



CATAWBA VALLEY HEALTH SYSTEM

Exceptional Healthcare. Every Person. Every Time.



Voluntary Benefits

Voluntary Benefits





Allstate BENEFITS

Protection for accidental injuries on- and off-the-job, 24 hours a day

Accident Insurance

Today, active lifestyles in or out of the home may result in bumps, bruises and sometimes breaks. Getting the right treatment can be vital to recovery, but it can also be expensive. And if an accident keeps you away from work during recovery, the financial worries can grow quickly.

Most major medical insurance plans only pay a portion of the bills. Our coverage can help pick up where other insurance leaves off and provide cash to help cover the expenses.

With Accident insurance from Allstate Benefits, you can gain the advantage of financial support, thanks to the cash benefits paid directly to you. You also gain the financial empowerment to seek the treatment needed to be on the mend.

Here's How It Works

Our coverage pays you cash benefits that correspond with hospital and intensive care confinement. Your plan may also include coverage for a variety of occurrences, such as: dismemberment; dislocation or fracture; ambulance services; physical therapy and more. The cash benefits can be used to help pay for deductibles, treatment, rent and more.

Meeting Your Needs

- Guaranteed Issue, meaning no medical questions to answer
- Benefits are paid directly to you unless otherwise assigned
- Pays in addition to other insurance coverage
- Coverage also available for your dependents
- Premiums are affordable and can be conveniently payroll deducted
- Coverage may be continued; refer to your certificate for details

With Allstate Benefits, you can protect your finances against life's slips and falls. **Are you in Good Hands? You can be.**

*National Safety Council, Injury Facts®, 2017 Edition

DID YOU KNOW ?

The number of injuries suffered by workers in one year, both on- and off-the-job, includes:*

ON-THE-JOB (in millions)



Work
4.4

OFF-THE-JOB (in millions)



Home
9.2



Non-Auto
4.0



Auto
2.2



Meet Daniel & Sandy

Daniel and Sandy are like most active couples: they enjoy the outdoors and a great adventure. They have seen their share of bumps, bruises and breaks. Sandy knows an accidental injury could happen to either of them. Most importantly, she worries about how they will pay for it.

Here is what weighs heavily on her mind:

- Major medical will only pay a portion of the expenses associated with injury treatments
- They have copays they are responsible for until they meet their deductible
- If they miss work because of an injury, they must cover the bills, rent/mortgage, groceries and their child's education
- If they need to seek treatment not available locally, they will have to pay for it



Daniel's story of injury and treatment turned into a happy ending, because he had supplemental Accident Insurance to help with expenses.



CHOOSE

Daniel and Sandy choose benefits to help protect their family if they suffer an accidental injury.



USE

Daniel was playing a pick-up game of basketball with his friends when he went up for a jump-shot and, on his way back down, twisted his foot and ruptured his Achilles tendon.

Here's Daniel's treatment path:

- Taken by ambulance to the emergency room
- Examined by a doctor and X-rays were taken
- Underwent surgery to reattach the tendon
- Was visited by his doctor and released after a one-day stay in the hospital
- Had to immobilize his ankle for 6 weeks
- Was seen by the doctor during a follow-up visit and sent to physical therapy to strengthen his leg and improve his mobility

Daniel would go online after each of his treatments to file claims. The cash benefits were direct deposited into his bank account.

Daniel is back playing basketball and enjoying life.



CLAIM

Daniel's Accident claim paid cash benefits for the following:

Ambulance Services
Medicine
Medical Expenses (Emergency Room and X-rays)
Initial Hospital Confinement
Hospital Confinement
Tendon Surgery
General Anesthesia
Accident Follow-Up Treatment
Physical Therapy (3 days/week)

For a listing of benefits and benefit amounts, see your company's rate insert.

Using your cash benefits

Cash benefits provide you with options, because you decide how to use them.



Finances

Can help protect HSAs, savings, retirement plans and 401(k)s from being depleted.



Travel

Can help pay for expenses while receiving treatment in another city.



Home

Can help pay the mortgage, continue rental payments, or perform needed home repairs for after care.



Expenses

Can help pay your family's living expenses such as bills, electricity, and gas.



MyBenefits: 24/7 Access allstatebenefits.com/mybenefits

An easy-to-use website that offers 24/7 access to important information about your benefits. Plus, you can submit and check your claims (including claim history), request your cash benefit to be direct deposited, make changes to personal information, and more.

Dependent Eligibility

Coverage may include you, your spouse and your children.

¹Multiple dismemberments, dislocations or fractures are limited to the amount shown in the rate insert.

²Up to three times per covered person, per accident.

³Two or more surgeries done at the same time are considered one operation.

⁴Paid for each day a room charge is incurred, up to 30 days for each covered person per continuous period of rehabilitation unit confinement, for a maximum of 60 days per calendar year.

⁵Two treatments per covered person, per accident.

*Must begin or be received within 180 days of the accident.

**Within 3 days after the accident.

Benefits (subject to maximums as listed on the attached rate insert)

BASE POLICY BENEFITS

Accidental Death*

Common Carrier Accidental Death - riding as a fare-paying passenger on a scheduled common-carrier

Dismemberment* - amount paid depends on type of dismemberment. See Injury Benefit Schedule in rate insert

Dislocation or Fracture - amount paid depends on type of dislocation or fracture. See Injury Benefit Schedule in rate insert

Initial Hospitalization Confinement - initial hospitalization after the effective date

Hospital Confinement - up to 90 days for any one injury

Intensive Care - up to 90 days for each period of continuous confinement

Ambulance Services - transfer to or from hospital by ambulance service

Medical Expenses - expenses incurred for medical or surgical treatment. Expenses are limited to physician fees, X-rays and emergency room services. Includes treatment for dental repair to sound natural teeth if repair is diagnosed by a dentist as necessary and as a result of injury

Outpatient Physician's Treatment - treatment outside the hospital for any cause. Payable up to 2 visits per covered person, per calendar year and a maximum of 4 visits per calendar year if dependents are covered

BENEFIT ENHANCEMENT RIDER

Hospital Admission** - first hospital confinement occurring during a calendar year, and 12 months after rider effective date. Payable when a benefit has been paid under the Hospital Confinement Benefit in the base policy

Lacerations** - treatment for one or more lacerations (cuts)

Burns** - treatment for one or more burns, other than sunburns

Skin Graft - receiving a skin graft for which a benefit is paid under the Burns benefit

Brain Injury Diagnosis** - first diagnosis of concussion, cerebral laceration, cerebral contusion or intracranial hemorrhage within three days of an accident. Must be diagnosed within 30 days after the accident by CT Scan, MRI, EEG, PET scan or X-ray

Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI)* - must first be treated by a physician within 30 days after the accident

Paralysis** - spinal cord injury resulting in complete/permanent loss of use of two or more limbs for at least 90 days

Coma with Respiratory Assistance - unconsciousness lasting 7 or more days; intubation required. Medically induced comas excluded

