse. • We do not pay benefits for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces) committing a felony or taking part in any riot or other civil disorder; intentionally injuring themselves or attempting suicide while sane or insane; or for the voluntary use of any poison, chemical, prescription or non-prescription drug or controlled substance unless it has been prescribed by a doctor and is used as prescribed. • We do not pay benefits during any period in which a covered person is confined to a correctional facility; an employee is not under the care of a doctor; an employee is receiving treatment outside of the U.S. or Canada; or the employee's loss of earnings is not solely due to disability. • During the exclusion/limitation period, this disability plan does not pay charges relating to a pre-existing condition. If this plan is transferred from another insurance carrier, the time an insured is covered under that plan will count toward satisfying Guardian's pre-existing condition exclusion/limitation period. A pre-existing condition includes any condition for which an employee, in a specified period of time prior to coverage in this plan, consults with a physician, receives treatment, or takes prescribed drugs. Please refer to the plan details for specific time periods. • In order to be eligible for coverage; employees must be legally working (a) in the United States or (b) outside the United States, for a U.S. based employer in a country or region approved by Guardian. • This policy provides disability income insurance only. It does not provide "basic hospital," "basic medical," or "major medical" insurance as defined by the New York GP-1-LTD-94-A, B, C-1; GP-1-LTD2K-1



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An accidental injury can seriously cost you.

Because medical insurance doesn't cover everything.

If you and your family are active, chances are, you're no stranger to a hospital emergency room. Even with medical insurance, a fall while bicycle riding or your child's sprained ankle at soccer practice can cost you a bundle in out-of-pocket expenses.

Are you financially prepared for all of the medical and non-medical costs of treatment and recovery from a serious injury?

Financial support to get you back on your feet

- Even if you have medical insurance, you will have out-of-pocket costs that could really set you back financially
- Guardian® pays you cash benefits for covered injuries, treatments and services, based on a **comprehensive schedule of benefit amounts.**
- Payments go directly to you, and you can pay for other expenses, like traveling to the hospital, childcare and lost income from missed work

Here's an example of how Guardian Accident Insurance helped John when he was hiking in a local park:*

John fell and tore cartilage in his knee. He went to the hospital emergency room for treatment and stayed overnight. The doctor gave him a brace and scheduled him for a follow up visit.

Accident Insurance offset John's expenses:

Ambulance	\$100	Knee Brace	\$100	
Hospital Admission	\$750	X-ray	\$20	
Emergency Room Visit	\$150	Knee Cartilage Tear	\$500	
Hospital Confinement (2 s350 6 Follow-up Visits with Dr. \$150				
Total Cash Benefit Paid to John: \$2,120				

Accidental Injury Insurance with Guardian is easy

- No health or medical questions to answer
- Take the coverage with you if you leave your current employer

Over 40 million Americans received emergency room

Unfortunately, an accident **could** happen to you. Are

you financially prepared?

- Over 40 million Americans received emergency room treatment for an accidental injury¹
- 63% of Americans with medical insurance used all their savings for out-of-pocket medical costs²
- The average cost of an emergency room visit in the U.S. is \$2,168³

Monthly Costs				
Employee Only	\$ 11.57			
Employee & Spouse	\$ 19.89			
Employee & Child(ren)	\$ 20.96			
Family	\$ 29.28			

Wellness Benefit Included:

Provides a \$50 per year benefit for completing certain routine wellness screenings or procedures



*For illustrative purposes only all names mentioned are purely fictional. Covered benefits and benefit amounts may vary by employer-sponsored plan. See your plan for specific coverage amounts and details. 1. CDC Centers for Disease Control and Prevention, http://www.cdc.gov/nchs/fastats/hospital.htm, 2015. 2. Kaiser Family Foundation and the Health Research & Educational Trust, 2015. 3. How Much Does It Cost to Go to the ER?, 2015. http://www.theatlantic.com/health/archive/2013/02/ how-much-does-it-cost-to-go-to-the-er/273599/. Guardian's Accident Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. This policy provides Accident insurance only. It does not provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. Important Notice —This Policy Does Not Provide Coverage For Sickness. Policy Form #GP-1-AC-BEN-12, et al.

Guardian Accident Insurance

Benefits	Description
Offered As	Voluntary
Accident Coverage	Off Job, Includes Accidental Death & Dismemberment
Evidence of Insurability	Not Required; Annual Enrollment
Child Age Limits	Birth to age 26
Accidental Death	
Death Benefit	Employee: \$10,000 Spouse: \$5,000 Child: \$5,000
Catastrophic Loss	Quadriplegia: 100% of AD&D Amount Loss of speech and hearing (both ears): 100% of AD&D Amount Loss of cognitive function: 100% of AD&D Amount Hemiplegia: 50% of AD&D Amount Paraplegia: 50% of AD&D Amount
Common Carrier	200% of AD&D Amount
Common Disaster	200% of Spouse AD&D Amount
Dismemberment	
Hand, Foot, Sight	Single: 50% of AD&D Amount; Multiple: 100% of AD&D Amount
Thumb/Index Finger, Same Hand; Four Fingers, Same Hand; All Toes, Same Foot	25% of AD&D Amount
Seatbelts & Airbags	Seatbelts: Additional \$10,000; Airbags: Additional \$15,000
Reasonable Accommodation to Home or Vehicle	\$2,500
Portability	Included, without Evidence of Insurability

Child Accident Claims:

Guardian pays 20% additional benefits if the covered accident occurred while your covered child is participating in an organized sport governed by an organization and requires formal registration to participate.