Open Abdominal or Thoracic Surgery^{3, **}

Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery^{3, *} - surgery received for torn, ruptured, or severed tendon, ligament, rotator cuff or knee cartilage; pays the reduced amount shown for arthroscopic exploratory surgery

Ruptured Disc Surgery^{3, *} - diagnosis and surgical repair to a ruptured disc of the spine by a physician

Eye Surgery - surgery or removal of a foreign object by a physician

General Anesthesia* - payable only if the policy Surgery benefit is paid

Blood and Plasma** - transfusion after an accident

Appliance - physician-prescribed wheelchair, crutches or walker to help with personal locomotion or mobility

Medical Supplies - purchased over-the-counter medical supplies. Payable only if the policy Medical Expenses benefit is paid

Medicine - purchased prescription or over-the-counter medicines. Payable only if the policy Medical Expenses benefit is paid

Prosthesis* - physician-prescribed prosthetic arm, leg, hand, foot or eye lost as a result of an accident. Payable only if a benefit is paid for loss of arm, leg, hand, foot or eye under the Dismemberment benefit

Physical Therapy - one treatment per day; maximum of 6 treatments per accident. Chiropractic services are excluded. Not payable for same visit for which Accident Follow-Up Treatment benefit is paid. Must take place no longer than 6 months after accident

Rehabilitation Unit⁴ - must be hospital-confined due to an injury immediately prior to being transferred to rehab. Not payable for the days on which the Hospital Confinement benefit is paid

Non-Local Transportation² - treatment obtained at a non-local hospital or freestanding treatment center more than 100 miles from your home. Does not cover ambulance or physician's office or clinic visits for services other than treatment

Family Member Lodging - one adult family member to be with you while you are confined in a non-local hospital or freestanding treatment center. Not payable if family member lives within 100 miles one-way of the treatment facility. Up to 30 days per accident. Only payable if the Non-Local Transportation benefit is paid

Post-Accident Transportation - after a three-day hospital stay more than 250 miles from your home, with a flight on a common carrier to return home. Payable only if a benefit is paid for Hospital Confinement

Accident Follow-Up Treatment⁵ - must take place no longer than 6 months after the accident. Payable only if the policy Medical Expenses benefit is paid. Not payable for the same visit for which the Physical Therapy benefit is paid

Group Voluntary Accident (GVAP1)

On- and Off-the-Job Accident Insurance from Allstate Benefits

BENEFIT AMOUNTS

Benefits are paid once per accident unless otherwise noted here or in the brochure

BASE POLICY BENEFITS		PLAN 1	PLAN 2
Accidental Death	Employee	\$40,000	\$60,000
	Spouse	\$20,000	\$30,000
	Children	\$10,000	\$15,000
Common Carrier Accidental Death (fare-paying passenger)	Employee	\$200,000	\$300,000
	Spouse	\$100,000	\$150,000
	Children	\$50,000	\$75,000
Dismemberment ¹	Employee	\$40,000	\$60,000
	Spouse	\$20,000	\$30,000
	Children	\$10,000	\$15,000
Dislocation or Fracture ¹	Employee	\$4,000	\$6,000
	Spouse	\$4,000	\$6,000
	Children	\$4,000	\$6,000
Initial Hospitalization Confinement (pays once)		\$1,000	\$1,500
Hospital Confinement (pays daily)		\$200	\$300
Intensive Care (pays daily)		\$400	\$600
Ambulance Services	Ground	\$200	\$300
	Air	\$600	\$900
Medical Expenses (pays up to amount shown)		\$500	\$750
Outpatient Physician's Treatment (pays per visit)		\$50.00	\$75.00
BENEFIT ENHANCEMENT RIDER		PLAN 1	PLAN 2
Hospital Admission (pays once/year)		\$500	\$1,000
Lacerations (pays once/year)		\$50	\$100
Burns	< 15% body surface	\$100	\$200
	15% or more	\$500	\$1,000
Skin Graft (% of Burns Benefit)		50%	50%
Brain Injury Diagnosis (pays once)		\$150	\$300
Computed Tomography (CT) Scan and Magnetic Resonance Imaging (MRI) (pays once/accident/year)		\$50	\$100
Paralysis (pays once)	Paraplegia	\$7,500	\$15,000
	Quadriplegia	\$15,000	\$30,000
Coma with Respiratory Assistance (pays once)		\$10,000	\$20,000
Open Abdominal or Thoracic Surgery		\$1,000	\$2,000
Tendon, Ligament, Rotator Cuff or Knee Cartilage Surgery	Surgery	\$500	\$1,000
	Exploratory	\$150	\$300
Ruptured Disc Surgery		\$500	\$1,000
Eye Surgery		\$100	\$200
General Anesthesia		\$100	\$200
Blood and Plasma		\$300	\$600
Appliance		\$125	\$250
Medical Supplies		\$5	\$10
Medicine		\$5	\$10
Prosthesis	1 device	\$500	\$1,000
	2 or more devices	\$1,000	\$2,000
Physical Therapy (pays daily)		\$30	\$60
Rehabilitation Unit (pays daily)		\$100	\$200
Non-Local Transportation		\$400	\$800
Family Member Lodging (pays daily)		\$100	\$200
Post-Accident Transportation (pays once/year)		\$200	\$400
Accident Follow-Up Treatment (pays daily)		\$50	\$100

¹Up to amount shown; see Injury Benefit Schedule on reverse. Multiple losses from same injury pay only up to amount shown above.

PLAN 1 PREMIUMS

MODE	EE	EE + SP	EE + CH	F
Bi-Weekly	\$8.32	\$16.36	\$19.76	\$24.34

PLAN 2 PREMIUMS

MODE	EE	EE + SP	EE + CH	F
Bi-Weekly	\$12.54	\$25.20	\$30.28	\$37.30

Issue ages: 18 and over if actively at work

EE=Employee; EE + SP = Employee + Spouse;
EE + CH = Employee + Child(ren); F = Family

Injury Benefit Schedule is on reverse

FOR HOME OFFICE USE ONLY - GVAP1

Opt 1 - 2.0U Base; 1.0U BER; FFDB included

Opt 2 - 3.0U Base; 2.0U BER; FFDB included

ABQ V02.13.2019 Rate Insert Creation Date: 3/7/2019

INJURY BENEFIT SCHEDULE

Benefit amounts for coverage and one occurrence are shown below.

[†]Covered spouse gets 50% of the amount shown and children 25%.

^{††}Covered spouse and children get 100% of the amount shown.