Wellness Benefit Included:

Provides a \$50 per year benefit for completing certain routine wellness screenings or procedures

SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS



SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS
This plan will not pay benefits for any injury caused by or related to: • Declared or undeclared war, act of war, or armed aggression; taking part in a riot or civil disorder; or commission of, or attempt to commit a felony; Intentionally self inflicted injury, while sane or insane; suicide or attempted suicide, while sane or insane • The covered person being legally intoxicated •

Treatment rendered or hospital confinement outside the United States or Canada • Travel or flight in any kind of aircraft, including any aircraft owned by or for the employer except as a fare-paying passenger on a common carrier • Participation in any kind of sporting activity for compensation or profit, including coaching or or officiating • Riding in or driving any motor-driven vehicle in a race, stunt show or speed test • Participation in hang gliding, bungee jumping, saligliding, parasailing, parasailing, parachuting, ballooning, parachuting, and/or skydiving • Job related or on the job injuries • Injuries to a dependent child received during the birth • An accident that occurred before the covered by this plan • Sickness, disease, mental infirmity or medical or surgical treatment • Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the U.S. Department of State, subject to state specific variations. • A pre-existing condition includes any condition for which an employee, in the specified time periods. State variations may apply. This applies to the Disability or Hospital Confinement Sickness riders only. • This proposal summarizes the major features of the Guardian Accident benefit plan. It is not intended to be a complete representation of the proposed plan. For full plan features, including exclusions and limitations, please refer to your policy. • GP-1-AC-BEN-12, et al.

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Guardian Accident Insurance

Child Accident Claims: Guardian pays 20% additional benefits if the covered accident occurred while your covered child is participating in an organized sport governed by an organization and requires formal registration to participate.

Benefits Description	Benefit Amount	Benefit Description	Benefit Amount
Accident Emergency Treatment	\$150	Hospital Admission	\$750
Accident Follow-Up Visit - Doctor	\$25 each visit, up to 6 visits	Hospital Confinement	\$175 per day, up to 1 year
Air Ambulance	\$500	Hospital ICU Admission	\$1,500
Ambulance	\$100	Hospital ICU Confinement	\$350 per day, up to 15 days
Appliance	\$100	Initial Physician's Office or	
Blood/Plasma/Platelets	\$300	Urgent Care Facility Treatment	\$50
Burns (2 nd Degree/3 rd Degree)	Schedule of Amounts up to \$12,000	Knee Cartilage	\$500
Burn – Skin Graft	50% of burn benefit	Joint Replacement (hip/knee/shoulder)	\$1,500 for hip; \$750 for knee; \$750 for shoulder
Coma	\$7,500	Laceration	Schedule of Amounts up to \$300
Concussions	\$50	Lodging	\$100 per day, up to 30 days for companion hotel stay
Dislocations	Schedule of Amounts up to \$3,600	Occupational or Physical Therapy	\$25 per day up to 10 days
Diagnostic Exam (Major)	\$100	Prosthetic Device/Artificial Limb	\$500 for 1 limb; \$1,000 for 2 or more limbs
Emergency Dental Work	\$200 per crown; \$50 per extraction	Rehabilitation Unit Confinement	\$150 per day up to 15 days
Epidural Pain Management	\$100 each time, up to 2 times per accident	Ruptured Disc with Surgical Repair	\$500
Eye Injury	\$200	Surgery (Cranial, Open Abdominal, Thoracic)	Schedule of Amounts up to \$1,000
Family Care	\$20 per day, up to 30 days	Surgery – Exploratory or Arthroscopic	\$150
Fracture	Schedule of Amounts up to \$4,500	Tendon/Ligament/Rotator Cuff	1: \$250; 2 or more: \$500
Hernia	\$125	Transportation	\$400 each time, up to 3 times

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SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS

SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS
This plan will not pay benefits for any injury caused by or related to: • Declared or undeclared war, act of war, or armed aggression; taking part in a riot or civil disorder; or commission of, or attempt to commit a felony; Intentionally self inflicted injury, while sane or insane; suicide or attempted suicide, while sane or insane • The covered person being legally intoxicated •

Treatment rendered or hospital confinement outside the United States or Canada • Travel or flight in any kind of aircraft, including any aircraft owned by or for the employer except as a fare-paying passenger on a common carrier • Participation in any kind of sporting activity for compensation or profit, including coaching or or officiating • Riding in or driving any motor-driven vehicle in a race, stunt show or speed test • Participation in hang gliding, bungee jumping, saligliding, parasailing, parasailing, parachuting, ballooning, parachuting, and/or skydiving • Job related or on the job injuries • Injuries to a dependent child received during the birth • An accident that occurred before the covered by this plan • Sickness, disease, mental infirmity or medical or surgical treatment • Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the U.S. Department of State, subject to state specific variations. • A pre-existing condition includes any condition for which an employee, in the specified time periods. State variations may apply. This applies to the Disability or Hospital Confinement Sickness riders only. • This proposal summarizes the major features of the Guardian Accident benefit plan. It is not intended to be a complete representation of the proposed plan. For full plan features, including exclusions and limitations, please refer to your policy. • GP-1-AC-BEN-12, et al.



Guardian Hospital Indemnity Insurance



Plan Number: 549610

Protect your savings from a trip to the hospital.

If you think your medical insurance covers everything, think again.

If you become seriously ill or injured, it's likely you will have a hospital stay. It may be a little scary, as well as expensive.

Could you manage the out-of-pocket costs that come from being hospitalized if the unexpected should happen?

Guardian helps protect you and your family from unexpected expenses.

- Guardian® Hospital Indemnity Insurance supplements your medical plan— no matter what type of other coverage you have.
- Guardian pays you cash benefits for hospital admissions and hospital stays.
- Cash benefits are paid directly to you you decide how to use them.

Here's an example of how Guardian Hospital Indemnity Insurance helped Jane:*

Jane became ill and was admitted to the hospital. She had emergency surgery and was there for four days while recovering.