COMPLETE DISLOCATION ^{††}	PLAN 1	PLAN 2
Hip joint	\$4,000	\$6,000
Knee or ankle joint ³ , bone or bones of the foot ³	\$1,600	\$2,400
Wrist joint	\$1,400	\$2,100
Elbow joint	\$1,200	\$1,800
Shoulder joint	\$800	\$1,200
Bone or bones of the hand ³ , collarbone	\$600	\$900
Two or more fingers or toes	\$280	\$420
One finger or toe	\$120	\$180
COMPLETE, SIMPLE OR CLOSED FRACTURE ^{††}	PLAN 1	PLAN 2
Hip, thigh (femur), pelvis ⁴	\$4,000	\$6,000
Skull ⁴	\$3,800	\$5,700
Arm, between shoulder and elbow (shaft), shoulder blade (scapula), leg (tibia or fibula)	\$2,200	\$3,300
Ankle, knee cap (patella), forearm (radius or ulna), collarbone (clavicle)	\$1,600	\$2,400
Foot ⁴ , hand or wrist ⁴	\$1,400	\$2,100
Lower jaw ⁴	\$800	\$1,200
Two or more ribs, fingers or toes, bones of face or nose	\$600	\$900
One rib, finger or toe, coccyx	\$280	\$420
LOSS [†]	PLAN 1	PLAN 2
Life or both eyes, hands, arms, feet, or legs, or one hand or arm and one foot or leg	\$40,000	\$60,000
One eye, hand, arm, foot, or leg	\$20,000	\$30,000
One or more entire toes or fingers	\$4,000	\$6,000

³Knee joint (except patella). Bone or bones of the foot (except toes). Bone or bones of the hand (except fingers). ⁴Pelvis (except coccyx). Skull (except bones of face or nose). Foot (except toes). Hand or wrist (except fingers). Lower jaw (except alveolar process).



For use in enrollments situated in: NC. This rate insert is part of the approved brochure or form ABJ29977-5; it is not to be used on its own.

This material is valid as long as information remains current, but in no event later than March 7, 2022. Allstate Benefits is the marketing name used by American Heritage Life Insurance Company (Home Office, Jacksonville, FL), a subsidiary of The Allstate Corporation. ©2019 Allstate Insurance Company. www.allstate.com or allstatebenefits.com.

CERTIFICATE SPECIFICATIONS

Conditions and Limits

When an injury results in a covered loss within 90 days (unless otherwise stated on the Benefits page) from the date of an accident and is diagnosed by a physician, Allstate Benefits will pay benefits as stated. Treatment must be received in the United States or its territories.

Eligibility

Your employer decides who is eligible for your group (such as length of service and hours worked each week).

Dependent Eligibility/Termination

Coverage may include you, your spouse and your children. Coverage for children ends when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent. Spouse coverage ends upon valid decree of divorce or your death.

When Coverage Ends

Coverage under the policy and riders (if included) ends on the earliest of: the date the policy or certificate is canceled; the last day of the period for which you made any required contributions; the last day you are in active employment, except as provided under the Temporarily Not Working provision; the date you are no longer in an eligible class; or the date your class is no longer eligible.

Continuing Your Coverage

You may be eligible to continue coverage when coverage under the policy ends. Refer to your Certificate of Insurance for details.

EXCLUSIONS AND LIMITATIONS

Exclusions and Limitations for the Base Policy and Benefit Enhancement Rider: Benefits are not paid for: injury incurred before the effective date; act of war or participation in a riot, insurrection or rebellion; suicide or attempt at suicide; injury while under the influence of alcohol or any narcotic, unless taken upon the advice of a physician; any bacterial infection (except pyogenic infections from an accidental cut or wound); participation in aeronautics unless a fare-paying passenger on a licensed common-carrier aircraft; committing or attempting an assault or felony; driving in any race or speed test or testing any vehicle on any racetrack or speedway; hernia, including complications; serving as an active member of the Military, Naval, or Air Forces of any country or combination of countries.

This brochure is for use in enrollments situated in NC and is incomplete without the accompanying rate insert.

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Group Accident benefits are provided under policy form GVAP1, or state variations thereof. Benefit Enhancement Rider benefits are provided under rider form GVAPBER, or state variations thereof.

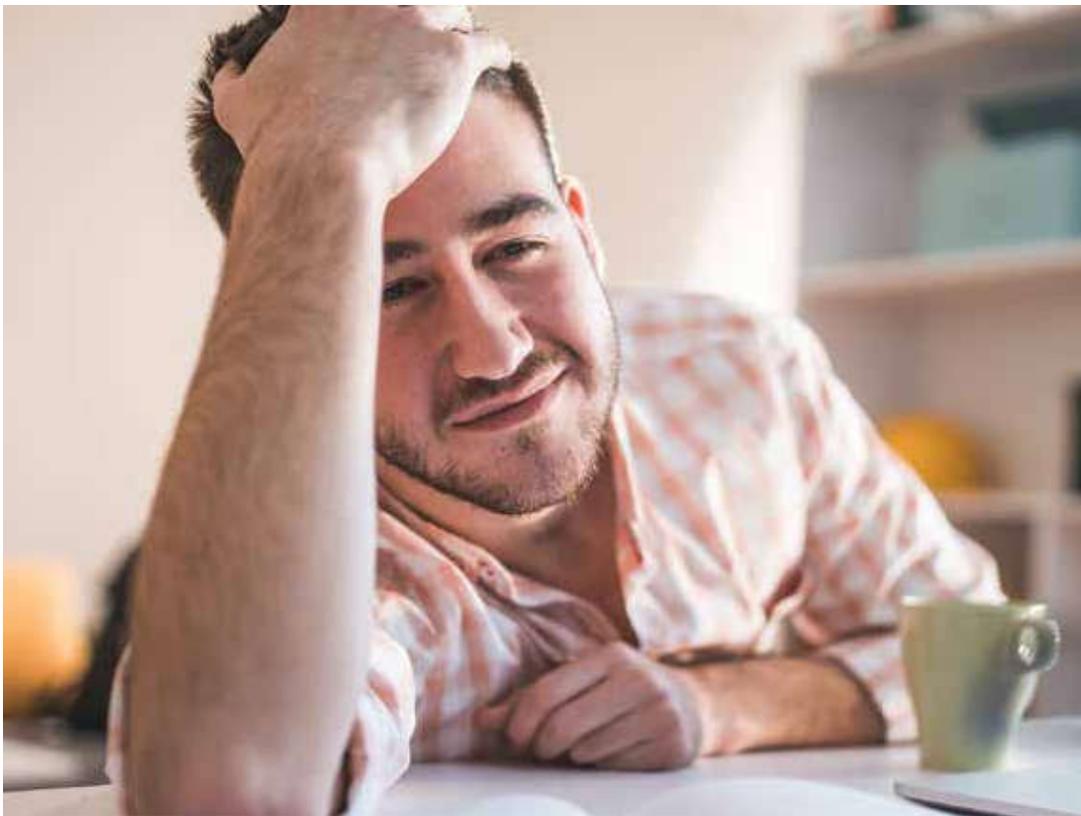
The coverage provided is limited benefit supplemental accident insurance. The policy is not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer's Guide available from Allstate Benefits. There may be instances when a law requires that benefits under this coverage be paid to a third party, rather than to you. If you or a dependent have coverage under Medicare, Medicaid, or a state variation, please refer to your health insurance documents to confirm whether assignments or liens may apply.