Hospital Admission	\$500
4 Days Hospital Confinement	\$400
Total Cash Benefit Paid to Jane	\$900

Hospital Indemnity Insurance with Guardian is easy

- · No health or medical questions to answer
- · Take the coverage with you if you change jobs



- There are over 36 million hospitals stays in the US per year¹
- The average cost for a 3 day hospital stay is \$30.000²
- 63% of Americans with medical insurance used all their savings for outof-pocket medical costs³



*For illustrative purposes only all names mentioned are purely fictional. Covered benefits and benefit amounts may vary by employer-sponsored plan. See your plan for specific coverage amounts and details. 1. Agency for Healthcare Research and Quality, Healthcare Cost and Utilization Project, http://www.hcup-us.ahrq.gov/reports/statbriefs/sb180-Hospitalizations-United-States-2015.pdf, October, 2014. 2. Protection from high medical costs, 2016, https://www.healthcare.gov/why-coverage-is-important/protection-from-high-medical-costs/. 3. Kaiser Family Foundation and the Health Research & Educational Trust, 2015. Guardian Hospital Indemnity Insurance is underwritten by The Guardian Life Insurance Company of America, New York, NY and will not be effective until approved by a Guardian underwriter. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. This policy provides limited hospital insurance only. It does not provide basic medical or major medical insurance as defined by the New York State Department of Financial Services. Policy Form # GP-1-HI-15 1.

Guardian Hospital Indemnity Insurance

Monthly Costs				
Age Bands	Employee	Employee & Spouse	Employee & Children	Full Family
Under Age 50	\$ 8.34	\$ 17.16	\$ 14.28	\$ 23.09
Age 50-59	\$ 11.66	\$ 23.37	\$ 17.60	\$ 29.30
Age 60-64	\$ 18.95	\$ 37.65	\$ 24.88	\$ 43.58
Age 65-69	\$ 26.15	\$ 52.05	\$ 32.08	\$ 57.98

Benefits	Description	
Premiums	Issue Age – will not increase due to an insured aging	
Coverage	Sickness and Injury, On and Off Job	
Evidence of Insurability	Not Required; Annual Enrollment	
Age Limits	Employees & Spouses age 69 and under may enroll and coverage continues as long as an insured is actively at work; Spouse premiums based on Employee age; enrolled Children covered from birth to age 26	
Portability	Included, without Evidence of Insurability	
Hospital Admission &	Confinement Benefits	
Hospital or ICU Admission	\$500 per admission, up to a maximum of 2 admissions per year, per insured maximum of 3 admissions per year per family	
Hospital or ICU Confinement	\$100 per day, up to a maximum of 15 days per year, per insured	
Treatment of Normal Pregnancy	Normal pregnancy is included, without a 9 month limitation	
Pre-Existing	3 month lookback period, 12 month exclusion period	
Condition Limitation	Continuity of coverage if transferred from another carrier	

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PLAN HIGHLIGHTS • Benefits are paid directly to the insured when they need it most and can be used however they choose: to help pay for out-of-pocket medical expenses like co-pays and deductibles or for non-medical expenses such as childcare, transportation. • Portability allows the employee to take the coverage with them even if employment has ended.

IMPORTANT NOTES • Hospital Admission & Hospital ICU Admission benefits are not payable on the same day. • Dependent insurance will not take effect if a dependent, other than a newborn, is confined to the hospital or other health care facility or home confined. Coverage is postponed until the day after the date of his or her discharge from such facility or his or her home confinement ends. • Hospital admission benefit is not payable for a newborn unless the child is admitted to the Neonatal ICU. • Waiver of premium is included with Hospital Indemnity coverage. Please see the Summary of Plan Limitations and Exclusions that appears either on this page or the last page of this coverage.

SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS • In order to be eligible for coverage: Employees must be legally working: (a) in the United States or (b) outside the United States, for a US based employer, in a country or region approved by Guardian. • The policy has exclusions and limitations that may impact the eligibility for benefits. • A pre-existing condition includes any condition for which a covered person, in the look back period prior to coverage in this plan, (1) receives advice or treatment from a Doctor; (2) undergoes diagnostic procedures, other than routine screening in the absence of symptoms or suspicion of disease process by a Doctor; (3) are prescribed or take prescription drugs; or (4) receives other medical care or treatment, including consultation with a Doctor. Please refer to the plan documents for specific time periods. State variations may apply. • If the plan is new (not transferred): During the exclusion period, this Hospital Indemnity plan does not pay charges relating to a pre-existing condition. If this plan is transferred from another insurance carrier, the time an insured is covered under that plan will count toward satisfying Guardian's pre-existing condition limitation period. Please refer to the plan details for specific time periods. Employees must be working full-time on the effective date of coverage; otherwise, coverage becomes effective after the completion of the specific waiting period.

An applicant must enroll within 31 days of the coverage effective date. An open enrollment will occur each year during a time period specified by the policyholder. If an applicant does not enroll during their initial enrollment period, he/she may not enroll until the next open enrollment period. • This Plan will not pay benefits for: Treatment relating to a covered person: taking part in any war or act of war (including service in the armed forces), commission of or attempt to commit a felony, an act of terrorism, or participating in an illegal occupation, riot or insurrection; Osuicide or any intentionally self-inflicted injury; Elective surgery; Surgery to correct vision or hearing, unless a result of a covered Injury, medically necessary surgery for glaucoma, cataracts or other sickness or injury; Dental care, dental xrays, or dental treatment; Gastric or intestinal bypass services including lap banding, gastric stapling, and other similar procedures to facilitate weight loss; the reversal, or revision of such procedures; or services required for the treatment of complications from such procedures. Services, treatment or supplies rendered outside the United States or Canada; Cosmetic surgery. This Exclusion does not apply to reconstructive surgery: on an injured part of the body following infection or disease of the involved part; of a congenital disease or anomaly of a covered dependent newborn or adopted infant; or on a non-diseased breast to restore and achieve symmetry between two breasts following a covered Mastectomy; oTreatment or removal of warts, moles, boils, skin blemishes or birthmarks, bunions, acne, corns, calluses, the cutting and



trimming of toenails, care for flat feet, fallen arches or chronic foot strain; Service, treatment or loss related to alcoholism or drug addiction, except for drugs prescribed by the Covered Person's Doctor and taken as prescribed; oCare or treatment for mental or nervous disorders; oServices, treatment or loss rendered in any Veterans Administration or Federal Hospital, except if there is a legal obligation to pay; Services or treatment Provided by a Doctor, Nurse or any other person who is employed or retained by a Covered Person. CoveredPerson's Spouse, parent, brother, sister, child, Domestic Partner or partner in a civil union; Surgery and treatment, procedures, products or services that are experimental or investigative. Hospital Confinement and/or Hospital Admission and Inpatient Surgery due to any Covered Person's giving birth within the first 9 months after the Covered Person's effective date under this Plan as a result of a normal pregnancy, including cesarean section. Complications of Pregnancy will GUARDIAN° be covered to the same extent as any other Covered Sickness or Treatment of a Covered Dependent Child's Children; oSickness or Injury sustained while on active duty in the armed forces of any country. This does not include Reserve or National Guard duty for training.



Critical Illness Insurance helps protect your savings, so you can focus on your recovery.

Because medical insurance doesn't cover everything.

Health care costs are on the rise. Even with medical insurance, you're still responsible for co-payments, deductibles and other out-of-pocket costs, so a serious illness could really set you back financially.

If you or a family member was diagnosed with a serious illness, could you handle the extra expenses?

Guardian helps protect your savings

- Guardian® Critical Illness Insurance **supplements your medical plan** no matter what type of coverage you have
- Guardian pays you cash benefits based on a comprehensive schedule of benefit amounts based on eligible diagnoses.
- Cash benefits are paid directly to you you decide how to use them

Here's an Illustration of how Guardian's Critical Illness Insurance helped Sue:*

- Sue suffers a heart attack and receives \$10,000
- Three years later, she has a stroke and receives \$10,000

Sue received \$20,000 to help offset her out-of-pocket costs and enables her to focus on her recovery.

Condition	Formula	Benefit Payment
Heart attack	100% x \$10,000	\$10,000
Stroke	100% x \$10,000	\$10,000
Total Cash Benefit Paid to Sue		\$20,000

Critical Illness Insurance with Guardian is easy

- · No health or medical questions to answer
- · Take the coverage with you if you leave your current employer
- Protects your savings and gives you peace of mind when the unexpected occurs

Are you financially prepared?

- Every minute of every day, an American becomes seriously ill¹
- The average out-of-pocket expenses for a critical illness can be as much as \$5,000 a year¹
- 63% of Americans with medical insurance used all their savings for out-of-pocket medical costs²
- The out-of-pocket costs to treat a serious illness are the primary cause of personal bankruptcies for Americans
 even with medical insurance¹



*For illustrative purposes only, all names mentioned are purely fictional. Covered benefits and benefit amounts may vary by employer-sponsored plan. See your plan for specific coverage amounts and details. 1. American Association for Critical Illness Insurance, 2015, http://www.criticalillnessinsuranceinfo.org/learning-center/individuals.php. 2. Kaiser Family Foundation and the Health Research & Educational Trust, 2015. Guardian's Critical Illness Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. This policy provides limited benefits health insurance only. It does not provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. Policy Form # GP-1-CI-14

Guardian Critical Illness Insurance

GROUP I CONDITIONS: CANCER, VASCULAR, & ORGAN FAILURE	I ST OCCURRENCE	2 nd OCCURRENCE
CANCER		
Invasive Cancer	100%	50%
Carcinoma In Situ	30%	0%
Benign Brain Tumor	75%	0%
Skin Cancer	\$250	Not Covered
VASCULAR		
Heart Attack	100%	50%
Stroke	100%	50%
Heart Failure	100%	50%
Coronary Arteriosclerosis	30%	0%
OTHER		
Kidney Failure	100%	50%
Other Organ Failure	100%	50%

GROUP 2 CONDITIONS: PAYMENT FOR IST OCCURRENCE ONLY						
100% B	ENEFIT	50% BENEFIT	30% BENEFIT			
ALS (Lou Gehrig's Disease)	Parkinson's Disease	Alzheimer's Disease	Addison's Disease			
Coma	Permanent Paralysis (2 limbs)	*	Huntington's Disease			
Loss of Speech, Sight or Hearing	Severe Burns	(1 limb)	Multiple Sclerosis			

GROUP 3 CHILDHOOD CONDITIONS: 100% OF CHILD BENEFIT FOR 1 ST OCCURRENCE				
Cerebral Palsy	Cleft Lip/Palate	Club Foot	Cystic Fibrosis	
Spina Bifida	Down Syndrome	Muscular Dystrophy	Type 1 Diabetes	



Guardian Critical Illness Insurance

Benefits	Description	
Employee Coverage	Employees may elect a lump sum benefit of either \$5,000, \$10,000, \$15,000 or \$20,000	
Dependent Coverage	pendent Coverage Enrolled Spouses: 50% of Employee Amount Enrolled Child(ren): 25% of Employee Amount	
Premiums	Issue Age – will not increase due to an insured aging	
Age Reductions	Benefits reduce 50% of coverage amount at age 70	
Evidence of Insurability	Not Required; Annual Enrollment	
Age Limits	Spouse premiums based on Employee Age; Children: Birth to age 26	
Portability	Included, without Evidence of Insurability	