This is a brief overview of the benefits available under the group policy underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). Details of the coverage, including exclusions and other limitations are included in the certificates issued. For additional information, you may contact your Allstate Benefits Representative.

The coverage does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.



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www.allstate.com or
allstatebenefits.com



Allstate BENEFITS

Protection when faced with a critical illness diagnosis and you need treatment

Critical Illness Insurance

No one is ever really prepared for a life-altering critical illness diagnosis. The whirlwind of appointments, tests, treatments and medications can add to your stress levels.

The treatment to recovery is vital, but it can also be expensive. Your medical coverage may only cover some of the costs associated with treatment. You're still responsible for deductibles and coinsurance. If treatment keeps you out of work, the financial worries can grow quickly and stress levels may rise.

Critical Illness coverage helps provide financial support if you are diagnosed with a covered critical illness. With the expense of treatment often high, seeking the treatment you need could seem like a financial burden. When a diagnosis occurs, you need to be focused on getting better and taking control of your health, not stressing over financial worries.

Here's How It Works

You choose benefits to protect yourself and any family members if diagnosed with a critical illness. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on the percentage payable for the condition.

Meeting Your Needs

- Guaranteed Issue coverage with a Pre-Existing Condition Limitation*
- Coverage available for dependents
- Covered dependents receive 50% of your Basic-Benefit Amount
- Benefits paid regardless of any other medical or disability plan coverage
- Premiums are affordable and conveniently payroll deducted
- Coverage may be continued; refer to your certificate for details
- 25% of your Basic-Benefit Amount is paid for Advanced Alzheimer's Disease and Advanced Parkinson's Disease

With Allstate Benefits, you can make treatment decisions without putting your finances at risk. **Practical benefits for everyday living.**®

*Please refer to the Exclusions and Limitations section of this brochure.

†https://www.cdc.gov/heartdisease/heart_attack.htm ††<https://www.cdc.gov/stroke/facts.htm>

DID YOU KNOW ?



Every 40 seconds, an American will suffer a heart attack†



Every 40 seconds, someone in the U.S. has a stroke††



Meet Ashley

Ashley is like any single parent who has been diagnosed with a critical illness. She's worried about her future, her children and how they will cope with her treatments. Most importantly, she worries about how she will pay for it all.

Here is what weighs heavily on her mind:

- Major medical only pays a portion of the expenses associated with my treatment
- I have copays I am responsible for until I meet my deductible
- If I am not working due to my treatments, I must cover my bills, rent/mortgage, groceries and my children's education
- If the right treatment is not available locally, I will have to travel to get the treatment I need



Ashley's story of diagnosis and treatment turned into a happy ending, because she had supplemental Critical Illness Insurance to help with expenses.



CHOOSE

Ashley chooses Critical Illness benefits to help protect herself and her children, if they are diagnosed with a critical illness.



USE

During Ashley's annual wellness exam, her doctor noticed an irregular heartbeat. She underwent an electrocardiogram (EKG) test and stress test, which confirmed she had a blockage in one of her coronary arteries.

Here's Ashley's treatment path:

- Ashley has her annual wellness exam
- Her doctor notices an abnormality in her heartbeat; tests are performed and she is diagnosed with coronary artery disease
- After visits with doctors, surgeons and an anesthesiologist, Ashley undergoes surgery
- Surgery is performed to remove the blockage with a bypass graft. She is visited by her doctor during a 4-day hospital stay and released
- Ashley follows her doctor required treatment during a 2-month recovery period, and has regular doctor office visits

Ashley is doing well and is on the road to recovery.



CLAIM

Ashley's Critical Illness claim paid her cash benefits for the following:

Wellness

Coronary Artery Bypass Surgery

The cash benefits were direct deposited into her bank account.

For a listing of benefits and benefit amounts, see pages 3 and 4.

Using your cash benefits

Cash benefits provide you with options, because you decide how to use them.



Finances

Can help protect HSAs, savings, retirement plans and 401(k)s from being depleted.



Travel

Can help pay for expenses while receiving treatment in another city.



Home

Can help pay the mortgage, continue rental payments, or perform needed home repairs for after care.



Expenses

Can help pay your family's living expenses such as bills, electricity, and gas.



MyBenefits: 24/7 Access allstatebenefits.com/mybenefits

An easy-to-use website that offers 24/7 access to important information about your benefits. Plus, you can submit and check your claims (including claim history), request your cash benefit to be direct deposited, make changes to personal information, and more.

Wellness - Biopsy for skin cancer; Bone Marrow Testing; Blood tests for triglycerides, CA15-3 (breast cancer), CA125 (ovarian cancer), CEA (colon cancer), PSA (prostate cancer); Chest X-ray; Colonoscopy; Doppler screening for carotids or peripheral vascular disease; Echocardiogram; EKG; Flexible sigmoidoscopy; Hemoccult stool analysis; HPV (Human Papillomavirus) Vaccination; Lipid panel (total cholesterol count); Mammography, including Breast Ultrasound; Pap Smear, including ThinPrep Pap Test; Serum Protein Electrophoresis (test for myeloma); Stress test on bike or treadmill; Thermography; Ultrasound screening for abdominal aortic aneurysms.

Benefits (subject to maximums as listed on page 4)

Benefit paid upon diagnosis of one of the following conditions

INITIAL CRITICAL ILLNESS BENEFITS*

Heart Attack - the death of a portion of the heart muscle due to inadequate blood supply. Established (old) myocardial infarction and cardiac arrest are not covered

Stroke - the death of a portion of the brain producing neurological sequelae including infarction of brain tissue, hemorrhage and embolization from an extra-cranial source. Transient ischemic attacks (TIAs), head injury, chronic cerebrovascular insufficiency and reversible ischemic neurological deficits are not covered

Major Organ Transplant - transplant of heart, lung, liver, pancreas or kidneys. Transplanted organ must come from a human donor

End Stage Renal Failure - irreversible failure of both kidneys, resulting in peritoneal dialysis or hemodialysis. Renal failure caused by traumatic events, including surgical trauma, are not covered

Coronary Artery Bypass Surgery - to correct narrowing or blockage of one or more coronary arteries with bypass graft. Abdominal aortic bypass, balloon angioplasty, laser embolectomy, atherectomy, stent placement and non-surgical procedures are not covered

Waiver of Premium (employee only) - premiums waived if disabled for 90 consecutive days due to a critical illness

CANCER CRITICAL ILLNESS BENEFITS*

Invasive Cancer - malignant tumor with uncontrolled growth, including Leukemia and Lymphoma. Carcinoma in situ, non-invasive or metastasized skin cancer and early prostate cancer are not covered