Employees: Monthly Rates							
Employee Coverage	Under Age 30	Age 30-39	Age 40-49	Age 50-59	Age 60-69	Age 70+	
\$5,000	\$4.48	\$6.07	\$10.80	\$19.23	\$29.30	\$55.20	
\$10,000	\$7.58	\$10.57	\$19.50	\$35.33	\$54.25	\$104.15	
\$15,000	\$10.68	\$15.07	\$28.20	\$51.43	\$79.20	\$153.10	
\$20,000	\$13.78	\$19.57	\$36.90	\$67.53	\$104.15	\$202.05	
		Spous	es: Monthly R	ates			
Spouse Coverage	Under Age 30	Age 30-39	Age 40-49	Age 50-59	Age 60-69	Age 70+	
\$2,500	\$2.83	\$3.72	\$6.35	\$11.08	\$16.72	\$30.63	
\$5,000	\$4.38	\$5.97	\$10.70	\$19.13	\$29.20	\$55.10	
\$7,500	\$5.93	\$8.22	\$15.05	\$27.18	\$41.67	\$79.58	
\$10,000	\$7.48	\$10.47	\$19.40	\$35.23	\$54.15	\$104.05	
	Child(ren): Cost Included with Employee Election/Premiums						

Child(ren): Cost Included with Employee Election/Premiums

The policy has exclusions and limitations that may impact the eligibility for or entitlement to benefits under each covered condition. There are limitations & special requirements for each condition. See the certificate of coverage or contact your sales representative for full details. • We will not pay benefits for the First Occurrence of a Critical Illness for which this Plan paid benefits. By related we mean either: (a) both Critical Illness are contained within the Cancer Related Conditions category; or (b) both Critical Illnesses are contained within the Vascular Conditions category. • We will not pay benefits for a second occurrence (recurrence) of a Critical Illness unless the Covered Person has not exhibited symptoms or received care or treatment for that Critical Illness for at least 12 months in a row prior to the recurrence. For purposes of this exclusion, care or treatment does not include: (1) preventive medications in the absence of disease; and (2) routine scheduled follow-up visits to a Doctor. • We do not pay for a third or later occurrence of a critical Illness. • First & second occurrence refers to the first & second time an insured experiences or is diagnosed with a covered critical illness while covered under Guardian Critical Illness insurance. • A pre-existing condition includes any condition for which an employee, in the specified period of time prior to coverage in this plan, consults with a physician, receives treatment, or takes prescribed drugs. Please refer to the plan documents for specific time periods. • If the plan is new (not transferred): During the exclusion period, this critical illness plan does not pay charges relating to a preexisting condition. If this plan is transferred from another insurance carrier, the time an insured is



critical illness plan does not pay charges relating to a preexisting condition. If this plan is transferred from another insurance carrier, the time an insured is covered under that plan will count toward satisfying Guardian's pre-existing condition limitation period. Please refer to the plan details for specific time periods. State variations may apply. • We do not pay benefits for charges relating to a covered person: taking part in any war or act of war (including service in the armed forces), committing a felony or taking part in any riot or other civil disorder or intentionally injuring themselves or attempting suicide while sane, or insane. • In order to be eligible for coverage: Employees must be legally working: (a) in the United States or (b) outside the United States, for a US based employer, in a country or region approved by Guardian. • Employees must be working full-time on the effective date of coverage; otherwise, coverage becomes effective after the completion of the specific waiting period. • Evidence of Insurability is required for all late enrollees. Benefit increases may require underwriting. • This coverage will not be effective until approved by a Guardian underwriter. This proposal is subject to satisfactory financial evaluation. Please refer to certificate of coverage for full plan description; plan documents are the final arbiter of coverage.

^{*}The services, exclusions, and limitations listed above do not constitute a contract and are a summary only. The Guardian plan documents are the final arbiter of coverage. This document is a summary of the major features of the referenced insurance coverage. It is intended for illustrative purposes only and does not constitute a contract. The insurance plan documents, including the policy and certificate, comprise the contract for coverage. The full plan description, including the benefits and all terms, limitations and exclusions that apply will be contained in your insurance certificate. Coverage terms may vary by state and employer-sponsored plan. The premium amounts reflected in this summary are an approximation; if there is a discrepancy between this amount and the premium deducted from your paycheck, the latter prevails.



Your employer helps to keep your family and finances safe with Life Insurance.

Your life is about those you love and protect. We all want to live a long and happy life but life can be unpredictable, and few things in life are guaranteed. Having life insurance for you and those who depend on you can help by providing financial protection.

Life insurance is not just about final expenses. Depending on your situation, it could take years to financially recover from the loss of an income earner. Life insurance can ease the burden of covering expenses such as:

- Mortgage / rent
- Childcare assistance
- Auto payments
- Education / college tuition
- Legal or medical fees
- Outstanding debts

Good News: Your employer provides Basic Life and AD&D Insurance at no cost to you

The coverage is guarantee issue, which means you won't have to answer any health questions or provided any evidence of insurability.

How it works:

Your plan comes with features and benefits that you can use during your lifetime, including Accelerated Life benefits. Take a moment to review some of the provisions highlighted below.

Can I take my coverage with me if I retire or leave the company?

Yes, you may continue your coverage through direct payment to Guardian.

Does my coverage continue if I become disabled?

If you become totally disabled prior to age 60 and your disability lasts for at least 6 months, you may apply to Guardian to continue your life insurance at no cost to you.

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 pm EST.