Carcinoma In Situ - non-invasive cancer, including early prostate cancer (stages A, I, II) and melanoma that has not invaded the dermis. Other skin malignancies, pre-malignant lesions (such as intraepithelial neoplasia), benign tumors and polyps are not covered

SUPPLEMENTAL CRITICAL ILLNESS I BENEFITS*

Advanced Alzheimer's Disease - must exhibit impaired memory and judgment and be certified unable to perform at least three daily activities¹ without adult assistance

Advanced Parkinson's Disease - must exhibit two or more of the following: muscle rigidity, tremor, or bradykinesia (slowness in physical and mental responses); and be certified unable to perform at least three daily activities¹ without adult assistance

Benign Brain Tumor - a non-cancerous tumor confirmed by biopsy or surgical excision, or specific neuroradiological examination, and persistent neurological deficits including but not limited to: loss of vision; loss of hearing; or balance disruption. Tumors of the skull, pituitary adenomas, and germinomas are not covered

Coma - unconsciousness due to sickness or traumatic brain injury, with severe neurologic dysfunction and unresponsiveness for 14 consecutive days. Requires significant medical intervention and life support. Medically induced Coma is not covered

Complete Blindness - irreversible reduction of sight in both eyes

Complete Loss of Hearing - total and irreversible loss of hearing in both ears

Paralysis - total and permanent loss of voluntary movement or motor function of 2 or more limbs

Occupational HIV - exposure to HIV must be accidental and during normal occupational duties. Must not have previously tested positive for HIV

ADDITIONAL BENEFIT

Wellness Benefit - 23 exams. Once per person, per calendar year; see left for list of wellness services and tests

*Benefits paid once per covered person. When all benefits have been used, the coverage terminates. ¹Daily activities include: bathing, dressing, toileting, bladder and bowel continence, transferring and eating.

BENEFIT AMOUNTS

†Covered dependents receive 50% of your benefit amount

INITIAL CRITICAL ILLNESS BENEFITS†	PLAN 1	PLAN 2	PLAN 3
Heart Attack (100%)	\$10,000	\$20,000	\$30,000
Stroke (100%)	\$10,000	\$20,000	\$30,000
Major Organ Transplant (100%)	\$10,000	\$20,000	\$30,000
End Stage Renal Failure (100%)	\$10,000	\$20,000	\$30,000
Coronary Artery Bypass Surgery (25%)	\$2,500	\$5,000	\$7,500
Waiver of Premium (employee only)	Yes	Yes	Yes
CANCER CRITICAL ILLNESS BENEFITS†	PLAN 1	PLAN 2	PLAN 3
Invasive Cancer (100%)	\$10,000	\$20,000	\$30,000
Carcinoma in Situ (25%)	\$2,500	\$5,000	\$7,500
SUPPLEMENTAL CRITICAL ILLNESS I BENEFITS†	PLAN 1	PLAN 2	PLAN 3
Advanced Alzheimer's Disease (25%)	\$2,500	\$5,000	\$7,500
Advanced Parkinson's Disease (25%)	\$2,500	\$5,000	\$7,500
Benign Brain Tumor (100%)	\$10,000	\$20,000	\$30,000
Coma (100%)	\$10,000	\$20,000	\$30,000
Complete Blindness (100%)	\$10,000	\$20,000	\$30,000
Complete Loss of Hearing (100%)	\$10,000	\$20,000	\$30,000
Paralysis (100%)	\$10,000	\$20,000	\$30,000
Occupational HIV (100%)	\$10,000	\$20,000	\$30,000
ADDITIONAL BENEFIT	PLAN 1	PLAN 2	PLAN 3
Wellness Benefit (per year)	\$50	\$50	\$50

PLAN 1 - BI-WEEKLY PREMIUMS

\$10,000 Basic Benefit Amount

AGE	EE, EE+CH		EE+SP, F	
	Non-Tobacco			
18-35	\$3.54	\$5.36		
36-50	\$8.10	\$12.22		
51-60	\$16.60	\$24.96		
61-63	\$25.92	\$38.94		
64+	\$38.06	\$57.14		
Tobacco				
18-35	\$5.44	\$8.20		
36-50	\$13.32	\$20.04		
51-60	\$27.44	\$41.22		
61-63	\$39.68	\$59.56		
64+	\$58.46	\$87.74		

PLAN 2 - BI-WEEKLY PREMIUMS

\$20,000 Basic Benefit Amount

AGE	EE, EE+CH		EE+SP, F	
	Non-Tobacco			
18-35	\$6.02	\$9.10		
36-50	\$15.16	\$22.80		
51-60	\$32.16	\$48.30		
61-63	\$50.80	\$76.26		
64+	\$75.08	\$112.66		
Tobacco				
18-35	\$9.80	\$14.76		
36-50	\$25.60	\$38.44		
51-60	\$53.86	\$80.84		
61-63	\$78.32	\$117.52		
64+	\$115.88	\$173.86		

PLAN 3 - BI-WEEKLY PREMIUMS

\$30,000 Basic Benefit Amount

AGE	EE, EE+CH		EE+SP, F	
	Non-Tobacco			
18-35	\$8.52	\$12.84		
36-50	\$22.24	\$33.40		
51-60	\$47.72	\$71.62		
61-63	\$75.68	\$113.58		
64+	\$112.10	\$168.20		
Tobacco				
18-35	\$14.20	\$21.34		
36-50	\$37.88	\$56.86		
51-60	\$80.26	\$120.42		
61-63	\$116.96	\$175.48		
64+	\$173.28	\$259.98		

EE = Employee; EE + SP = Employee + Spouse;
EE + CH = Employee + Child(ren); F = Family

CERTIFICATE SPECIFICATIONS

Eligibility

Your employer decides who is eligible for your group (such as length of service and hours worked each week). Issue ages are 18 and over.

Dependent Eligibility/Termination

Family members eligible for coverage are your spouse or domestic partner and children. Coverage for children ends when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent. Spouse coverage ends upon valid decree of divorce or your death. Domestic partner coverage ends when the domestic partnership ends or your death.

When Coverage Ends

Coverage under the policy ends on the earliest of: the date the policy is canceled; you stop paying your premium; the last day of active employment; you are no longer eligible; a false claim is filed; when all benefits have been paid under the policy.

Continuing Your Coverage

You may be able to continue coverage when coverage under the policy ends. Refer to your Certificate of Insurance for details.

EXCLUSIONS AND LIMITATIONS

Conditions and Limits

A diagnosis occurring before your coverage begins is not payable; however, a diagnosis of any covered critical illness after your effective date will be payable. Benefits are subject to the Pre-Existing Condition Limitation as well as all other limitations and exclusions. All critical illnesses must meet the definitions and dates of diagnoses stated in the certificate and be diagnosed by a physician while coverage is in effect. The date of diagnosis for each illness must be separated by 90 days. Emergency situations outside the U.S. will be considered when you return to the U.S.

If the first diagnosis of cancer occurs before the effective date of coverage, benefits are paid for a subsequent diagnosis of cancer after the effective date, subject to the terms and conditions in the certificate.

Pre-Existing Condition Limitation

Benefits are not paid for: a critical illness that is, caused by, contributed to by or results from, a pre-existing condition when the date of diagnosis is within 12 months after the effective date of coverage. This exclusion will not apply to your newborn child, adopted child or foster child under the age of 18 if we are notified within 31 days of the child's birth or date of placement. A pre-existing condition is a condition for which medical advice or treatment was recommended or received from a medical professional within 12 months prior to the effective date.

Exclusions

Benefits are not paid for: active participation in a riot, insurrection or rebellion; intentionally self-inflicted injury or action; illegal activities or occupations; suicide while sane, or self-destruction while insane, or any attempt at either.



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ABJ29762X-2

This brochure is for use in enrollments situated in NC.

Rev. 4/21. This material is valid as long as information remains current, but in no event later than April 1, 2024. Group Critical Illness benefits are provided under policy form GVCIP2, or state variations thereof.

The coverage provided is limited benefit supplemental critical illness insurance. The policy is not a Medicare Supplement Policy. If eligible for Medicare, review Medicare Supplement Buyer's Guide available from Allstate Benefits.

This is a brief overview of the benefits available under the group policy underwritten by American Heritage Life Insurance Company (Home Office, Jacksonville, FL). Details of the coverage, including exclusions and other limitations are included in the certificates issued. For additional information, you may contact your Allstate Benefits Representative.

The coverage does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.

Give your kids a strong financial start.

Unum Whole Life Insurance for children can help.

Teach your kids to start saving now.

Katie and Derek work hard for what they have. But they're also smart financial planners who save their money — and they're teaching their kids to do the same. By buying a life insurance policy that accumulates cash value, they can save for their children's future. *Now that's a smart lesson.*



Features that add value

1. **Cash value** — Accumulates at a rate of 4.5%*. You can borrow from the cash value if you choose, or use it to buy a reduced policy with no more premiums.
2. **Policy amounts of \$1 to \$3 per week require no health questions** if you apply when you are first eligible. If you wait, there will be a few medical questions.** Coverage beyond \$3 per week is available but requires health questions to determine eligibility.
3. **At age 70, the policy is fully paid up.** This means no more premiums must be paid. The benefit is payable to the beneficiaries upon death.

How to apply

To learn more, watch for information from your employer.

Financial protection for your family

If an accident or illness were to claim the life of your child, this policy could provide the resources needed to deal with the financial strain of your loss — so you can take care of your family during this difficult time.

This coverage can be purchased without purchasing employee coverage. **Each policy covers one child or grandchild; you can purchase coverage for each of your children and grandchildren.**

Child eligibility

Coverage is available to your:

- Children (natural and legally adopted)
- Stepchildren
- Grandchildren

Children/grandchildren are eligible from 14 days old until their 26th birthday. Children must reside in the U.S. to receive coverage.

Three reasons to buy this coverage at work

1. You get competitive rates when you buy this policy through your employer, and the premiums are conveniently deducted from your paycheck.
2. You own the policy so you can keep it even if you leave the company or retire. Unum will bill you directly for the same premium amount.
3. Coverage becomes effective on the first day of the month in which payroll deductions begin.

My child's Whole Life coverage

Amount I applied for: \$ _____

Cost per pay period: \$ _____

Date deductions begin: ____/____/____

(For your records — complete during your enrollment)

Get the coverage you want.

Amounts and values

Issue age	Weekly premium \$1		Weekly premium \$2		Weekly premium \$3		Weekly premium \$4		Weekly premium \$5	
	Coverage amount	Cash value at age 65*	Coverage amount	Cash value at age 65*	Coverage amount	Cash value at age 65*	Coverage amount	Cash value at age 65*	Coverage amount	Cash value at age 65*
0	\$7,461	\$3,236	\$14,921	\$6,472	\$22,382	\$9,708	\$29,842	\$12,944	\$37,303	\$16,180
1	\$7,450	\$3,228	\$14,900	\$6,456	\$22,350	\$9,684	\$29,799	\$12,912	\$37,249	\$16,140
2	\$7,429	\$3,217	\$14,857	\$6,434	\$22,286	\$9,651	\$29,714	\$12,868	\$37,143	\$16,085
3	\$7,345	\$3,177	\$14,689	\$6,354	\$22,034	\$9,531	\$29,379	\$12,708	\$36,723	\$15,885
4	\$7,232	\$3,125	\$14,465	\$6,250	\$21,697	\$9,375	\$28,929	\$12,500	\$36,161	\$15,625
5	\$7,084	\$3,058	\$14,169	\$6,116	\$21,253	\$9,174	\$28,338	\$12,232	\$35,422	\$15,290
6	\$6,924	\$2,986	\$13,848	\$5,972	\$20,772	\$8,958	\$27,696	\$11,944	\$34,621	\$14,930
7	\$6,753	\$2,909	\$13,506	\$5,818	\$20,260	\$8,727	\$27,013	\$11,636	\$33,766	\$14,545
8	\$6,574	\$2,828	\$13,148	\$5,656	\$19,722	\$8,484	\$26,296	\$11,312	\$32,870	\$14,140
9	\$6,380	\$2,741	\$12,761	\$5,482	\$19,141	\$8,223	\$25,521	\$10,964	\$31,902	\$13,705
10	\$6,198	\$2,659	\$12,396	\$5,318	\$18,594	\$7,977	\$24,791	\$10,636	\$30,989	\$13,295
11	\$5,998	\$2,570	\$11,995	\$5,140	\$17,993	\$7,710	\$23,991	\$10,280	\$29,988	\$12,850
12	\$5,810	\$2,486	\$11,620	\$4,972	\$17,430	\$7,458	\$23,240	\$9,944	\$29,050	\$12,430
13	\$5,622	\$2,401	\$11,243	\$4,802	\$16,865	\$7,203	\$22,486	\$9,604	\$28,108	\$12,005
14	\$5,445	\$2,322	\$10,890	\$4,644	\$16,335	\$6,966	\$21,780	\$9,288	\$27,225	\$11,610
15	\$5,274	\$2,245	\$10,548	\$4,490	\$15,822	\$6,735	\$21,095	\$8,980	\$26,369	\$11,225
16	\$5,118	\$2,175	\$10,236	\$4,350	\$15,354	\$6,525	\$20,472	\$8,700	\$25,591	\$10,875
17	\$4,967	\$2,107	\$9,933	\$4,214	\$14,900	\$6,321	\$19,866	\$8,428	\$24,833	\$10,535
18	\$4,828	\$2,044	\$9,656	\$4,088	\$14,485	\$6,132	\$19,313	\$8,176	\$24,141	\$10,220
19	\$4,693	\$1,983	\$9,386	\$3,966	\$14,079	\$5,949	\$18,773	\$7,932	\$23,466	\$9,915
20	\$4,565	\$1,925	\$9,131	\$3,850	\$13,696	\$5,775	\$18,262	\$7,700	\$22,827	\$9,625
21	\$4,441	\$1,869	\$8,881	\$3,738	\$13,322	\$5,607	\$17,763	\$7,476	\$22,203	\$9,345
22	\$4,323	\$1,815	\$8,645	\$3,630	\$12,968	\$5,445	\$17,290	\$7,260	\$21,613	\$9,075
23	\$4,207	\$1,762	\$8,414	\$3,524	\$12,621	\$5,286	\$16,828	\$7,048	\$21,036	\$8,810
24	\$4,098	\$1,712	\$8,195	\$3,424	\$12,293	\$5,136	\$16,391	\$6,848	\$20,489	\$8,560
25	\$3,994	\$1,664	\$7,988	\$3,328	\$11,982	\$4,992	\$15,975	\$6,656	\$19,969	\$8,320