Refer to your plan number: 527857



*Availability will vary based on employer-sponsored plan. See your specific plan for details. Guardian Group Life Insurance is underwritten by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. Life Contract# GP-1-R-LB-90, GP-1-R-EOPT-96 Voluntary Life Contract# GP-1-R-ADCL1-00 et al.



Guardian Basic Life and Basic AD&D Insurance: \$20,000

Primary Benefits	Description
Basic Life Benefit Amount	\$20,000
Basic AD&D Benefit Amount	\$20,000 Dismemberment Schedule of Benefits Included
Benefit Reductions	35% at age 65, 65% at age 70, 75% at age 75, 90% at age 80
Waiver of Premium	Premiums will not need to be paid if you are totally disabled; insurance continues until the earlier of age 65 or until you are no longer disabled.
Portability	Allows you to take your term life coverage with you if you terminate employment. If you choose to this option, you may be required to provide evidence of insurability.
Conversion	Allows you to convert your existing Guardian term life coverage to a permanent whole life policy. You will not be required to provide evidence of insurability.
Accelerated Death Benefit	A lump sum benefit up to 75% of your coverage amount is paid to you if you are diagnosed with a terminal condition, as defined by the plan.
Guarantee Issue	\$20,000

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS • In order to be eligible for coverage: Employees must be legally working (a) in the United States or (b) outside the United States, for a U.S. based employer, in a country or region approved by Guardian. • We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date. This two year limitation also applies to any increase in benefit. This exclusion may vary according to state law. • Employees must be working full-time on the effective date of coverage; otherwise, coverage becomes effective after the completion of the specific waiting period. • Evidence of insurability is required for all late enrollees. Benefit increases may require underwriting. • This proposal is subject to satisfactory financial evaluation. • Please refer to certificate of coverage for full plan description; plan documents are the final arbiter of coverage. • In order to be eligible for coverage: Employees must be legally working (a) in the United States or (b) outside the United States, for a US based employer, in a country or region approved by Guardian. • We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date. This two year limitation also applies to any increase in benefit. This exclusion may vary according to state law. • Employees must be working full-time on the effective date of your coverage; otherwise, coverage becomes effective after the completion of the specific waiting period. • Evidence of insurability is required for all late enrollees. Benefit increases will require underwriting. • We pay no Accidental Death benefits for an insured where death of your coverage; otherwise, overage becomes effective after the completion of the specific waiting period. • Evidence of insurability is required for all late enrollees. Benefit increases will require underwriting. • We pay no Accidental Death benefits for an insured where death forces; may vary by state while driving m

^{*}The services, exclusions, and limitations listed above do not constitute a contract and are a summary only. The Guardian plan documents are the final arbiter of coverage. This document is a summary of the major features of the referenced insurance coverage. It is intended for illustrative purposes only and does not constitute a contract. The insurance plan documents, including the policy and certificate, comprise the contract for coverage. The full plan description, including the benefits and all terms, limitations and exclusions that apply will be contained in your insurance certificate. The plan documents are the final arbiter of coverage. Coverage terms may vary by state and employer-sponsored plan.

Voluntary Life and Voluntary AD&D Insurance



Plan Number: 527857

Keep your family and finances safe with Life Insurance.

Your life is about those you love and protect. We all want to live a long and happy life but life can be unpredictable, and few things in life are guaranteed. However, when you have life insurance for you and those who depend on you, you can help by providing financial protection for your family.

Life insurance is not just about final expenses. Depending on your situation, it could take years to financially recover from the loss of an income earner. Life insurance can ease the burden of covering expenses such as:

- Mortgage / rent
- Auto payments
- Legal or medical fees
- Childcare assistance
- Education / college tuition
- Outstanding debts

Why enroll for Life Insurance at work?

Taking advantage of your benefits at work is a smart and affordable way to get the financial protection you want for you and your family. As your life changes, so should your life insurance coverage. You should review your coverage each year. Ask about options to increase your coverage as your life changes – you get married, have a child, or purchase a home.

How it works

Your plan comes with features and benefits that you can use during your lifetime, including Accelerated Life benefits, and a broad array of coverage levels to fit every stage of your life. Take a few minutes to think about how much life insurance you and your family may need.

How much do you need?

A general guideline is to have a policy equal to five to seven times your annual salary:

Multiply 5-7

Annual Salary

Policy Amount

It's never been easier to get the protection you need for yourself, your spouse and your child(ren).

New Hires: You are eligible to enroll within 30 days of your Date of Hire. **Existing Employees**: You may be allowed to make changes at the next scheduled Annual Enrollment for Voluntary Life; however, you will have to satisfy Evidence of Insurability if you previously waived coverage or to increase your coverage.



*Availability will vary based on employer-sponsored plan. See your specific plan for details. Guardian Group Life Insurance is underwritten by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. Life Contract# GP-1-R-LB-90, GP-1-R-EOPT-96 Voluntary Life Contract# GP-1-R-ADCL1-00 et al.

How much coverage should I have?

While your situation is unique, a good rule of thumb is to have coverage equal to five to seven times your annual salary.

Can I take my coverage with me if I retire or leave the company?

Yes, you may continue your coverage through direct payment to Guardian.

Does my coverage continue if I become disabled?

If you become totally disabled prior to age 60 and your disability lasts for at least 6 months, you may apply to Guardian to continue your life insurance at no cost to you.

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 pm EST.