* For policies effective 1/1/20 and after, cash value accumulation is based on a non-forfeiture interest rate of 4.5% and the 2017 CSO mortality table. For policies effective prior to that date, the 2001 CSO mortality table will be used.

When you buy life insurance, you name the people who will receive the money from the policy when you die. These people are called beneficiaries. Unum will pay benefits to the beneficiaries in one lump sum; however, if a beneficiary is a minor (typically younger than 18, but this may vary by state) and no financial guardian has been appointed, the benefits will be paid to that minor through a Unum Retained Asset.

A Unum Retained Asset Account is a fund held in Unum's general account for the named minor beneficiary. The account accrues interest regardless of Unum's actual investment performance, and, while not FDIC insured, the account funds are fully guaranteed by Unum. For more information about the retained asset account, please contact Unum.

** \$2 per week maximum in WA

Exclusions: Life insurance benefits will not be paid for deaths caused by suicide. If within 24 months (12 months in North Dakota) from the policy effective date, the insured commits suicide, whether sane or insane, Unum will not pay the death benefit. The amount payable by us in place of all other benefits, shall be the sum of premiums paid, without interest, less the sum of any debt and the cost of any riders.

Termination: The policy will terminate on the earliest of the following:

1. written request by you to terminate the policy;
2. the insured dies;
3. the policy matures; or
4. the loan value exceeds the guaranteed cash value of this policy.

Underwritten by: Provident Life and Accident Insurance Company, Chattanooga, Tennessee
In NY, underwritten by: First Unum Life Insurance Company, New York, New York

The information is not intended to be a complete description of the insurance coverage available. The policies or their provisions may vary or be unavailable in some states. The policies have exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form L-21848 and FUL-21848-NY or contact your Unum representative.

Unum complies with all state civil union and domestic partner laws when applicable.

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If you weather a serious disability, could your finances ride out the storm?

Unum's Long Term Care (LTC) Rider can help you protect your savings.

Protecting long term plans

Marcia's savings are modest, but she's worked hard for every penny. She wants to travel to Italy, pay for her daughter's wedding, and leave something behind for those she loves. But she's seen how quickly the cost of long term care can deplete a lifetime of savings. She wants to make sure a traumatic accident or illness won't threaten her nest egg.

Benefits for the long haul

Thanks to modern medicine, people are now living longer and surviving very serious health problems. But that can mean long term treatment in a nursing home or assisted living facility. And the same care that saves your life can devastate your savings.

You may be surprised to learn that this care isn't covered by health or other insurance policies. Or that waiting for "later" to buy a long term care policy may make things worse. In fact, the younger you are, the less expensive this coverage is.

By adding a Long Term Care Rider to your Life Insurance policy, you can help protect your savings from being drained by this expensive care. Most importantly, this coverage allows you to use the benefit whether you receive care at home, or in a long term care facility, an assisted living facility, an adult day care, or a nursing home.

How to apply) To learn more, watch for information from your employer.

How long term care benefits work

Here is an example of how this LTC rider can help you finance a period of long term care. This illustration is based on an insured individual who has a \$25,000 Life Insurance policy.*

HIGHLIGHTS	
BASE RIDER — Employer-selected	
LTC pays 6% monthly benefit for either LTC facility benefit or assisted living facility benefit. Payments reduce the death benefit until exhausted (approximately 16 months).	\$1,500 per month
Restoration Benefits Rider** — Employee-selected	
This rider restores 100% of the policy's specified amount (face amount), death benefit and cash value.	\$25,000 death benefit

* Assumes there are no outstanding policy loans.

** The Restoration Benefits Rider is not available with Voluntary Individual Universal Life policies. It is also not available with the Whole Life paid-up-at-70 option. See back for details.

Get the coverage you need.

Here are the advantages of our Long Term Care Rider:

- Available at initial offering to employees and spouses ages 15 to 70. All newly eligible adult policies will automatically receive the Long Term Care Rider.
- Available with policy's specified amount (face amount) of at least \$10,000.
- For long term care facility, nursing home care or assisted living facility, provides a maximum monthly benefit that is the lesser of:
 - 6% of the death benefit, less any policy debt at the end of the waiting period, or
 - \$3,000.
- For home health care or adult day care, provides a maximum monthly benefit that is the lesser of:
 - 4% of the death benefit, less any policy debt at the end of the waiting period;
 - your actual monthly expenses; or
 - \$1,500.
- Benefits are payable once you have been receiving long term care for 90 days, subject to the conditions of the rider.
- If you are receiving benefits, you don't have to pay the policy's monthly premiums, even if your policy does not have the Waiver of Premium Rider.
- The benefit period maximum is 100% of the death benefit, less any policy debt at the end of the waiting period for each benefit period.
- The cost is based on your age at issue and whether you use tobacco.
- The rider is tax-qualified, which means that any benefits you receive will not be taxed.†

For Whole Life coverage, the following option may be available for employees and spouses age 15-50:

You can pay an adjusted premium, so your policy will be paid up by age 70. Your Life coverage and Long Term Care coverage will continue as long as you keep your Life policy. (The Restoration Benefits Rider is not available with this option.)

Additional Long Term Care Rider Restoration Benefits Rider

- Restores 100% of the policy's specified amount (face amount), death benefit and cash value.
- Policy values reduced under the Long Term Care Benefit Rider will be restored one time.
- Not available with Voluntary Individual Universal Life policies.

See your outline of coverage for additional details.

† Under current tax laws.

Unum complies with all state civil union and domestic partner laws when applicable.

This information is not intended to be a complete description of the insurance coverage available. The coverage may vary or be unavailable in some states. The coverage has exclusions and limitations that may affect any benefits payable. For complete details of

coverage and availability, please refer to the Long Term Care rider and to policy form L-21848, L-21848-70, L-21825 or contact your Unum representative.

Underwritten by: Provident Life and Accident Insurance Company, Chattanooga, Tennessee

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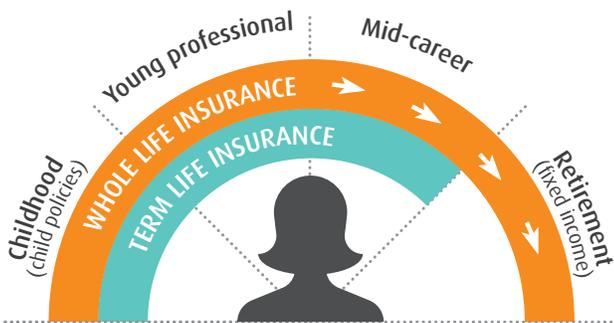
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Get lifetime coverage and useful cash benefits, too.

Whole Life Insurance provides much more than a death benefit — it also offers valuable “living benefits” that you can use during times of need. And you can keep your Whole Life coverage after you retire, making it an essential complement to Term Life.

Whole Life provides a lifetime of coverage.



Whole Life: Benefits for a lifetime

What is Whole Life?

- Whole Life offers “living benefits” you can use when you need them, as well as a death benefit.

What features are available?

- **Cash value.** This policy accumulates cash value.* You can borrow funds from this value as needed.
- **Living benefit option rider.** If you are diagnosed with a terminal illness, you can request up to 100% of your policy’s benefit amount and use it for any purpose.**
- **It includes a Long Term Care rider†** — See your plan administrator for more information.

How does it work?

- **Your premiums are level for life.** Premiums will be conveniently deducted from your paycheck.
- **Your death benefit is level, too.** The benefit does not decrease with age.
- **You own the policy.**†† You can keep the policy if you leave or retire. You’ll pay the same premium.

Three reasons to buy Whole Life at work — now!

- 1 **Whole Life rates.** The rates available through your employer are typically more affordable than those available elsewhere.
- 2 **Age-based premiums.** Premiums are based on your age when you purchase, and don’t increase as you get older. So the earlier you buy, the lower your premium will be for the life of your policy.
- 3 **Guaranteed issue.** Generally available during the initial enrollment at your workplace. When it’s offered to you, you can purchase coverage up to a set amount, without medical exams or health questions. If you don’t purchase the maximum amount, you have the option to increase it up to that level during future enrollments — no questions asked!#

Premium payment options

You may have two options for paying premiums:

- **“Lifetime premium.”** Coverage continues as long as you pay your premiums.
- **“Paid-up at 70.”** Available when purchased between the ages 15 and 50. Adjusts the premium so that the policy is fully paid up when you turn 70.

Sample rates based on \$25,000 benefit amount

Issue age	Lifetime premium		Paid-up at 70	
	Weekly premium	Guaranteed cash value at 65	Weekly premium	Guaranteed cash value at 65
25	\$ 4.19	\$9,840	\$ 4.91	\$10,996
35	\$ 6.44	\$8,851	\$ 7.76	\$10,567
45	\$10.79	\$7,140	\$13.92	\$ 9,716

Sample non-tobacco user rates. Premium rates vary by age, coverage amount and tobacco use. For illustration purposes only.

How to apply) To learn more, watch for information from your employer.

Get the coverage you need.

Coverage options available

Who can have it?	What's the benefit amount?	How long can they keep it?
Individual employee coverage Ages 15–80	You can purchase coverage for as low as \$3 a week (minimum benefit must be at least \$2,000). Your actual benefit amount is based on the premium amount chosen and your age when your coverage is issued.+	You can keep it as long as you want it. If you leave your employer, you would be billed directly at home.
Individual spouse coverage Ages 15–80	Coverage is available for as low as \$3 a week (minimum benefit must be at least \$2,000). The spouse coverage amount cannot exceed the employee base coverage amount.+	If you leave your employer, you can keep your spouse's policy and be billed directly at home.
Individual child coverage No employee or spouse purchase needed. Available to eligible children, stepchildren, legally adopted children and grandchildren (14 days until their 26th birthday) of the primary insured adult.	You can purchase coverage for as low as \$1 a week. Benefit amounts are based on the child's issue age and premium selected.+	Your children can keep it, even if you leave your employer. You would be billed directly at home.
Child Term Life Benefit With purchase of employee or spouse policy, available to eligible children, legally adopted children and stepchildren (14 days until their 25th birthday) of the primary insured adult.	\$1,000 to \$10,000 — one rider covers all children.	Coverage ends when your policy ends or when children turn 25. At that time, children are guaranteed the right to buy an individual Whole Life policy at 5 times the amount of their rider.

When you buy life insurance, you name the people who will receive the money from the policy when you die. These people are called beneficiaries. Unum will pay benefits to the beneficiaries in one lump sum; however, if a beneficiary is a minor (typically younger than 18, but this may vary by state) and no financial guardian has been appointed, the benefits will be paid to that minor through a Unum Retained Asset Account.

A Unum Retained Asset Account is a fund held in Unum's general account for the named minor beneficiary. The account accrues interest regardless of Unum's actual investment performance, and, while not FDIC insured, the account funds are fully guaranteed by Unum. For more information about the retained asset account, please contact Unum.

* The policy accumulates cash value based on a non-forfeiture interest rate of 4.5% and the 2001 CSO mortality table. The cash value is guaranteed and will be equal to the values shown in the policy. Cash value will be reduced by any outstanding loans against the policy.

** You can request an advance, up to 100% of your benefit amount up to \$150,000 maximum if you are terminally ill and are expected to live 12 months or less.

† Your policy may include a long term care rider which allows you to use the death benefit to pay for long term care. You must have received long term care for 90 days. Subject to rider conditions.

†† Coverage becomes effective the first day of the month your payment is deducted from your paycheck. If you leave your job, Unum will bill you directly.

If you increase your coverage later, you receive an additional policy for the increased amount. The premiums will be based on your age at the time you increase the coverage.

+ Actual benefit amount is based on the employee or dependent's age when the coverage is issued.

Employees must be U.S. citizens or legally authorized to work in the U.S. to receive coverage. Spouses and dependents must reside in the U.S. to receive coverage.

Exclusion: Life Insurance benefits will not be paid for deaths caused by suicide. If within 24 months from the policy

effective date, the insured commits suicide, whether sane or insane, Unum will not pay the death benefit. The amount payable by us in place of all other benefits, shall be the sum of premiums paid, without interest, less the sum of any debt and the cost of any riders.

Termination of coverage: The policy will terminate on the earliest of the following:

1. written request by you to terminate the policy; 2. the insured dies; 3. the policy matures; or 4. the loan value exceeds the guaranteed cash value of this policy.

Unum will provide coverage for a payable claim that occurs while you and your dependents are covered under the policy or plan.

Underwritten by: Provident Life and Accident Insurance Company, Chattanooga, Tennessee

This information is not intended to be a complete description of the insurance coverage available. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage please refer to policy form L-21848 and FUL-21848-NY or contact your Unum representative.

Unum complies with all state civil union and domestic partner laws when applicable.

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