Guardian Voluntary Life and Voluntary AD&D Insurance

Primary Benefits	Description
Voluntary Life Benefit Amount	Choice of \$10,000, \$20,000, \$50,000, \$75,000, \$100,000, \$150,000, \$200,000, \$250,000, \$300,000, \$350,000, \$400,000, \$450,000 or \$500,000
Voluntary AD&D Benefit Amount	Accidental Death Benefit Amount matches Voluntary Life Benefit Amount Dismemberment Schedule of Benefits Included Effective July 1, 2018: Automatically included with all Voluntary Life Elections
Dependent	Employees much purchase Voluntary Life Coverage for themselves in order to purchase Voluntary Life Coverage for their Spouse and/or Child(ren)
Spouse Benefit Amount (Terminates at age 70)	Choice of \$5,000, \$10,000, \$25,000, \$37,500, or \$50,000
Child(ren) Benefit Amount from Birth to 19 (25 if FT Student)	\$5,000 or \$10,000
Benefit Reductions	35% at age 65, 65% at age 70, 75% at age 75, 90% at age 80
Waiver of Premium	If disabled, insurance will continue until age 65 or until no longer disabled
Portability	Included without Evidence of Insurability
Conversion	Included without Evidence of Insurability
Accelerated Death Benefit	75% of the death benefit; minimum of \$10,000; maximum of \$250,000, subject to state limitations
Guarantee Issue	Employee \$150,000, Spouse \$50,000, Child \$10,000

New Hires: You are eligible to enroll within 30 days of your date of hire.

Existing Employees: You may be allowed to make changes at the next scheduled Annual Enrollment for Voluntary Life; however, you will have to satisfy Evidence of Insurability.

Important Enrollment & Payroll Deduction Information:

Premiums for Voluntary life increase in five-year increments. Spouse coverage premium is based on employee age. Coverage for spouse terminates at spouse's age 70. Late entrants and future benefit increases require evidence of insurability.

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS • In order to be eligible for coverage: Employees must be legally working (a) in the United States or (b) outside the United States, for a U.S. based employer, in a country or region approved by Guardian. • We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date. This two year limitation also applies to any increase in benefit. This exclusion may vary according to state law. • Employees must be working full-time on the effective date of coverage; otherwise, coverage becomes effective after the completion of the specific waiting period. • Evidence of insurability is required for all late enrollees. Benefit increases may require underwriting. • This proposal is subject to satisfactory financial evaluation. • Please refer to certificate of coverage for full plan description; plan documents are the final arbiter of coverage. • In order to be eligible for coverage: Employees must be legally working (a) in the United States or (b) outside the United States, for a US based employer, in a country or region approved by Guardian. • We pay no benefits if the insured's death is due to suicide within two years from the insured's original effective date. This two year limitation also applies to any increase in benefit. This exclusion may vary according to state law. • Employees must be working full-time on the effective date of your coverage; otherwise, coverage becomes effective after the completion of the specific waiting period. • Evidence of insurability is required for all late enrollees. Benefit increases will require underwriting. • We pay no Accidental Death benefits for an insured where death of the following: through willfull self-injury; by declared or undered war, act of war, armed aggression, or while a member of armed forces; may vary by state while driving motor vehicle without a current, valid driver's license; while legally intoxicated; while participating in civil disorder or committing a felony; tra

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Guardian Voluntary Life and Voluntary AD&D Insurance

Cost Illustration Table - Monthly Payroll Deductions

EMPLOYEE (Additional Election Options Illustrated on the Following Page)

			<u> </u>			
Age Bracket	\$10,000	\$20,000	\$50,000	\$75,000	\$100,000	\$150,000
< 30	\$0.93	\$1.86	\$4.65	\$6.98	\$9.30	\$13.95
30 - 34	\$1.02	\$2.04	\$5.10	\$7.65	\$10.20	\$15.30
35 - 39	\$1.29	\$2.58	\$6.45	\$9.68	\$12.90	\$19.35
40 - 44	\$1.83	\$3.66	\$9.15	\$13.73	\$18.30	\$27.45
45 - 49	\$2.73	\$5.46	\$13.65	\$20.48	\$27.30	\$40.95
50 - 54	\$5.07	\$10.14	\$25.35	\$38.03	\$50.70	\$76.05
55 - 59	\$8.04	\$16.08	\$40.20	\$60.30	\$80.40	\$120.60
60 - 64	\$9.66	\$19.32	\$48.30	\$72.45	\$96.60	\$144.90
Age Bracket	\$6,500	\$13,000	\$32,500	\$48,750	\$65,000	\$97,500
65 – 69*	\$10.73	\$21.45	\$53.63	\$80.44	\$107.25	\$160.88
Age Bracket	\$4,000	\$8,000	\$20,000	\$30,000	\$40,000	\$60,000
70-74*	\$15.46	\$30.91	\$77.28	\$115.92	\$154.56	\$231.84
Age Bracket	\$2,500	\$5,000	\$12,500	\$18,750	\$25,000	\$37,500
75-79*	\$36.68	\$73.37	\$183.41	\$275.12	\$366.83	\$550.24
Age Bracket	\$1,000	\$2,000	\$5,000	\$7,500	\$10,000	\$15,000
80+*	\$14.67	\$29.35	\$73.37	\$110.05	\$146.73	\$220.10

Important Enrollment & Payroll Deduction Information:

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 pm EST. Refer to your member ID (social security number) and your plan number: **527857**

Limitations and Exclusions – A summary of Plan Limitations and Exclusions for Life and AD&D Coverage:

You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period. Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations. Please refer to certificate of coverage booklet for full plan description. Accelerated Life Benefit is not paid to an employee under the following circumstances: one who is required by law to use the benefit to pay creditors; is required by court order to pay the benefit to another person; is required by a government agency to use the payment to receive a government benefits; or loses his or her group coverage before an accelerated benefit is paid.

We pay no benefits if the insured's death is due to suicide within 2 years from the insured's original effective date. This 2-year limitation also applies to any increase in benefit. This exclusion may vary according to state law. GR-I-R-EOPT-96

^{*} Age Reduction have been applied to coverage volumes shown for these age brackets. Premiums for Voluntary Life increase in five-year increments. Late entrants and future benefit increases require evidence of insurability.



Guardian Voluntary Life and Voluntary AD&D Insurance

Cost Illustration Table - Monthly Payroll Deductions

EMPLOYEE (continued from previous page)

Age Bracket	\$200,000	\$250,000	\$300,000	\$350,000	\$400,000	\$450,000	\$500,000
< 30	\$18.60	\$23.25	\$27.90	\$32.55	\$37.20	\$41.85	\$46.50
30 - 34	\$20.40	\$25.50	\$30.60	\$35.70	\$40.80	\$45.90	\$51.00
35 - 39	\$25.80	\$32.25	\$38.70	\$45.15	\$51.60	\$58.05	\$64.50
40 - 44	\$36.60	\$45.75	\$54.90	\$64.05	\$73.20	\$82.35	\$91.50
45 - 49	\$54.60	\$68.25	\$81.90	\$95.55	\$109.20	\$122.85	\$136.50
50 - 54	\$101.40	\$126.75	\$152.10	\$177.45	\$202.80	\$228.15	\$253.50
55 - 59	\$160.80	\$201.00	\$241.20	\$281.40	\$321.60	\$361.80	\$402.00
60 - 64	\$193.20	\$241.50	\$289.80	\$338.10	\$386.40	\$434.70	\$483.00
Age Bracket	\$130,000	\$162,500	\$195,000	\$227,500	\$260,000	\$292,500	\$325,000
65 – 69*	\$214.50	\$268.13	\$321.75	\$375.38	\$429.00	\$482.63	\$536.25
Age Bracket	\$80,000	\$100,000	\$120,000	\$140,000	\$160,000	\$180,000	\$200,000
70-74*	\$309.12	\$386.40	\$463.68	\$540.96	\$618.24	\$695.52	\$772.80
Age Bracket	\$50,000	\$62,500	\$75,000	\$87,500	\$100,000	\$112,500	\$125,000
75-79*	\$733.65	\$917.06	\$1,100.48	\$1,283.89	\$1,467.30	\$1,650.71	\$1,834.13
Age Bracket	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
80+*	\$293.46	\$366.83	\$440.19	\$513.56	\$586.92	\$660.29	\$733.65

Important Enrollment & Payroll Deduction Information:

* Age Reduction have been applied to coverage columes shown for these age brackets. Premiums for Voluntary life increase in five-year increments.

Late entrants and future benefit increases require evidence of insurability.

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 pm EST. Refer to your member ID (social security number) and your plan number: **527857**

Limitations and Exclusions – A summary of Plan Limitations and Exclusions for Life and AD&D Coverage:

You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period. Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations. Please refer to certificate of coverage booklet for full plan description. Accelerated Life Benefit is not paid to an employee under the following circumstances: one who is required by law to use the benefit to pay creditors; is required by court order to pay the benefit to another person; is required by a government agency to use the payment to receive a government benefits; or loses his or her group coverage before an accelerated benefit is paid.

We pay no benefits if the insured's death is due to suicide within 2 years from the insured's original effective date. This 2-year limitation also applies to any increase in benefit. This exclusion may vary according to state law. GR-I-R-EOPT-96

Guardian Voluntary Life and Voluntary AD&D Insurance

Cost Illustration Table – Monthly Payroll Deductions

SPOUSE

Age Bracket	\$5,000	\$10,000	\$25,000	\$37,500	\$50,000
< 30	\$0.47	\$0.93	\$2.33	\$3.49	\$4.65
30 - 34	\$0.5 I	\$1.02	\$2.55	\$3.83	\$5.10
35 - 39	\$0.65	\$1.29	\$3.23	\$4.84	\$6.45
40 - 44	\$0.92	\$1.83	\$4.58	\$6.86	\$9.15
45 - 49	\$1.37	\$2.73	\$6.83	\$10.24	\$13.65
50 - 54	\$2.54	\$5.07	\$12.68	\$19.01	\$25.35
55 - 59	\$4.02	\$8.04	\$20.10	\$30.15	\$40.20
60 - 64	\$4.83	\$9.66	\$24.15	\$36.23	\$48.30
Age Bracket	\$3,250	\$6,500	\$16,250	\$24,375	\$32,500
65 – 69*	\$5.36	\$10.73	\$26.81	\$40.22	\$53.63

CHILDREN

Monthly Premiums				
\$5,000 \$1.15				
\$10,000	\$2.30			

Need Assistance?

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 pm EST.

Important Enrollment and Payroll Deduction Information:

* Age Reduction have been applied to coverage volumes shown for these age brackets.

You must purchase Voluntary Life coverage for yourself to purchase Voluntary Life coverage for your Spouse and/or Child(ren).

Premiums for Voluntary Life increase in five-year increments.

Spouse coverage premium is based on employee age. Coverage for spouse terminates at spouse's age 70. Late entrants and future benefit increases require evidence of insurability.

Limitations and Exclusions – A summary of Plan Limitations and Exclusions for Life and AD&D Coverage:

You must be working full-time on the effective date of your coverage; otherwise, your coverage becomes effective after you have completed a specific waiting period. Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding one year; or (b) in an area under travel warning by the US Department of State. Subject to state specific variations. Please refer to certificate of coverage booklet for full plan description. Accelerated Life Benefit is not paid to an employee under the following circumstances: one who is required by law to use the benefit to pay creditors; is required by court order to pay the benefit to another person; is required by a government agency to use the payment to receive a government benefits; or loses his or her group coverage before an accelerated benefit is paid. We pay no benefits if the insured's death is due to suicide within 2 years from the insured's original effective date. This 2-year limitation also applies to any increase in benefit. This exclusion may vary according to state law. GR-I-R-EOPT-96